



The Retirement Board of the
Policemen's Annuity and Benefit Fund of Chicago

221 North LaSalle St – Suite 1626, Chicago, IL 60601
Office: (312) 744-3891 Website: www.chipabf.org

CHANGE OF ADDRESS - ANNUITANTS ONLY

SS# (last 4 digits) XXX -XX-_____

Annuitant Participant # _____

Annuitant Widow # _____ Annuitant Child # _____

Duty Disability # _____ Child Disability # _____

Heart Disability # _____ Total Disability # _____

Ordinary Disability # _____

If this change includes children, please note above AC# or CD#.

PLEASE CHANGE MY ADDRESS TO:

EFFECTIVE DATE OF CHANGE: _____

NAME _____

Please Print

Street Number Apt. #

City State Zip Code

() _____ () _____
Telephone Number Alternate Phone Number

Signature Date

**PLEASE CONTINUE TO HAVE MY ANNUITY / DISABILITY
PAYMENT DIRECT DEPOSITED TO MY FINANCIAL INSTITUTION.**