



I.B.E.W. Local 1158
1149 Bloomfield Avenue
Clifton, New Jersey 07012
Phone # 973-773-3336 Fax# 973-773-1422

Address Change Form

LAST 4 DIGITS OF YOUR SS# _____ **OR UNION CARD#** _____

FIRST NAME **INITIAL** **LAST NAME**

ADDRESS STREET **CITY** **ST** **ZIP**

EMPLOYER NAME

E-MAIL ADDRESS

HOME PHONE# **CELL PHONE#**

I authorize I.B.E.W. Local 1158 to update my enrollment file with the above information.

MEMBER'S SIGNATURE **DATE**