



# CHANGE NOTICE

New York Life Investment Management LLC ("NYLIM"),  
P.O. Box 423, Parsippany, NJ 07054-0423

**This form is to be used to notify us of an address or name change**

## 1. Participant Information

Name of Participant as it currently appears in our records \_\_\_\_\_

Date of Birth (Month/Day/Year \_\_\_\_\_

Sex (Male/Female) \_\_\_\_\_

Social Security Number \_\_\_\_\_

Payment Status (Please Check One)

I AM currently receiving retirement benefit payments from New York Life.

I HAVE NOT YET STARTED receiving retirement benefit payments from New York Life.

## 2. Address Change

Effective: \_\_\_\_\_ please change my **address** as follows:  
Month Day Year

Address City State Zip Code

Citizenship: U.S.:  Other:  If other, please specify: \_\_\_\_\_

Phone: Home \_\_\_\_\_ Mobile \_\_\_\_\_ Other \_\_\_\_\_

## 3. Name Change

Effective: \_\_\_\_\_ please change my **name** as follows:  
Month Day Year

First Name Middle Name Last Name

Address City State Zip Code

Phone: Home \_\_\_\_\_ Mobile \_\_\_\_\_ Other \_\_\_\_\_

Reason for name change: (Please check appropriate box)

Marriage  Court Order  Divorce  Incorrectly Reported to New York Life

*If you have checked Marriage, Court Order or Divorce as your reason for the change in name, you must attach a copy of the legal document certifying the change.*

I certify that the above information is true and correct.

Participant Signature \_\_\_\_\_

Date \_\_\_\_\_