

# Change of Address

Please provide all of the requested information.  
When you have completed the form, please print it,  
sign it, and mail to:  
Charter Oak Federal Credit Union  
ATTN: Member Services  
32 Chicago Avenue  
Groton, CT 06340



## Change of Address

Name: \_\_\_\_\_

Account #: \_\_\_\_\_

Social Security #: \_\_\_\_\_

VISA® #: \_\_\_\_\_

Mother's Maiden Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

Old Address:  
\_\_\_\_\_  
\_\_\_\_\_

New Address:  
\_\_\_\_\_  
\_\_\_\_\_

Do you have a safe deposit box with us?     No     Yes

Please list other account numbers you wish to have changed:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

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## Office Use Only

In Person     Mail

Entered on system by: \_\_\_\_\_

Date: \_\_\_\_\_

Accepted or verified by: \_\_\_\_\_