



**SUFFOLK COUNTY**  
**Public Employees Deferred Compensation Plan**  
**PARTICIPANT MAINTENANCE FORM**

**1. Current Participant Information**

\_\_\_\_\_  
Name

\_\_\_\_\_  
Social Security Number

**2. Changes    Address changes can also be made over the phone by calling 1-888-457-5770**

- Address Change    New Home Address:

\_\_\_\_\_

\_\_\_\_\_

- Email Address Change

New Email Address: \_\_\_\_\_

- Phone Number Change

New Daytime Phone Number: \_\_\_\_\_

- Name Change\*

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

\*You must include a copy of your marriage license, divorce decree, court documents documenting a name change or driver's license.

**3. Signature**

\_\_\_\_\_  
Participant's Signature

\_\_\_\_\_  
Date

**4. Submit**

Mail completed form to: T. Rowe Price, PO Box 17215, Baltimore, MD 21297-1215