

PLUMBERS, PIPEFITTERS & MES LOCAL 392 BENEFIT OFFICE

Email: postmaster@local392fringefunds.com · Fax: 513-241-1130

CHANGE OF ADDRESS

SSN: XXX – XX – _____

Member Name: _____

New Address: _____

Phone Number: _____

Email: _____

Signature: _____

WE WILL NOTIFY UNION HALL AND THE CREDIT UNION ON YOUR BEHALF

EFFECTIVE DATE: _____

RECEIVED VIA: _____

RECEIVED & UPDATED BY: _____

Fax to UH _____ CU _____