

EMPLOYEE ADDRESS FORM

This form is intended to establish the current resident address for employees in the Patent and Trademark Office. It will be used to mail information such as the Leave and Earnings Statement, benefits information (health, life, TSP), W-2, etc.

Complete the following numbered items in Section A:

- 1-(employee name), 2-(social security number), 3-(full street address, including apt or suite number), 4-(city of residence), 5-(state of residence), 6-(zip code), 11-(signature, to verify the accuracy of information), and 12-(date)

SECTION A

1. NAME (Last, First, Middle)		2. SOCIAL SECURITY NUMBER	
CURRENT RESIDENCE ADDRESS			
3. FULL STREET ADDRESS			
4. CITY NAME	5. STATE OR COUNTRY NAME	6. ZIP CODE	
7. CITY CODE (Agency Use)	8. COUNTY CODE (Agency Use)	9. STATE OR COUNTRY CODE (Agency Use)	
10. DESIGNATED AGENT CODE	11. EMPLOYEE SIGNATURE	12. DATE	

**IF YOU UTILIZE DIRECT DEPOSIT,
DO NOT FILL OUT THE CHECK MAILING ADDRESS, Section B (below).**

Section B - Complete ONLY if check will be mailed to another destination other than a direct deposit/electronic fund transfer account (i.e. PO Box or an address other than what is listed above.)
Fill out items 13-(full street address), 14-(city of residence), 15-(state of residence) and 16-(zip code).
If check will be mailed to address listed above, write "SAME AS ABOVE" in item 13-(full street address).

SECTION B

CHECK MAILING ADDRESS		
13. FULL STREET ADDRESS		
14. CITY NAME	15. STATE OR COUNTRY NAME	16. ZIP CODE
17. CITY CODE (Agency Use)	18. COUNTY CODE (Agency Use)	19. STATE OR COUNTRY CODE (Agency Use)

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PRIVACY ACT NOTICE FOR EMPLOYEE ADDRESS

General

This information is provided pursuant to Public Law 93-579 (Privacy Act of 1974), December 31, 1974, for individuals completing this form.

Authority

5 USC 301

Purpose and Uses

This form is used to obtain an employee's home address and/or check mailing address.

Information Regarding Disclosure of Your Social Security Number Under Public Law 93-579 Section 7(b) (Privacy Act of 1974)

Disclosure by you of your Social Security Number (SSN) is mandatory to obtain the services, benefits, or processes that you are seeking. Solicitation of the SSN by the United States Department of Commerce, Patent & Trademark is authorized under provisions of Executive Order 9397, dated November 22, 1943. The SSN is used as an identifier throughout your Federal career from the time of application through retirement. It will be used primarily to identify your records that you file with the U.S. Department of Commerce, Patent & Trademark Office. The SSN also will be used by the U.S. Department of Commerce, Patent & Trademark Office and other Federal Agencies in connection file with lawful requests for information about you from your former employers, educational institutions, and financial or other organizations. The information gathered through the use of the number will be used only as necessary in personnel administration processes carried out in accordance with established regulations and published notices of systems of records. The SSN also will be used for the selection of persons to be included in statistical studies of personnel management matters. The use of the SSN is made necessary because of the large number of present and former Federal employees and applicants who have identical names and birth dates, and whose identities can only be distinguished by the SSN.