

# ACCOUNT INFORMATION CHANGE REQUEST

I (We) herby request that Oakdale Credit Union change my (our) account information, as described on this Account Information Change Request form.

Name of Account Owner \_\_\_\_\_  
Last First Middle

Name of Joint Owner \_\_\_\_\_  
Last First Middle

☐ Change Joint Owner Address

☐ Do Not Update Joint Owner Address

Physical Address: \_\_\_\_\_  
\_\_\_\_\_  
City State Zip Code

Mailing Address: \_\_\_\_\_  
\_\_\_\_\_

\*OCU requires a physical address when using a Post Office Box number.

Alternate Address: from \_\_\_\_\_ to \_\_\_\_\_

New Phone Number (\_\_\_\_\_) \_\_\_\_\_

Please update information for these additional services:

- ☐ Credit Card
- ☐ IRA
- ☐ Bill Pay

**\*\*IF PRINTING THIS FORM ONLINE – WE REQUIRE YOU TO SIGN INFRONT OF US  
OR YOU MAY HAVE THE FORM NOTORIZED\*\***

Member Signature: \_\_\_\_\_  
Date

Joint Owner Signature: \_\_\_\_\_  
Date

## Verification:

Employee Initials: \_\_\_\_\_ Verifying Employee Initials: \_\_\_\_\_

Account Number: \_\_\_\_\_ Branch: \_\_\_\_\_