



Chicago Teachers' Pension Fund

# ADDRESS CONFIRMATION/UPDATE

203 North LaSalle Street, Suite 2600 | Chicago, IL 60601-1231  
312.641.4464 | Fax 312.641.7185 | www.ctpf.org



Please complete this form to verify your current address and contact information with CTPF.

## SECTION 1 – MEMBER INFORMATION

Legal Name: First	M.I.	Last	Last four digits of SSN
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CTPF Status (check one)    Retired                       Active teacher/administrator                       Inactive member

Telephone: Home	Cell	Birthdate (mm/dd/yy)
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Email

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## SECTION 2 – PERMANENT HOME ADDRESS (P.O. Box addresses not acceptable)

Address: Street	Apt. or Unit No.	
City	State	Zip
		Country

Effective Date:

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## SECTION 3 – OTHER MAILING ADDRESS

Complete this section if you want your mail sent to a location other than your permanent address. If your preferred mailing address is your permanent address, leave this section blank and sign below.

Mailing Address Type (check the address type that applies):    permanent address                       temporary address

Address: Street	Apt. or Unit no.	
City	State	Zip
		Country

If this address is a temporary change, please provide effective dates:

Beginning date:	Ending date:
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Signature	Date
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