



Request to Change Mailing Address

(Please send completed form to Payroll, Thompson University Center)

University of Oregon
Payroll Office
PO Box 3237
Eugene, OR 97403-0237

Identification

UO ID _____ Name _____
Last First Middle
Email _____ Telephone _____

New Mailing Address

Street _____
City _____ State _____ Zip _____

Comments

Authorization

	Signature	Date
Employee		