

FIREFIGHTERS RETIREMENT SYSTEM

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CHANGE DOCUMENT

EFFECTIVE	DATE OF CHANGE	
Member's Name		Employed By
Social Securi	ity No.	_
INDICATE A	APPROPRIATE CHANGES:	
	CHANGE OF ADDRESS	
	New Address:	
	NAME CHANGE to	
	CHANGE OF MARITAL STAT	'US to
	CHANGE OF BENEFICIARY	
	From	
	То	
	Relationship to Member	Date of Birth
	Address	
Member's Signature		Date
Witness		