

## Employee Benefit Trust

1205 Windham Parkway Romeoville, IL 60446 800.807.9460 / 630.378.3005 fax

Please complete this form when employees have either a new salary or a new address. Please fill in only that information which has changed. **This form is not to be used for name changes or beneficiary changes.** 

## **Change of Address or Salary**

Location Name:		Location #:
Name of		Effective
Employee:		Date:
Social Security	New Annual	
Number:	Salary:	
New Address:		
Name of		Effective
Employee:		Date:
Social Security	New Annual	Bate.
Number:	Salary:	
New Address:	- Latary .	
11011 110101		
Name of		Effective
Employee:		Date:
Social Security	New Annual	
Number:	Salary:	
New Address:		
Name of		Effective
Employee:		Date:
Social Security	New Annual	
Number:	Salary:	
New Address:	1	
Signature of		Date:
Employer:		