AGC-International Union of Operating Engineers Local 701 Trust Funds

Mailing Address 15 - 82nd Drive, Suite 110 Gladstone, Oregon 97027 Phone (866) 697-5750 or (503) 657-9740 • Fax (503) 657-9737 • Website www.agc-iuoe701trusts.com

Administered by Welfare & Pension Administration Service, Inc.

CHANGE OF ADDRESS FORM

Employee Nam	ne: _	(DI	re print)
Employee SSN	# or		e print)
Employee Phon	ie Ni	ımber:	
Old Address			New Address
(Include apartment or suite number)			(Include apartment or suite number)
This address ch	ang	e pertains to the followin	ıg:
]	ALL	
		HEALTH & WELFAR	RE ONLY (CLAIMS)
]	PENSION-DEFINED	BENEFIT ONLY
		PENSION-DEFINED	CONTRIBUTION ONLY
□ VACATION ONLY		VACATION ONLY	
]	TRAINING ONLY	
Please send cor	resp	ondence according to my	y selection to the above address starting:
(Date)			
(Signature)			(Date)

<u>NOTE</u>: Any address change information must be submitted in writing and contain the member's signature. For security purposes, we cannot accept change of address information over the telephone. To avoid unnecessary delays in receiving correspondence from the Trust Office, it is imperative that we have your current address on file.

If there has been a change in your "covered dependents" or marital status, you need to complete a new enrollment form. Please see Enrollment Form under the heading "Forms/Medical Forms".