ADDRESS CHANGE FORM
(To be used by Diplomates of the American Board of Family Medicine)

The address provided will become an "address of record" with the Board. The Board prefers the use of professional addresses.

Current addresses for all Diplomates are necessary for communication from the Board relating to the Examinations, updated Recertification information, etc., as well as to ensure the receipt of the Journal of the American Board of Family Medicine

ABFM Identification Number
(6-digit number above name on mailing label)

Year of Certification or Recertification

NAME

Current Address
Street ____________________________
City/State _________________________
Zip Code __________________________

New Address
Street ____________________________
City/State _________________________
Zip Code __________________________

Effective Date of Change ____________________________

Signature of Diplomate ____________________________

E-mail ____________________________

Return to: The American Board of Family Medicine
1648 McGrathiana Parkway, Suite 550,
Lexington, KY 40511-1247
Fax: (859) 335-7509

ONLINE ADDRESS CHANGE

To change your address at the ABFM website, please log on to https://www.theabfm.org and enter your Physician Portfolio.
If you don’t have an ID or password, contact help@theabfm.org or 877-223-7437.