

This form may be used for changing any information in the membership file **EXCEPT** Agency Shop/Fair Share Status.

NON-STATE MEMBERS CHANGE FORM



American Federation of State, County and Municipal Employees
 4031 Executive Park Drive, Harrisburg, PA 17111-1599
 Telephone: 717/564-9312

Local #: _____ Council #: _____
 Reported: _____ Date: _____
 Name: _____
 Address: _____
 City: _____ State: _____ Zip: _____
 Phone Number: _____

	NAME			ADDRESS	CITY	STATE	ZIP	SOCIAL SECURITY NUMBER
	LAST	FIRST	M					
1				New				
				Old				
2				New				
				Old				
3				New				
				Old				
4				New				
				Old				
5				New				
				Old				
6				New				
				Old				
7				New				
				Old				
8				New				
				Old				
9				New				
				Old				
10				New				
				Old				
11				New				
				Old				
12				New				
				Old				
13				New				
				Old				
14				New				
				Old				
15				New				
				Old				

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	NAME			ADDRESS	CITY	STATE	ZIP	SOCIAL SECURITY NUMBER
	LAST	FIRST	M					
16				New				
				Old				
17				New				
				Old				
18				New				
				Old				
19				New				
				Old				
20				New				
				Old				
21				New				
				Old				
22				New				
				Old				
23				New				
				Old				
24				New				
				Old				
25				New				
				Old				
26				New				
				Old				
27				New				
				Old				
28				New				
				Old				
29				New				
				Old				
30				New				
				Old				
31				New				
				Old				
32				New				
				Old				
33				New				
				Old				