

Retirement Funds of Georgia

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jpc@rfga.us

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Contact Information Change Request

Member Information

Member Name: _____ Member #: _____

Preferred Phone #: _____ Alternate Phone #: _____

Personal Email: _____

Mailing Address: _____

Street, City, State and Zip Code

Alternate Contact Information

ONLY TO BE CONTACTED SHOULD THE FUND BE UNABLE TO REACH THE MEMBER.

Alternative Contact Name: _____ Relationship: _____

Preferred Phone #: _____ Alternate Phone #: _____

Personal Email: _____

Mailing Address: _____

Street, City, State and Zip Code

Member's Signature

Date