

CHANGE OF ADDRESS OR NAME

		Date			Membe	Member Number		
Present Name and Address - Primary Owne	r							
Full Name					5	SSN/TIN#		
Address Line 1								
Address Line 2 (City, State, Zip)								
Home Phone No.	Cell Phone No. Email Address							
New Name and Address – Primary Owner (O	nly complete information that is char	naina)						
Full Name*	<u>igilig)</u>		SSN/TIN#*					
Address Line 1								
Address Line 2 (City, State, Zip)								
Home Phone No.	Cell Phone No.	Email Address						
Seasonal start date	end date							
Active Card Agreement Yes (send update to card services) No Active IRA Agreement Yes (send update to IRA Department)							□No	
erified By: Active Home Equity					to VP of	Operations)	□ No	
*Changing your name and/or SSN (TIN) requires additional documentation. See your Credit Union Representative for details.								
Present Name and Address – Joint Owner								
Full Name					5	SSN/TIN#		
Address Line 1								
Address Line 2 (City, State, Zip)								
Home Phone No.	Cell Phone No. Email Address							
New Name and Address – Joint Owner (Only	complete information that is changing	na)						
Full Name*					5	SSN/TIN#*		
Address Line 1					<u>I</u>			
Address Line 2 (City, State, Zip)								
Home Phone No.	Cell Phone No.	Email Address						
Seasonal start date	end date							
Active Card Agreement Yes (send update to car		Active IRA A	greement	Yes (send update	to IRA D	Department)	□No	
Verified By:		Active Home Equity Yes (send update to		to VP of	Operations)	□ No		
*Changing your name and/or SSN (TIN) requires addit	ional documentation. See your Credit Un	ion Represen	tative for de	etails.				
Signatures								
Primary Owner Signature	Date	Joint Owner Signature				Date		
X		X						
Credit Union Use Only								
Credit Union Representative Signature	Date	Verified By						
X Other members to be updated. Please include memb	er number and first and last name	<u> </u>						
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