

# MILLER CREEK ELEMENTARY SCHOOL DISTRICT

380 Nova Albion Way, San Rafael, CA 94903

415-492-3712

FAX: 415-492-3723

---

## CHANGE OF ADDRESS FORM

TO: Payroll Department  
District Office

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

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Work Site: \_\_\_\_\_

(New) Address: \_\_\_\_\_

*Street / PO Box*

\_\_\_\_\_  
*City, State and Zip*

Cell Phone #: \_\_\_\_\_ Home Phone #: \_\_\_\_\_

Email address: \_\_\_\_\_

---

*District Office use only:*

**Payroll Department**

QSS / QCC

Medical Plan

Dental / Vision Plans

Voluntary Benefits

CalPERS

*(NOTE: STRS is notified through payroll transmission)*

**Personnel:** *Certificated*  or *Classified*

Sub System

Directory

**Accounts Payable**  [AP Vendor # \_\_\_\_\_]

**Front Desk**