



**IBEW LOCAL UNION NO.22/NECA**  
**Fringe Benefit Fund**  
www.22benefits.aibpa.com

Electrical Industry Center  
8960 L Street, Suite 101  
Omaha, Nebraska 68127  
Telephone: (402) 592-3753  
Toll Free: (855) 330-3242  
Fax: (402) 592-2352

**Address Authorization and Change Form**  
***IBEW Local Union No.22/NECA***

Name: \_\_\_\_\_

New Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone: (\_\_\_\_) \_\_\_\_\_ Cell Phone: (\_\_\_\_) \_\_\_\_\_

Email Address: \_\_\_\_\_

**TO BE COMPLETED BY THE MEMBER:**

It is necessary for us to have your authorization to change your address. Please sign, date and return this notice in the envelope provided. If you have any questions, please contact our office at (402) 592-3753 or toll free (855) 330-3242.

*I hereby give authorization to have my mailing address changed to the address above.*

*This change is to be effective on:* \_\_\_\_\_.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**TO BE COMPLETED BY THE ADMINISTRATOR:**

The above address change was entered by:

\_\_\_\_\_  
Name Date