

Jefferson County Name and/or Address Change Form



☐ New Name

* Must provide supporting documentation.

(Drivers License, Social Security Card or Marriage License)

Employee Name:	Social Security #
Former Name:	

☐ New Address

Name	Social Security #	
Address (Number & Street)	P.O. Box	Apt./Ste. #
City	State	Zip Code
Home Phone #	Work Phone #	

* Request for name and/or address change must accompany a Form W-4.

Signature:	Date:
------------	-------

Return to:
Jefferson County
Risk Management Department
215 Franklin St., Suite 202
Beaumont, TX 77701
Phone (409) 835-8672 Fax (409) 835-8634

Risk Management Use Only	White Copy TCDRS #222 <input type="checkbox"/> Yellow Copy Payroll <input type="checkbox"/> Pink Copy Risk Management <input type="checkbox"/>
--------------------------	--