

**MILWAUKEE COUNTY  
EMPLOYEES' RETIREMENT SYSTEM (ERS)**

Courthouse, Room 210-C  
901 North 9<sup>th</sup> Street  
Milwaukee, WI 53233  
(414) 278-4207  
(877) 652-6377

**CHANGE OF ADDRESS REQUEST**

*\* Denotes Required Field*

\* Print Name: \_\_\_\_\_

\* Social Security# (last 4 digits): \_\_\_\_\_

\* ERS ID (6 digit # found on your direct deposit notice): \_\_\_\_\_

\* Effective Date: \_\_\_\_\_

New Mailing Address:

\* Street or Box No. \_\_\_\_\_

\* Apartment or Unit No. (if needed) \_\_\_\_\_

\* City, State and Zip Code \_\_\_\_\_

E-mail address: \_\_\_\_\_

\* Daytime telephone number: \_\_\_\_\_

\* Signature: \_\_\_\_\_

(If you are signing for the retiree as their Power of Attorney or Guardian, ERS must have a copy of the Power of attorney or Guardianship paperwork authorizing you to sign on their behalf. If you have not previously sent a copy for our records, please provide a copy with this form.)

Mail completed form to address above or fax it to (414) 223-1387.