

LADIES AUXILIARY of the FLEET RESERVE ASSOCIATION dba AUXILIARY of the FLEET RESERVE ASSOCIATION.

REPORT OF CHANGE OF ADDRESS

From:	Secretary, Unit No		Date
То:	National Financial Se	ecretary	
	PLEASE CORRECT THE BELOW MEMBER'S ADDRESS		
Name_			Membership No
	Last	First	Middle
Email:			Phone#
Old Ad	dress		
		S [.]	treet
City, St	tate, Zip		
Ne w A	ddress		
C:1 C1	rata Zim I A		treet
City, Si	tate, 21p+4		
	Member		Unit Secretary
	(Member and Se	cretary must sign, send thre	ee (3) copies to NFS and keep copy for Unit files
From: Fo: Member	Secretary, Unit No		Membership No
Signatu	re of Member)		
Address			
City, Sta	te, Zip+4		
Email:			Phone#
Member originally joined (or last reinstated in) Unit No			on
Continuo	ous Membership record to o	date of transfer	
Class of	•	ne that applies to member's	(insert dates and Units) s status). Spouse, widow. Widower, parent, grandparent, sister, ne)
Sponsor's name			Branch No
Mail 3 co	opies of this form to the Nat	tional Financial Secretary versional Financial Secretary versions and the contract of the cont	who will affect the transfer. The National Financial Secretary will py to the Unit the member is transferring to and will retain 1 copy i
	Secretary sign. Unit #. and	date	National Financial Secretary sign, and date