

Vermont State Retirement Systems
Retiree Change of Address Form

Date: _____

Name (Please Print): _____

Retirement ID#/SS#: _____

Effective Date: _____

Old Address:

New Mailing Address:

Physical Address
(legal residency):

Signature: _____

Mail to:
Vermont Retirement Systems
109 State Street, 4th Floor
Montpelier, VT 05609-6901