

Edco Federal Credit Union

Change of Address

Name _____ Account # _____

New Mailing Address _____

Street Address _____
(If different than mailing address)

City _____ State _____ Zip _____

New Telephone No. (____) _____ Do you have an ATM Card Yes No

Do you have a debit card Yes No Effective Date: _____

Additional accounts to be changed. Please list name and account #

Member's Signature _____ Date _____

Office Use Only
Rec'd _____
Shares _____
ATM _____
Debit _____

Please fax or mail to:

**Edco Federal Credit Union
1165 North Ridge Road E.
Lorain, Ohio 44055
Phone # 440-233-4878
Fax # 440-233-8519**