

**THE LOS ANGELES
POLICE PROTECTIVE LEAGUE**



ADDRESS CHANGE FORM

1308 W. 8th St., Suite 400, Los Angeles, CA 90017
Tel: (213) 251-4554 Fax: (213) 251-4566 www.lapd.com

Date: _____ Division: _____ Serial #: _____ DOB: _____
Rank: _____

Name: _____

Home phone: _____ Mobile phone: _____

Work phone: _____

New address: _____

City: _____ State: _____ Zip: _____

Email address: _____

(personal emails only)

Please check box if you would like to receive our monthly *TBL E-Newsletter* via email.

Please check box if you would like to receive periodic *TBL Press Releases* (police-relate

Comments: _____

Signature: _____ Date: _____

Staff use only:

Initials:

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