



CHANGE OF ADDRESS REQUEST

TFO Completed: _____/By_____

For members of:
District Council 16 Health and Welfare Trust Fund
Northern California Glaziers, Architectural Metal and Glass Workers Trust Funds
Bay Area Painters and Tapers Trust Funds
Resilient Floor Pension Trust Fund

Please update my address for the following plan(s):

- | | | |
|--|---------------------|---|
| <input type="checkbox"/> District Council 16 Health and Welfare Plan | Phone: 800-922-9902 | Email: dc16info@hsba.com |
| <input type="checkbox"/> Northern California Glaziers Pension | Phone: 800-222-6298 | Email: glaziersinfo@hsba.com |
| <input type="checkbox"/> Bay Area Painters and Tapers Pension | Phone: 866-894-3705 | Email: paintersinfo@hsba.com |
| <input type="checkbox"/> Resilient Floor Pension Trust Fund | Phone: 800-782-0010 | Email: resilientinfo@hsba.com |
| <input type="checkbox"/> Glaziers IARP – John Hancock | Phone: 800-222-6298 | Email: glaziersinfo@hsba.com |
| <input type="checkbox"/> Painters Annuity – John Hancock | Phone: 866-894-3705 | Email: paintersinfo@hsba.com |

In order to update your mailing address for your Pension and your Health and Welfare plans, you must submit your change of address by signature and in writing. Please complete the necessary information as indicated below.

Participant Name: _____

Last four digits of SSN: _____

WE DO NOT ENCOURAGE ELECTRONIC TRANSMITTAL OF DOCUMENTS CONTAINING YOUR FULL SOCIAL SECURITY NUMBER

Local Union#: _____

OLD ADDRESS: _____

NEW ADDRESS: _____

New Address Effective Date: _____

Email Address: _____

Telephone Number: (_____) _____

Mobile Number: (_____) _____

Signature: _____ **Date:** _____

MAIL, FAX (925) 833-7301, or EMAIL this form to:

Health Services & Benefit Administrators
4160 Dublin Boulevard, Suite 400
Dublin, CA 94568