



Email Change Form for Electronic Delivery of Direct Deposit Statements and/or Benefits Information

Change the email address associated with my direct deposit statements and benefits-related communications.

Change the email address associated with my direct deposit statements only. I do not wish to receive my benefits-related communications electronically.

My e-mail address is: _____

Print Name: _____

Signature: _____ Date: _____

Office use only:

Date System Changed:	Changed by:
Date Change Verified:	Verified by:

Return the completed form to:

Elizabeth McKenzie
Human Resources
emckenzie@moline.il.us