



**Pacific Maritime Association
Payroll Services**

PAYROLL CHANGE OF ADDRESS FORM

All fields are required and must be completed.

Return form by: Mail ▶ PMA Attn: Longshore Payroll Services
555 Market Street, 3rd Floor, San Francisco, CA 94105

Fax ▶ (775) 824-3776

Email ▶ prsmail@pmanet.org

❶ Name (First, MI, Last)		❷ Last 4 of Social Security Number XXX-XX- _____	❸ Payroll / Registration Number	
W4 TAX ADDRESS				
❹ New Address (Number and Street or Rural Route)		❺ City	❻ State	❼ Zip Code
OPTIONAL ALTERNATE ADDRESS FOR CHECK AND W2 MAILING (IF DIFFERENT FROM ABOVE)				
Ⓣ New Address (Number and Street or Rural Route)		Ⓟ City	Ⓡ State	Ⓢ Zip Code
▶ Signature			▶ Date	

(01/2020)