**UNITED PROBATION OFFICERS ASSOCIATION WELFARE FUND**
**AND RETIREMENT WELFARE FUND**
375 West Broadway 4th Floor
New York, NY 10012
(212) 226-1069 Fax (212) 226-6181

# Change of Address Form

Please complete the information below and mail or fax a copy to the Benefits Office.

Member's Name _____ Active □ Retired □

Social Security Number (last 4 digits only) _____

Phone Number _____ Email Address _____

Old Address _____

_____

_____

New Address _____

_____

_____

Member's Signature _____ Date _____