



**Albany Tax Local 690**

Date: \_\_\_\_\_

Shop Steward: \_\_\_\_\_

Members's SS#: \_\_\_\_\_

Please check type of change: Name: \_\_\_\_ Address: \_\_\_\_\_

**Old**

**New**

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

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

Street: \_\_\_\_\_

Street: \_\_\_\_\_

City: \_\_\_\_\_

City: \_\_\_\_\_

Zip: \_\_\_\_\_

Zip: \_\_\_\_\_