



**Housing Authority of the City and County of San Francisco**  
Housing Choice Voucher – Contact Information Update Form

**CONTACT INFORMATION UPDATE FORM**

<b>Contact Information</b>			
<b>Full Name:</b>			
<b>Home Phone Number:</b>			
<b>Mobile Phone Number:</b>	<b>Text OK:</b> <input type="checkbox"/>		
<b>E-mail Address:</b>			
<b>Preferred Contact Method:</b>			
<input type="checkbox"/> Text Message	<input type="checkbox"/> Phone Call (Mobile)	<input type="checkbox"/> Phone Call (Home)	<input type="checkbox"/> E-mail

<b>Change of Address</b>	
<i>Please only complete if you have moved and have not communicated your address change to the Authority.</i>	
<u>Old Address</u>	
<b>Street:</b>	
<b>City, State:</b>	<b>Zip Code:</b>
<u>New Address</u>	
<b>Street:</b>	
<b>City, State:</b>	<b>Zip Code:</b>

<b>Preferred Language</b>				
<input type="checkbox"/> English	<input type="checkbox"/> Chinese	<input type="checkbox"/> Russian	<input type="checkbox"/> Spanish	<input type="checkbox"/> Vietnamese

Please contact our main line at (415) 715-5200 or TTY: (415) 467-6754 if you have any questions or require assistance completing this form.

Please submit the completed form through mail, e-mail, or fax.