

Greensboro Municipal Federal Credit Union

Change of Address Form

Member:	
Account#:	
Address:	
	(if PO Box used as a mailing address, please note physical address)
City, State, Zip:	
New Address:	
City, State, Zip:	
	(if PO Box used as a mailing address, please note physical address)
E-Mail:	
Home Phone #:	
Work Phone #:	
Cell Phone #:	
Vour Signaturo	
Your Signature:	

We received notice via either an electronic update or the post office that your address has changed. For your protection, please fill out, sign, and return this form to Greensboro Municipal Federal Credit Union to verify your address before the change is made in our database. You may fax this form to (336) 373-5896 or (336) 335-5556. For questions call Member Services: (336) 373-2090.



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