



Change of Address Form

PLEASE READ: This authorizes the address change for the individual submitting this address change. **Please let your household members know that if they also have accounts or loans with us, they should update their individual address with us.** To protect your personal information, your signature on this form is required to complete the requested address change.

Account Number (s) _____

Effective Date of Change ____/____/____

Name _____

E-mail Address _____



STREET (PHYSICAL) ADDRESS REQUIRED WHEN USING A PO BOX FOR MAILING ADDRESS

Mailing Address _____

City _____ State _____ Zip _____

Street (Physical) Address _____

City _____ State _____ Zip _____

Home Phone (____) _____ Work Phone (____) _____

Cell Phone (____) _____

Signature _____ Date ____/____/____

Please bring completed form to your nearest branch location, fax to 814-865-7713

or mail to:

Penn State Federal Credit Union
123 Amberleigh Lane
Bellefonte, PA 16823

Office use only:
Correspondence Date Changed _____

123 Amberleigh Lane ●
Bellefonte, PA 16823 ●
P. (814) 865-7728 ●
P. (800) 828-4636 ●
F. (814) 863-6183 ●

www.PennStateFederal.com ●

