kinecta℠

1440 Rosecrans Avenue, Manhattan Beach, CA 90266
800.854.9846 | kinecta.org

Account Information Update Form

SECTION 1	**PLEASE COMPLETE THE APPLICABLE SECTIONS ONLY**

MEMBER NAME (FIRST, MIDDLE INITIAL, LAST)	JR. / SR.	MEMBER NUMBER

SECTION 2

ADDRESS / PHONE / EMAIL

Proof of residence is required when changing the address on an account that has been opened less than 30 days. Acceptable documentation includes: current utility bill (electric bill, water bill, natural gas bill, home landline telephone bill, cable/satellite bill), vehicle registration, etc.

RESIDENCE ADDRESS	CITY	STATE	ZIP

MAILING ADDRESS	CITY	STATE	ZIP

HOME PHONE NUMBER	CELL PHONE NUMBER	WORK PHONE NUMBER

MOTHER'S MAIDEN NAME	DATE OF BIRTH	EMAIL ADDRESS

EMPLOYER	OCCUPATION

SECTION 3

NAME CHANGE ONLY**

(Order the following in new name, check all that apply)   ☐ **Debit Card**   ☐ **Checks**   ☐ **MasterCard Credit Card**

**For Name Changes, supporting documentation showing the new name is required [i.e. legible copy of State or Government issued identification (Driver's License, ID, U.S. Passport) Marriage Certificate, or Divorce Decree]. If providing a Marriage Certificate or Divorce Decree, please include copy of DMV's Interim Driver's License/ID Receipt or Social Security Card with new name.

CURRENT NAME (AS LISTED ON ACCOUNT)	NEW NAME

CURRENT SIGNATURE ON FILE	NEW SIGNATURE

SECTION 4

TAXPAYER IDENTIFICATION NUMBER (TIN) CORRECTIONS

SECTION 5

IDENTIFICATION CHANGE / UPDATE

PREVIOUS IDENTIFICATION # / TYPE / ISSUING AGENCY	NEW IDENTIFICATION # / TYPE / ISSUING AGENCY	EXP DATE

SECTION 6

MEMBER SIGNATURE (REQUIRED)

My signature authorizes the above change(s) and provides an updated signature to be used for verification purposes. I understand and agree that the changes will be made to my profile on the listed membership number(s). I further agree and understand that an address change will only affect the Membership if I am the Primary Member on the listed membership number(s).

By signing this document below, I agree that the Credit Union may from time to time make calls and/or send text messages to me at any telephone number(s) provided above, including any mobile/cellular telephone numbers and/or numbers that are later converted to mobile/cellular telephone numbers that may or may not result in data usage and/or charges to me. This is so the Credit Union can service and keep me informed about my account(s), and/or provide fraud, security breach, or identity theft alerts. I also agree that I may be contacted by the Credit Union service providers and/or any third party making such calls or sending such text messages on its behalf. The manner in which these calls or text messages may be made to me include, but are not limited to, the use of prerecorded/artificial voice messages and automatic telephone dialing systems. I understand that I am not required to provide consent as a condition to receiving the Credit Union's products or services. I may change the telephone number(s) provided at any time by contacting the Credit Union at 1-800-854-9846.

By also initialing this paragraph below, I further authorize Kinecta to contact me as set forth above, by making calls and/or sending text messages to me at any telephone number(s) I have provided above, through, but not limited to, the use of prerecorded/artificial voice messages and automatic telephone dialing systems, to offer products and services that might be of interest to me. I understand that I am not required to provide this additional consent as a condition to receiving the Credit Union's products or services.

_____
Initials

MEMBER / JOINT OWNER / AUTHORIZED SIGNER SIGNATURE	DATE

MAIL: 1440 Rosecrans Avenue, Manhattan Beach, CA 90266, **ATTN:** Member Service Support CU/140
or **EMAIL:** memberservicesupport@kinecta.org **or FAX:** 310.727.8218

CREDIT UNION USE ONLY

MSC / DEPT#	USER ID	USER INITIALS	DATE	MANAGER APPROVAL (ONLY REQUIRED FOR CHANGES TO SECTION 3 & 4)