





2018 Change in Personal Information Form

Use this form to report:

- A new address, phone number or email
- A change in your marital status
- Birth, adoption, fostering, or legal guardianship of a child
 If you want to report a death, please call Client Services at (866) 802-6333 Monday Friday 8:30AM 8:00PM
 (excluding holidays).

Who should complete the form:

 Clerics or lay employees participating in a pension or retirement savings product sponsored by The Church Pension Fund

Your Personal Information	Name, address, and/or e	email updated? Yes	No
Legal Name First	MI	Last	
Mailing Address Street			
City	State	ZIP	Country
Home Phone		Mobile Phone	
Email			
Social Security #/TIN # (last 4 digits	only)	Date of Birth	
Canonical Residence (if applicable)			
Marital Status Change report Spouse's Legal Name First	ing Marriage Div	orce Last	
Gender Male Female			
Social Security #/TIN #		Date of Birth	
Date of Marriage Date Divorce Finalized			
Children Change Birth Child's Legal Name First	Adoption Fostering	Legal Guardianship Last	
Gender Male Female			
Social Security #/TIN #	_		
Date of Birth	of Birth Date of Legal Adoption, Fostering, or Legal Guardianship		
If your child is or becomes disabled, disability to us.	please contact Client Sen	vices at the number below a	at (866) 802-6333 to report his/her
Signature		Date	

Submit the completed and signed form with supporting documentation to:

The Church Pension Fund, 19 East 34th Street, New York, NY 10016, Attn: Client Services or email the form to benefits@cpg.org

If you have any questions, call us at (866) 802-6333, Monday – Friday, 8:30AM – 8:00PM ET (excluding holidays). 04/2018