## **UHS Employees Federal Credit Union**

33-57 Harrison Street Johnson City, NY 13790 Fax 607-763-5095

## **Address/Contact Information Change Form**

| <u>UPDATE:</u> A  | ddress  | Phone Nun                          | ıber <u> </u>    | ail |  |
|---|---|------------------------------------|------------------|-----|--|
| Account Number:   |   | Name:                              |                  |     |  |
| Old/Previous Address:   |   |                                    |                  |     |  |
| New Physical Address:   |   |                                    |                  |     |  |
| New Mailing Address (if diffe   | rent from Physical): _  |                                    |                  |     |  |
| ls this a seasonal address ch   | iange?Yes _   | No                                 | Return date:     |     |  |
| Old Phone Number(s): H:   |   | W:                                 | C:_              |     |  |
| New Phone Number(s): H:   |   | W:                                 | C:_              |     |  |
| Email Address: Old:   |   |                                    | New:             |     |  |
| Changes applies to (chec ALL accounts on whiceONLY accounts on whiceProvide us with a deta  I hereby authorize UHS Em | h my name appears a<br>lich I am the primary l<br>iled list of the accoun | holder - Acct(s<br>it numbers to b | )#<br>e changed: |     |  |
| described above. This will  | •   |                                    | -                |     |  |
| Member Signature  |   |                                    | Date             |     |  |
| For Credit Union Use Only:  | In Person   |                                    |                  |     |  |
| Signature Verified  | Changed in CSS  | Changed                            | in FIS           |     |  |
| Due Diligence Note  | Updated in Main Street  |                                    |                  |     |  |
| mnlovee signature   |   |                                    | Data             |     |  |