ADDRESS CHANGE REQUEST

W-BEE FEDERAL CREDIT UNION

AFFECTED ACCOUNT(S):

ACCOUNT NUMBER PRIMARY ACCOUNT HOLDER (FIRST NAME ON ACCOUNT)

| NEW ADDRESS (PLEASE PRINT): | | | PHONE NUMBER (HOME): | |
|-----------------------------|-----------|----|-------------------------|--|
| | | | PHONE NUMBER (CELL): | |
| CHANGE IS: | PERMANENT | OR | TEMPORARY UNTIL (DATE). | |
| SIGNATURE: | | | DATE: | |

NOTE: THE PERSON WHO SIGNS THIS FORM MUST BE NAMED AS EITHER PRIMARY MEMBER, JOINT ACCOUNT HOLDER, <u>OR</u> POWER OF ATTORNEY ON **ALL ACCOUNTS LISTED ABOVE** FOR THE CHANGE TO BE PROCESSED.

NCUA IS REQUIRING US TO HAVE A SIGNED DOCUMENT ON FILE FOR ANY ADDRESS CHANGES. WE REGRET ANY INCONVENIENCE THIS IS CAUSING. ADDRESS WILL NOT BE CHANGED IF THIS FORM IS NOT RETURNED.

PLEASE RETURN FORM TO: P.O. BOX 1194, WILKES-BARRE, PA 18703-1194