

# City of Aurora General Employees' Retirement Plan

## Change of Address Form for Retirees And Deferred Vested Participants

Name: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_

Retiree Signature \_\_\_\_\_ Date \_\_\_\_\_

### NEW ADDRESS

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

State of Residence for tax withholding purposes: \_\_\_\_\_

Effective Date: \_\_\_\_\_

### OLD ADDRESS

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

RETURN THIS FORM TO: **City of Aurora General Employees' Retirement Plan**  
12100 East Iliff Avenue, Suite 108  
Aurora, Colorado 80014  
Phone (303) 368-9160 Fax (303) 368-9181  
Email: [info@auroragerp.org](mailto:info@auroragerp.org)