

THE ARC OF NM MASTER TRUST CHANGE REQUEST

SUBMIT YOUR REQUEST: Fax: 505-883-5564

Email: arctrust@arcnm.org
Mail: Trusts – The Arc of NM

5130 Masthead NE ● Albuquerque, NM 87109

Beneficiary Information Changes

If your mailing address, phone number or email address, guardianship, or benefits change, you must notify The Arc Trust in writing.

Trust Beneficiary's Name:		Date
Changes are for: Trust Beneficiary; Other:		
	Old Information:	New Information:
Address		
Phone + Area Code		
E-mail		
Changes in benefits for trust beneficiary: Please explain changes		
I am <u>NO</u> longer receiving the following: ☐ SSI; ☐Medicaid; ☐ Medicaid Waiver, ☐ Medicaid such as QMB, ☐SSDI; ☐Medicare; ☐HUD Housing; ☐SNAP; ☐Other		
NEW BENEFITS: ☐ SSI; ☐ Medicaid; ☐ Medicaid Waiver, ☐ Medicaid such as QMB, ☐ SSDI; ☐ Medicare; ☐ HUD Housing; ☐ SNAP; ☐ Other		
Effective Date of Change:		
Signature of Beneficiary, Guardian, POA		

If you have any questions, please contact us via email arctrust@arcnm.org
or call 1-505-883-4630 or 1-800-358-6493 toll free
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