



ACCESS OF LOUISIANA FEDERAL CREDIT UNION

4400 Maplewood Dr. Sulphur, La 70663

(337) 533-1808

CHANGE OF ADDRESS FORM

NAME _____

PLEASE LIST ALL ACCOUNTS THAT YOU ARE A SIGNER ON

I AM REQUESTING THAT THE ADDRESS ON THE ABOVE ACCOUNT(S) # BE CHANGED TO:

CHECK MAILING ADDRESS

PHYSICAL _____

P O BOX _____

IF YOU HAVE A PO BOX YOU MUST ALSO LIST YOUR PHYSICAL ADDRESS

PLEASE UPDATE YOUR PERSONAL INFORMATION

HOME # _____ CELL # _____

E-MAIL _____

EMPLOYER _____ WORK# _____

PLEASE INDICATE IF YOU HAVE AN ATM OR DEBIT CARD FOR THIS ACCOUNT:

ATM _____ DEBIT _____ N/A _____

SIGNATURE OF AUTHORIZED SIGNER ON THIS ACCOUNT

SIGNATURE DATE

***** FOR CREDIT UNION PURPOSES-PLEASE DO NOT FILL OUT *****

- UPDATE MEMBER _____ updated
- UPDATE ALL JOINT OWNERS _____ updated _____ N/A
- UPDATE ATM OR DEBIT CARD (fax to LC) _____ updated _____ N/A
- UPDATE BILL PAY SUBSCRIBER INFO (fax to SU) _____ updated _____ N/A
- UPDATE ADDRESS IF MEMBER IS JOHNNY APPLESEED _____ updated _____ N/A
- UPDATE IRA OWNER W/ CUNA _____ updated _____ N/A
- UPDATE IRA BENEFICIARY IF APPLICABLE _____ updated _____ N/A
- UPDATE MAIL CODE TO 0 if not dormant 7 if dormant _____ updated _____ N/A
- DELETE MEMBERS COMMENT FOR BAD ADDRESS _____ updated _____ N/A
- FORWARD OR SHRED RETURNED MAIL-EMAIL MSR _____ done _____ N/A

Completed by: _____ Date: _____