

Chairperson
Michael Greico

Trustees
Jennifer L Murphy
Roselyn Acevedo
Averell Golub
Yoseph Goldstein
Juanita Jordan
J.T. Lydon
Renee Sealey
Donna Orrr

New York State Court Clerks Association

Security Benefits Fund

170 Duane Street, New York, NY 10013
Office: (212) 941-5700
www.nyscourtcclerks.org



Change of Address Notification Form

Member's Last Name	Member's First Name	Member's SSN (last 4 digits)	Member's DOB	
E-mail Address	Telephone No.	Cell Phone No.	Active <input type="checkbox"/>	Retired <input type="checkbox"/>

Old Address

Member's <u>Old</u> Mailing Address	Apt. No.	City	State	Zip
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New Address

Member's <u>New</u> Mailing Address	Apt. No.	City	State	Zip
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I certify that the information given is correct
Member's Signature: _____ Date: _____

Please Complete and sign the form. Return all documents to the Fund Office. Upon receipt, we will give our prompt attention.

Mail or Email completed forms to:

New York State Court Clerks Association

170 Duane Street
New York, NY 10013
Office (212) 941-5700 – Email: courtclerkclaims@aol.com