



## NAME CHANGE FORM INSTRUCTIONS

To change the Legal Name of the Primary Owner of Membership or the Joint Owner

To Complete the Process, please follow these steps:

1. Fill out the Name Change Form completely and sign where indicated.
2. Provide TWO Forms of Verification. This MUST Accompany the Name Change Form. (acceptable forms are listed within the form)
3. Fax the completed form and verification items to 513-345-8726 OR mail to:

Postal Family Credit Union, Inc.  
PO Box 14403  
Cincinnati, OH 45250-0403

Once the required items are received; please allow at maximum 1 week for the request to be processed.

If the completed, signed form or required verification documents are not received this WILL delay the process

You will be able to view the changes in WebPAL II (Online Banking) once the changes are complete. Simply visit [www.urmycu.org](http://www.urmycu.org) and log in using your Login ID and password.



**Internal Use Only**

Type of Verification Doc Recvd: \_\_\_\_\_  
Date Form Processed: \_\_\_\_\_  
Processed By (Teller ID and Initials): \_\_\_\_\_  
Membership Officer: \_\_\_\_\_

### NAME CHANGE FORM

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

- Change in Primary Owner Name
- Change in Joint Owner Name (If the Joint Owner is also a Primary Owner of their own PFCU Membership; this change must be made under that Membership Number)

SSN or TIN \_\_\_\_\_

SSN or TIN \_\_\_\_\_

Please list all additional member numbers on which this change must be made:

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

**Two forms of Verification MUST Accompany this form.**

- Certified Marriage License (provided both names appear)
- US Driver’s License or Government Issued Photo ID
- Passport
- Updated SSN or TIN Card
- US Military ID
- US Work Visa
- Court Order
- Divorce Decree/Dissolution of Marriage
- Adoption Decree

My name has been legally changed from (please print):

\_\_\_\_\_  
(First) (Middle) (last) (suffix)

My name has been legally changed to (please print):

\_\_\_\_\_  
(First) (Middle) (last) (suffix)

- I have a PFCU issued ATM and/or Debit Card
- I have a PFCU issued Visa Credit Card

**Signatory Authorization and Agreement**

By signing below, I am requesting the changes listed above. I agree that, except as indicated on this form, the information provided previously remains accurate. I understand the terms and conditions set forth in my initial Membership Application as well as the *Truth-in-Savings Disclosure and Account Agreements*, and the *Electronic Services Disclosure and Agreements*, which I have previously received, remain in full force and effect. I also agree and understand that if I have a current PFCU ATM/Debit or Visa Credit Card; a new card will be issued in my new name.

X \_\_\_\_\_ X \_\_\_\_\_  
Primary Owner’s Signature Date Joint Owner’s Signature Date