

Request for Pension Verification Letter (Request for Award Letter)

Member Information	
Name:	Date Requested:
Email:	Phone:

Where to send verification letter:

(Financial Institution, Email, Home, Interoffice, Fax, Pickup, etc.)

Member's Signature: _____

Please fax, mail or email completed form to FPDR at:

Fax: 503-823-5166
Mail: 1800 SW 1st Ave, Suite 250
Portland, OR 97201
Email: fpdr@portland.gov

