



Please complete, sign and return this change request to any Tendto Credit Union branch location or mail it to 1129 State Street, Erie, PA 16501. You may also update your address information through your Online Banking account at tendtocu.com.

Member Name:		Account #:	
Previous Address:			
		Street	
	City	State	Zip
New Mailing Address:			
		Street	
	City	State	Zip
Previous Phone #:		New Phone #:	
Complete this section only if the new m	ailing address is a P.O. Box. A	physical street address is requ	ired.
New Physical Address:			
	Street		
	City	State	Zip
Please list additional account numbers addition, list all applicable account suffi			uthorize). In
Account #:	Suffix(es):	Note #(s):	
Account #:	Suffix(es):	Note #(s):	
Account #:	Suffix(es):	Note #(s):	
I hereby acknowledge that the informat for the account(s) listed above.	ion I have provided is correct a	and that I am authorized to ame	nd the information
Member Signature:		Date:	
	For Credit Union Use	Only	
Changed By:		Date:	
Change Verified By:		Date:	