



Notice of Address Change

I hereby authorize Caswell Credit Union to change the address on the following accounts:

Name (Please Print): _____.

Old Street Address: _____.

City, State and Zip Code: _____.

New Street Address: _____.

New City, State and Zip Code: _____.

New Telephone Number: (_____) _____.

New e-Mail Address: _____.

Account Number(s): _____.

Please include either names or account numbers for all individuals in the household moving to the new address.

Signature

Date

Phone for verification purposes (_____) _____.

Please note: This form must be signed and returned to:

Caswell Credit Union
340 Dorset Street, Suite 4
South Burlington, VT 05403-6306
Fax: (802) 658-1319
mail@caswellcu.com

Faxed or e-mail copies will be accepted with signature only – No telephone address changes can be accepted to protect your identity.

Credit Union Use Only: [] VISA [] CU√Card [] IRA [] e-statements