

Trustees:
H. Joseph Ayers
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Teamsters Joint Council No. 83 of Virginia Health & Welfare and Pension Funds



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CHANGE OF ADDRESS

You are:

an Active Employee

a Retiree

a Pension Beneficiary

an Alternate Payee

Your Alt ID or SSN: _____

Your Name: _____
Last *First* *Middle*

Your NEW Address: _____

Your NEW Phone Number: _____

Your Email Address: _____

Your Effective Date of Change: _____

Your Signature _____ **Date:** _____