



2010 William Street  
Jefferson City, MO 65109  
Ph: 573-632-2848  
Fax: 573-635-7618

**ADDRESS CHANGE REQUEST:**

\_\_\_\_\_  
Account Number(s)

\_\_\_\_\_  
Member Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State, Zip

\_\_\_\_\_  
Phone Number

I authorize Highway Alliance Credit Union to change the address on the above listed account(s).

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

The credit union will not change the address on any account without a signature of an authorized signer. All address changes require an original signature of an account owner.