

UNITED PROBATION OFFICERS ASSOCIATION WELFARE FUND & RETIREMENT WELFARE FUND

2510 Westchester Ave, Suite 207 • Bronx, NY 10461 • P: 212.226.1069 • F: 917.398.1640 • www.upoa.com

Change of Information Form

Please complete the information below and return the form by mail.

| Member's Name | | Active 🗌 | Retired 🗌 |
|---|------------|----------|-----------|
| Social Security Number (last 4 digits only) | | | |
| Home Phone | Cell Phone | | |
| Personal Email Address | | | |
| Old Home Address | | | |
| | | | |
| New Home Address | | | |
| | | | |
| | | | |
| | | | |

Member's Signature _____ Date ____