

P.O. Box 17215  
Baltimore, Maryland 21297-1215

4515 Painters Mill Road  
Owings Mills, Maryland 21117-4903

**RE: MCPS Deferred Compensation (457(b)) Plan  
Participant Maintenance Letter of Instruction**

Dear Participant:

In response to your request for a name or address change from the Plan, enclosed are the following items:

- Participant Maintenance Form
- Courtesy reply envelope (addressed to T. Rowe Price)

Please complete the form and return it to:

Regular Mail

T. Rowe Price Retirement Plan Services  
Special Attn.: Forms Enclosed  
P.O. Box 17215  
Baltimore, Maryland 21297-1215

Overnight/Express Mail

T. Rowe Price Retirement Plan Services  
Mail Code: 17215  
4515 Painters Mill Road  
Owings Mills, Maryland 21117-4903

Note: If you are an active employee, or if it has been 12 months or less since your date of termination, any name/address changes must also be provided to Montgomery County Public Schools through the Employee and Retiree Service Center by calling 301-517-8100 or online at [ERSC@mcpsmd.org](mailto:ERSC@mcpsmd.org).

If you have any questions, please contact T. Rowe Price at 1-800-922-9945. Representatives are available Monday through Friday between 7 a.m. and 10 p.m. eastern time. For TDD access, call 1-800-521-0325. You may also access your account by visiting the T. Rowe Price *my*RetirementPlan Web site at [rps.troweprice.com](http://rps.troweprice.com), available 24 hours a day.

Sincerely,

T. Rowe Price Retirement Plan Services



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**MCPS Deferred Compensation (457(b)) Plan  
Participant Maintenance Form**

**Current Participant  
Information**

(Please print clearly)

\_\_\_\_\_  
Name

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

\_\_\_\_\_  
Daytime Phone Number

\_\_\_\_\_  
Evening Phone Number

\_\_\_\_\_  
Date of Birth

**Previous Address**

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
City, State, ZIP Code

**New Name**

\_\_\_\_\_  
Name

**New Address**

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
City, State, ZIP Code

**New Telephone Number**

\_\_\_\_\_  
Daytime Phone Number

\_\_\_\_\_  
Evening Phone Number

**Participant Signature**

\_\_\_\_\_  
Date

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

**Return Form**

Please return this completed form to:

**Regular Mail**

T. Rowe Price Retirement Plan Services  
Special Attn.: Forms Enclosed  
P.O. Box 17215  
Baltimore, Maryland 21297-1215

**Overnight Mail**

T. Rowe Price Retirement Plan Services  
Mail Code: 17215  
4515 Painters Mill Road  
Owings Mills, Maryland 21117-4903



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