



NATIONAL INTERAGENCY FIRE CENTER  
**CASUAL PAYMENT CENTER**  
 A SERVICE FIRST ORGANIZATION  
 CASUAL PAYMENT CENTER MS 270  
 3833 S DEVELOPMENT AVE BOISE, ID 83705-5354  
 PHONE: 877-471-2262 FAX: 208-433-6405

**ADDRESS CHANGE FORM**

Check one:  BIA  BLM  FWS  NPS

**NAME:** \_\_\_\_\_ **SSN:** \_\_\_\_\_

**Complete the appropriate section(s) below to change your payment and/or correspondence destination.**

**1. DESTINATION OF PAYMENT:**

This section will change your destination of payment *ONLY*. Choose either Direct Deposit *OR* Treasury Check. **DO NOT** fill in both destinations.

**DIRECT DEPOSIT**

**MAILING ADDRESS FOR TREASURY CHECK**

TYPE OF ACCOUNT <input type="checkbox"/> Checking <input type="checkbox"/> Savings							
9-DIGIT ROUTING NUMBER							
ACCOUNT NUMBER:							

**OR**

ADDRESS:		
CITY	STATE	ZIP

*\*This WILL remove any direct deposit account currently in our system.*  
**IF THIS SECTION IS COMPLETED, AN EFT WAIVER REQUEST IS REQUIRED.**

**2. DESTINATION OF CORRESPONDENCE:**

This section will change your destination of correspondence *ONLY*. This includes Wage and Earnings Statements as well as W-2s.

ADDRESS:		
CITY	STATE	ZIP

**SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_ **PHONE #:** \_\_\_\_\_

*Privacy Act Statement: Information on this form is collected under the authority of the Administratively Determined (AD) Pay Plan. Information collected via this form is covered by the Privacy Act of 1974 and Privacy Act System of Records Notice DOI-85. The primary use of this information is to start, stop, or change entitlements and to process any voluntary or involuntary deductions on pay and leave issues. The information you furnish will be used to identify records properly associated with you, to obtain additional information to update your record, if necessary, and to determine any present or future entitlement. Disclosure may be made only to authorized persons according to Title 5 USC 552a and for uses described in System of Records Notices DOI-85. Submission of the information in this form is voluntary; however, requests will not be completed without the information needed to process the request.*