



SOCIAL SECURITY CORRECTION FORM

Pension Fund Name: _____

Pensioner's Legal Full Name (include middle initial): _____

Social Security Number Change

Change my Social Security Number ***From:***

Social Security #: _____ - _____ - _____

Change my Social Security Number ***To:***

Social Security #: _____ - _____ - _____

Explain Reason for Change: _____

(Because Social Security Numbers are very important, we respectfully request a copy of your social security card with this form in order to update your records.)

By signing below, I certify that the information above is accurate to the best of my knowledge:

Signature: _____

Date: _____

Home Phone Number: (____) _____

Cell Phone Number: (____) _____

Email Address (Please Print Clearly): _____

Please return the signed document to our Benefits Team: ***(For your protection do not email the copy of your Social Security Card, please fax or mail)***

- Fax to 866.952.2430
- Mail to Lauterbach & Amen, LLP
668 N. River Road
Naperville, IL 60563