

# SPENCERPORT Federal Credit Union

## Change of Address

Name(s) \_\_\_\_\_

\_\_\_\_\_

Old Address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

New Address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Telephone Number (    ) \_\_\_\_\_

Do you have any of the following?

\_\_\_\_ Visa Credit Card # \_\_\_\_\_

\_\_\_\_ Visa Debit Card # \_\_\_\_\_

\_\_\_\_ ATM Card # \_\_\_\_\_

\_\_\_\_ IRA Account # \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Employee Initials \_\_\_\_\_