



PERSONAL INFORMATION UPDATE FORM

This form must be completed, signed and returned to the Credit Union with processing fee payment to skip your eligible loan payment(s).

FORM INSTRUCTIONS

1. Complete all applicable fields
2. Print completed form
3. Sign and date the Signature section
4. Mail to: Coca-Cola Credit Union P.O. Box 1734 Atlanta, GA 30301
or Fax to: (404)-598-2586
or Email to: creditunion@coca-cola.com

MEMBER INFORMATION

Member Name	Member Number	Email Address
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Update Options

I would like to change my: Name Address Phone Number Email

NAME CHANGE (COPY OF NEW I.D. IS REQUIRED FOR ALL NAME CHANGES)

- Marriage (attach copy of marriage certificate)
- Divorce (attach copy of divorce decree)
- Other: _____

Old Name _____ Signature _____
New Name _____ Signature _____

I have included a copy of the legal document proving my name was changed **(REQUIRED)**.

CONTACT INFORMATION CHANGE

Change my contact information as follows (P.O. Box requires street address for our records).

Old Information	Street/P.O. Box	Apt. #	
City	State	Zip	Country
Phone Number	<input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> Cell	Email	
New Information	Street/P.O. Box	Apt. #	
City	State	Zip	Country
Phone Number	<input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> Cell	Email	

By signing below, I authorize Coca-Cola Federal Credit Union to process the information I have indicated above with the updated information I have supplied.

Signature _____ Date _____