



Employee's Current Mailing Address

Employee Name (<i>Last, First, MI</i>)		Home Telephone No.	SSN	
Mailing Address (<i>No., Street, City, State, and ZIP + 4</i>)		Residence Address	<input type="checkbox"/> Same as Mailing	
Emergency Contact Name	Telephone No.	Effective Date	Date Signed	
<input type="checkbox"/> Change Bond Mailing Address to Same as Mailing Address (<i>See Note Below</i>)		Employee Signature		
NOTE: This will change ALL bond mailing addresses. If you have multiple bond allotments and wish to change individual mailing addresses, submit Form 1192, <i>U.S. Savings Bond Authorization for Purchase and Request for Change</i> , to your personnel office.		FOR EMPLOYING OFFICE USE ONLY		
		Finance No.	Pay Loc.	Installation Name

Privacy Act Statement

The collection of this information is authorized by 39 USC 401, 1001, 1003, 1005; and 5 USC 8339. This information will be used to handle all necessary payroll functions for use by employee supervisors for the performance of their managerial duties and to support USPS personnel programs. As a routine use, the information may be disclosed to an appropriate government agency, domestic or foreign, for law enforcement purposes; where pertinent, in a legal proceeding to which the USPS is a party or has an interest; to a government agency in order to obtain information relevant to a USPS decision concerning employment, security clearances, contracts, licenses, grants, permits or other benefits; to a government agency upon its request when relevant to its decision concerning employment, security clearances, security or suitability investigations, contracts, licenses, grants or other benefits; to a congressional office at your request; to an expert, consultant, or other person under contract with the USPS to fulfill an agency function; to the Federal Records Center for storage; to the Office of Management and Budget for review of private relief legislation; to an independent certified public accountant during an official audit of USPS finances; to an investigator, administrative judge or complaints examiner appointed by the Equal Employment Opportunity Commission for investigation of a formal EEO complaint under 29 CFR 1613; to the Merit Systems Protection Board or Office of Special Counsel for proceedings or investigations involving personnel practices and other matters within their

jurisdiction; to a labor organization as required by the National Labor Relations Act; to agencies having taxing authority for taxing purposes; to financial organizations receiving allotments; to State Employment Security Agencies to process unemployment compensation claims; to a Federal or state agency providing parent locator service or to other authorized persons as defined by Pub. L. 93-647; to the National Association of Postal Supervisors that relates to postal supervisors; to a prospective employer for consideration of employment; to management for compilation of a local seniority list for posting; to the EEOC for enforcement of Federal EEO regulations; to the appropriate finance center as required under the provisions of the Dual Compensation Act; to the Office of Personnel Management, Social Security Administration, Veterans Administration, Office of Workers' Compensation Programs, health insurance carriers, or plans, or other program management agencies or retirement systems for use in determining a claim for benefits; and to OPM for its active employee/annuitant data systems used to analyze Federal Retirement and insurance costs. Completion of this form is mandatory. Failure to do so would prevent supervisors from contacting employees on routine or emergency matters. Savings Bonds, Postal magazines, Forms W-2, and other mailings would be sent to the wrong address.



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