

Notice of Address Change

PLEASE PRINT

Name: _____ ID#: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ E-mail: _____

Effective Date of Change: _____

Signature: _____ Date: _____

Return to: Borrowing Privileges & Fines
110 Wilson Library
309 19th Avenue South
Minneapolis, MN 55455

FAX: 612/626-8968
E-Mail: fines@tc.umn.edu
