

This form is to be completed by Community President, Group Leader, or their respective Secretaries and forwarded to Central Office when there is a Change of Address, Telephone Number, Name or Legal Status of a Member.

Date _____

From:

_____ President Group Leader

_____ Community Group

_____ City and State

PLEASE CHANGE CENTRAL OFFICE RECORDS

FROM	<input type="checkbox"/> Mr.				Phone (_____)
	<input type="checkbox"/> Mrs.				
	<input type="checkbox"/> Miss	Name			Area code & No.
Address _____					
		Street No. or P.O. Box No.	City	State	Zip
TO:	<input type="checkbox"/> Mr.				Phone (_____)
	<input type="checkbox"/> Mrs.				
	<input type="checkbox"/> Miss	Name			Area code & No.
Address _____					
		Street No. or P.O. Box No.	City	State	Zip

FROM	<input type="checkbox"/> Mr.				Phone (_____)
	<input type="checkbox"/> Mrs.				
	<input type="checkbox"/> Miss	Name			Area code & No.
Address _____					
		Street No. or P.O. Box No.	City	State	Zip
TO:	<input type="checkbox"/> Mr.				Phone (_____)
	<input type="checkbox"/> Mrs.				
	<input type="checkbox"/> Miss	Name			Area code & No.
Address _____					
		Street No. or P.O. Box No.	City	State	Zip

Please put complete zip code including 4-digit number. Also include Apt. No. if applicable.

Send to: OCDS Central Office, Carmelite House of Prayer, P. O. Box 347, Oakville, CA 94562