

# ADDRESS/NAME CHANGE REQUEST

To request an address and/or name change, complete the information below and return this form to Pacific Life & Annuity Company.

**Address Change:**

- Payment & Residence  
 Residence Only  
 Payment Only (For direct deposit, please complete a Direct Deposit Request Form.)

New Address: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_ E-Mail: \_\_\_\_\_

**Residence Address (if different from above):**

\_\_\_\_\_ Phone: ( ) \_\_\_\_\_  
\_\_\_\_\_

**Name Change:**

- Claimant/Payee  
 Parent/Guardian

New Name: \_\_\_\_\_  
Former Name: \_\_\_\_\_

**\* For name changes please attach a copy of the legal document that supports the change.**

Contract Number: \_\_\_\_\_

Claimant/Payee SSN: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

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

All rights of ownership and control of the annuity contract shall remain with Pacific Life & Annuity Services, Inc. or, if unassigned, insurer or contract owner.

No change of address is final. To revoke a current address change or make further changes, please submit the request in writing or contact a customer service representative toll-free at **(888) 728-5611** for further information.



*Structured Settlements Annuity Services*

P.O. Box 84307 Lincoln, NE 68501-4307 Toll Free (888) 728-5611 FAX (402) 479-0102