

I.B.E.W. LOCAL 332 HEALTH & WELFARE TRUST FUND  
ADMINISTRATIVE OFFICES  
P.O. BOX 5057, SAN JOSE, CA 95150-5057  
(408) 288-4433

**ADDRESS CHANGE  
- AUTHORIZATION FORM -**

**Member's Name:**

\_\_\_\_\_

Last

\_\_\_\_\_

First

**Member's Soc. Security #:**

\_\_\_\_\_

**Member's Old Address:**

\_\_\_\_\_

Street

\_\_\_\_\_

City

State

Zip

**Member's NEW Address:**

\_\_\_\_\_

Street

\_\_\_\_\_

City

State

Zip

**Member's phone #:**

\_\_\_\_\_

**Member's Signature:**

\_\_\_\_\_

**Date:**

\_\_\_\_\_