

CITY OF PITTSBURGH

EMPLOYEE CHANGE OF ADDRESS/NAME/TELEPHONE

FORMER NAME/ADDRESS/TELEPHONE

NEW NAME/ADDRESS/TELEPHONE

DEPARTMENT _____

BUREAU _____

BARGAINING UNIT _____

POSITION _____

SOCIAL SECURITY NUMBER _____

DISTRIBUTION:
PERSONNEL & CIVIL SERVICE (WHITE)
EMPLOYEE BENEFITS (GREEN,GOLD,PINK)
PENSION (YELLOW)

SIGNATURE OF EMPLOYEE

DATE

FOR BENEFITS STAFF USE ONLY:		
_____ HEALTH	_____ DENTAL	_____ VISION