

# Change of Personal Data Form

Elevator Constructors Annuity and 401(k) Retirement Plan  
60041



Use this form to notify your employer of a change in your address, name, or to correct other information. Please circle the information that needs to be corrected and give to your employer. Your employer will change their permanent records to reflect the change.

## General Information

Employer Name: \_\_\_\_\_

Employee's Name: \_\_\_\_\_

Local Number: \_\_\_\_\_

Employee SSN#: \_\_\_\_\_

Employee's Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Employee's Phone Number: (\_\_\_\_\_) \_\_\_\_\_

Employee's Birthdate: \_\_\_\_/\_\_\_\_/\_\_\_\_ Hire Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Married     Not married or legally separated

Other Information: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

EMPLOYEE SIGNATURE

DATE

EMPLOYER SIGNATURE

DATE