

## MAILING ADDRESS FOR PAYROLL MATTERS

***IF YOU MOVED TO A DIFFERENT STATE PLEASE COMPLETE A STATE TAX FORM***

NAME <i>(Last, First, MI) (Please print or type)</i>	CODE	SOCIAL SECURITY NUMBER
STREET		
CITY	STATE	ZIP CODE
SIGNATURE		DATE

### PRIVACY ACT STATEMENT

Under the authority of 5 U.S.C. 552a, information regarding your payroll data file is requested in order to mail your leave and earnings statement and other payroll related documents. The information provided by you will become a permanent part of your Payroll Master File. The information provided will not be divulged without your written authorization to anyone other than those persons authorized to administer official payroll related actions. Providing this information is voluntary; however, failure to provide this information could result in non-receipt of your leave and earnings statement and other payroll related documents that are mailed to you since these documents will be mailed to the address currently shown in your payroll data file.