



WESTERN UNITE HERE AND EMPLOYERS PENSION FUND

Formerly known as San Diego UNITE HERE Pension Fund

ADDRESS CHANGE FORM

In order to have verification of your requested address change, please complete the information below and send back to the Administrative Office. The address change will not take place until the form has been returned with proper authorization, in writing, and along with your signature.

I _____, authorize the Trust Fund Office to make
(Please Print Name)

the following change effective as of _____.
(Date of Change)

MY NEW ADDRESS IS:

Telephone Number

Social Security Number

Signature

PLEASE RETURN WITH A COPY OF YOUR PHOTO ID