



LOS ANGELES POLICE RELIEF ASSOCIATION, INC.

600 N. Grand Avenue, Los Angeles, CA 90012 | Tel (213) 674-3701 or (888) 252-7721 | Fax (213) 674-3715 | www.lapra.org

## Verification of Address

Name: \_\_\_\_\_  
Last Name First Name M. I.

Social Security Number (Last 4 digits): \_\_\_\_\_ Serial # \_\_\_\_\_

Status:  Active  Retired  COBRA

### Permanent Residence Street Address:

Street Address: \_\_\_\_\_

Apt. No. \_\_\_\_\_  Unit No. \_\_\_\_\_  Space No. \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Work Phone No. \_\_\_\_\_ Home Phone No. \_\_\_\_\_

Mobile No. \_\_\_\_\_ E-mail Address: \_\_\_\_\_

### Mailing Address (Only if different from your Permanent Residence Address):

Street Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Member's Signature:  \_\_\_\_\_ Date: \_\_\_\_\_

LAPRA Staff Member: \_\_\_\_\_ Date Stamp: \_\_\_\_\_  
Print Name



0284 Verification of Address Form