



**Western
New York**
FEDERAL CREDIT UNION

ADDRESS CHANGE REQUEST

Account Numbers : _____

Member Name: _____

Joint Member Name (if applicable): _____ Change Address?: Y N

New Physical Address: _____

City, State, Zip: _____

Home Phone: _____ Cell Phone: _____

Email: _____

Member Signature

Date

For Credit Union Use Only

Teller Initials – Received Form

Teller Initials - Verified Account Number Relationship

IRA

CompuShare Maintenance

Draft Maintenance _____

ATM/DEBIT Card Number _____

Credit Card Number _____