



**ADDRESS AND PHONE NUMBER CHANGE FORM**

Please complete, sign and return this change to any Keystone Credit Union branch or mail to:  
**Keystone Credit Union PO Box 4970, Tyler, TX 75712.** Allow 3-5 business days for your request to be processed.

**Member Name:** \_\_\_\_\_ **Last 4 digits of Primary Acct Holders SSN:** \_\_\_\_\_

**ACCOUNT NUMBER(S):** Please remember to include all applicable account numbers. Only the account numbers listed below will be updated

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

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

**MAILING ADDRESS AND PHONE NUMBERS** - if mailing address is a PO Box, you MUST provide a physical street address in the Alternate Address section below.

**Choose One:**  Change Effective Immediately  Change effective on \_\_\_\_\_

<p><b>Old Physical Address: (required)</b></p> <p>Street Address: _____</p> <p>City, State, &amp; Zip: _____</p>	<p><b>Old Mailing Address: (if different from Physical Address)</b></p> <p>_____</p> <p>_____</p>
<p><b>New Physical Address: (required)</b></p> <p>Street Address: _____</p> <p>City, State, &amp; Zip: _____</p>	<p><b>New Mailing Address: (if different from Physical Address)</b></p> <p>_____</p> <p>_____</p>
<p>Home Number: _____ Work Number: _____ Cell Phone: _____</p>	
<p>Email Address: _____</p>	

I hereby acknowledge that the information I have provided is correct and that I am authorized to amend the information for the account(s) listed above.

**Member/ Authorized Signd Signature:**  X  \_\_\_\_\_

**Printed Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_

<b>CREDIT UNION USE ONLY</b>	
Address changed received: <input type="checkbox"/> in person <input type="checkbox"/> by mail <input type="checkbox"/> through Online Banking <input type="checkbox"/> Other _____	
Addressed in: <input type="checkbox"/> Savings <input type="checkbox"/> Checking <input type="checkbox"/> IRA <input type="checkbox"/> ATM/Debit Card <input type="checkbox"/> Credit Card	
Date Address Changed in System: _____	Branch: <input type="checkbox"/> Main Branch <input type="checkbox"/> Rice Branch
Request taken by: _____	