Retirement Progress Report Delivery Preference

AS 2046 (REV 01/16)

California State Teachers' Retirement System
P.O. Box 15275, MS 85
Sacramento, CA 95851-0275
800-228-5453
CalSTRS.com

Use this form to elect to receive a paper copy of your annual *Retirement Progress Report* by U.S. Mail, or to change your election to receive your report exclusively online on *my*CalSTRS. **Please read the instructions carefully before completing this form.**

Instructions

Complete Sections 1 and 2. Print clearly using black or blue ink. Return your completed form by mail, fax, or hand delivery:

Mail
CalSTRS
P.O. Box 15275, MS 85
Sacramento, CA 95851-0275

Fax
916-414-5474

Hand Delivery
Hand deliver your form to a local CalSTRS benefit counseling office. For a listing of offices, visit CalSTRS.com/localoffices.

Online
For fastest processing, use *my*CalSTRS to set your preferences instead of returning this form. Log in to your *my*CalSTRS account and select *Update Your Profile*.

Section 1: Member Information

CLIENT ID OR SOCIAL SECURITY NUMBER

NAME (LAST, FIRST, INITIAL)

MAILING ADDRESS

DATE OF BIRTH (MM/DD/YYYY)

CITY, STATE AND ZIP CODE

TELEPHONE NUMBER

EMAIL ADDRESS

☐ The mailing address, telephone number, or email address noted above has changed from my previous contact information.

Section 2: Member Authorization

☐ I elect to receive my annual *Retirement Progress Report* exclusively online at *my*CalSTRS. I understand I will no longer receive my report by mail and this election will remain in effect until I change it by submitting a new form or online at *my*CalSTRS.

☐ I elect to receive a paper copy of my annual *Retirement Progress Report* at the mailing address listed above.

SIGNATURE

DATE (MM/DD/YYYY)

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