

**CHANGE OF ADDRESS  
AUTHORIZATION FORM**

Please print this form, complete it, sign it and mail it to: East Hartford Federal  
Credit Union, 92 Pitkin Street, East Hartford, CT 06108

Account(s)#: \_\_\_\_\_

Name: \_\_\_\_\_

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

\_\_\_\_\_

New Home Phone #: \_\_\_\_\_

**Information required for verification:**

Daytime Phone #: \_\_\_\_\_

Social Security #: \_\_\_\_\_

Mother's Maiden Name: \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_