



WEST PALM BEACH POLICE PENSION FUND
OFFICE OF RETIREMENT

2100 North Florida Mango Road
West Palm Beach, Florida 33409

Phone: 561.471.0802

FAX: 561.471.5027

**PLEASE REFRAIN SENDING BACK THIS DOCUMENT
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OFFICE.**

ALSO USE LAST 4 OF SSN ONLY.

THANK YOU!

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CHANGE OF MEMBER'S NAME FORM

Effective Date : _____

Member's Former Name

Please Print: _____

Member's New Name

Please Print: _____

(Check Box) I have attached a legal document(s) that attests to such change.

The foregoing information revokes any and all prior data given to the Board of Trustees. I acknowledge that it is my responsibility to notify the Board of Trustees (or their designee) should there be any other change(s) in the future that may affect the accuracy of this form.

Member's Signature

Date

Office Use Only

Updated/Entered By: _____

Date: _____

Bank Representative Notified (if applicable)

Date: _____

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