



Please print this form and fax to 908-771-9349 or mail to our main office with your signature to complete the process of changing your current address with Advanced Financial FCU.

Member Number: \_\_\_\_\_

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

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

City \_\_\_\_\_

City \_\_\_\_\_

State & Zip \_\_\_\_\_

State & Zip \_\_\_\_\_

Telephone Numbers: Home \_\_\_\_\_

Work \_\_\_\_\_

Check (√) if any: ATM Card \_\_\_\_\_

VISA Debit Card \_\_\_\_\_

VISA Credit Card \_\_\_\_\_

Authorized Signature: \_\_\_\_\_

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

Please list all account numbers for which this address change applies:

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

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