

CHANGE OF ADDRESS
FORM

If any part of your address has changed or will
be changing, you must fill out this form to notify
Local 295 and send to:

LOCAL 295
33 W. HAWTHORNE AVE.
VALLEY STREAM, NY 11580
FAX- 516-568-1973

NAME: _____

SOCIAL SECURITY # _____

CORRECT ADDRESS: _____

PHONE #: _____

EMPLOYER:

SIGNATURE: _____

Our records are separate from the records of the Health & Pension
Funds to preserve your confidentiality. Please call the Funds office
At 212-308-4200 with your change of address.

**THIS INFORMATION IS VITAL TO KEEP LOCAL 295'S AND THE
INTERNATIONAL BROTHERHOOD OF TEAMSTERS RECORDS CURRENT.
WITH THIS INFORMATION WE WILL BE ABLE TO COMMUNICATE WITH
YOU THE MEMBER THROUGH NEWSLETTERS, ELECTIONS AND ANY
OTHER IMPORTANT INFO. IT IS THE MEMBERS RESPONSIBILITY TO
MAKE SURE THIS IS UP TO DATE.**