



Norma G. Garcia
Hidalgo County Treasurer

Change of Address Form

Please complete **ONLY** if your address on your payroll advice is not correct or current. Please Print.

County Employee Number: _____

Personal Information:

Last Name: (as it appears on your Social Security Card)		First Name:	M.I.
Social Security Number:	Department:		
Primary Phone Number: (include Area Code)		Alternate Phone Number: (include Area Code)	

Mailing Address: Required			Physical Address: Required if different from mailing address; No P.O. Box		
Address:			Street Address: Same as Mailing: <input type="checkbox"/>		
City:	State:	Zip Code:	City:	State:	Zip Code:

I authorize the Hidalgo County Treasurer's Office - Payroll Division and other County Departments to update my address as stated above.

Employee Signature:

Date: