

BIRMINGHAM CITY CREDIT UNION ADDRESS CHANGE VERIFICATION

This form may be mailed to: 708 17th Street North, Birmingham, Alabama, 35203; returned to the branch location; or faxed to: 205-583-4835.

Effective Date of Change

You MUST be joint owner on all suffixes to update the primary account owner's address.

Previous Mailing Address:

Address_____City___State__Zip____

New Mailing Address:

PRIMARY MEMBER

JOINT MEMBER (if applicable)

(If mailing address is a P.O. Box, you must provide a street address)

First Name	e MI	Last N	Vame	First Name	MI	Last I	Name
New Mailing Address				New Mailing Address			
City	State	Zip	Home Phone	City	State	Zip	Home Phone
Street Address (*only if different from mailing address)				Street Address (*only if different from mailing address)			
Work Phone: Cell Phone:			l Phone:	Work Phone:	ne: Cell Phone:		
Email:				Email:			
Signature:				_ Date:			
Account r Account r	number <u> </u>	Please list of		Joint on that will	l be affect	ed by this ch	ange:
Please No	ote: To chan	ige a " <u>prima</u>	ary mailing address"	on a different acc	<u>count</u> a sep	parate form n	nust be completed
				nion Use only			
-		_ Employee_	Identification		Brai	nch	
,	e joint owner	. ,	correct on the account for each account numbe	r listed			

Account Number