



MISSOURI DEPARTMENT OF LABOR AND INDUSTRIAL RELATIONS
GROUP TRUST MEMBER INFORMATION UPDATE

P.O. Box 58
 Jefferson City, MO 65102-0058
 573-751-4231
 labor.mo.gov/DWC

Group Trust Name	Group Trust Acronym
Member Name	d.b.a.

A change of address or ownership must be provided to the division within thirty (30) days of the change. 8 CSR 50-3.010(6)(A)10.

CHANGE IN: Name FEIN Address d.b.a.
 Primary or Mailing Address

Change From: _____

Change To: _____

Effective Date: _____

ADD: FEIN Address d.b.a.

Effective Date: _____

REMOVE: FEIN Address d.b.a.

Effective Date: _____

CHANGE IN: Name FEIN Address d.b.a.
 Primary or Mailing Address

Change From: _____

Change To: _____

Effective Date: _____

ADD: FEIN Address d.b.a.

Effective Date: _____

REMOVE: FEIN Address d.b.a.

Effective Date: _____

ADDITIONAL NOTES:

Missouri Division of Workers' Compensation is an equal opportunity employer/program. Auxiliary aids and services are available upon request to individuals with disabilities. TDD/TTY: 800-735-2966 Relay Missouri: 711