

## **Address Change**

**Your Information** 

Signature

If you are retired, a beneficiary, or a deferred member, you may update your address by completing and signing this form or by logging into MemberDirect.

You may use this form to update the email address we use to contact you. If you would like to update your email address for MemberDirect, you must do so by logging into your MemberDirect account.

**If you move out of state**, MCERA cannot withhold state income tax and you must submit a new Tax Withholding Election Form.

**If you are an active member**, you must update your address through your employer. Updates made through your employer will be transmitted to MCERA.

## Name Social Security Number Last 4 **Old Address:** Street Address/PO Box City State Zip Code Phone Number Email Address **New Address:** Effective Date Mailing Address (Street Address/PO Box) City State Zip Code Physical Address (If your mailing address is a PO Box, your physical address is required for the IRS.) State Zip Code City Phone Number **Email Address** Would you like to receive our email newsletter at your new email address? Yes No **Authorization** This form will be rejected without your signature.

Date