Dresser Benefits Group
Address/Phone Number Change Form

Name: _____
LAST FIRST MI

Social Security Number (SSN): _____

If you are a beneficiary receiving a pension benefit, complete this box:

Participant's Name: _____
LAST FIRST MI

Participant's Social Security Number (SSN): _____

Old Address: _____

_____

_____

New Address: _____

_____

_____

Is this a temporary address change? _____ No Yes, expiration date: _____

Effective Date for New Address: _____

Is your phone number also changing? _____ No

Yes, new phone number: (**) _____**
Area Code

***Signature**: _____ **Date**:_____

***If this form is signed by anyone other than the person receiving benefits, a copy of the Power of Attorney must be attached.**

Please return completed form to:
Dresser Benefits Group
15455 Dallas Parkway, Suite 1100
Addison, Texas 75001

If you have any questions, please contact the Dresser Benefits Group at 1-866-325-8214, Monday through Friday, 8:00 am until 5:00 pm Central Standard Time.