



P.O. Box 16877 * 9955 SE Washington
Portland, Oregon 97292-0877
(503) 253-8193 * (800) 356-6507 * FAX (503) 253-0383

Change of Address Request

Account Name: _____

Membership Number(s) To Update: _____

Old Address: _____

New **Mailing**
Address*: _____

*If changing to a PO Box we
will need your physical
address as well.

Physical Address: _____

Current Phone Numbers: _____
circle one: home cell work

Do you have an IRA with the Credit Union? yes no
circle one

Do you have a visa with the Credit Union? yes no
circle one

Member Signature: _____