



**Department of Idaho  
Transfer Notice  
8766 Rim RD  
Nampa, ID 83686**

**Name:** \_\_\_\_\_ **Membership #** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:**  
\_\_\_\_\_

**Phone Number:** \_\_\_\_\_ **Email Address:**  
\_\_\_\_\_

**Joining Name and Unit:** \_\_\_\_\_ /# \_\_\_\_\_

**Eligibility Status:**  
\_\_\_\_\_

**Officer of New Unit Signature (required)** \_\_\_\_\_

**Member's Signature (required)** \_\_\_\_\_

**Previous Department:** \_\_\_\_\_

**Previous Name, Unit, and Number:**  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
**Address** **City** **Zip**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_ / \_\_\_\_\_  
**Phone Number** **Email Address**