

ADDRESS CHANGE NOTIFICATION

RETIREMENT SYSTEMS OF ALABAMA
P. O. Box 302150 ♦ Montgomery, Alabama 36130-2150
(334) 832-4140 or 1-800-214-2158
Web site: www.rsa.state.al.us

Retired Members: This form is for HOME ADDRESS ONLY
and is NOT to be used for DIRECT DEPOSIT Bank addresses.

Membership	
<input type="checkbox"/>	Employees' Retirement System
<input type="checkbox"/>	Teachers' Retirement System
<input type="checkbox"/>	Judicial Retirement Fund
<input type="checkbox"/>	RSA-1
<input type="checkbox"/>	PEIRAF
<input type="checkbox"/>	PEEHIP

Name: _____

Social Security Number: _____ - _____ - _____

Employer: _____
(Active Members Only)

Effective Date of New Address: ____ / ____ / ____

Status	
<input type="checkbox"/>	Active
<input type="checkbox"/>	Inactive
<input type="checkbox"/>	Retired
<input type="checkbox"/>	Beneficiary Receiving

Retired Members Only (Check below if applicable)	
<input type="checkbox"/>	I receive more than one monthly payment from RSA.
<input type="checkbox"/>	I wish to receive a form to request setup or change Direct Deposit to my bank.

Old Address		
Street or P. O. Box		
City	State	Zip Code
New Address		
Street or P. O. Box		
City	State	Zip Code

Signature _____

Date: _____