



**Safe Harbor Retirement Plan**

**Name Change Request**

New Name: \_\_\_\_\_ Previous Name: \_\_\_\_\_

Social Security Number (last four digits only): XXX-XX-\_\_\_\_\_ Employee ID: \_\_\_\_\_

Home Address: \_\_\_\_\_

\_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please return the completed form to us by mail or email	
<u>Mail</u> County of Ventura Human Resources - Safe Harbor Retirement Plan 800 South Victoria Avenue #1970 Ventura, CA 93009-1970	<u>Email</u> safe.harbor@venturacounty.gov  <u>Questions?</u> Email or call us at 805-654-2921