



PIN and Replacement/Additional Card Request

Please complete this form and bring it to any United Consumers branch office, or you can mail it to the address provided.

Mailing Address: United Consumers Credit Union
2326 S. Savage
Independence, MO 64055

Date: _____
Account Number: _____
Member Name: _____
Mailing Address: _____
City, State, Zip-Plus4: _____

PIN:

Replacement Debit Card:

Additional Debit Card:

Replacement Credit Card:

Additional Credit Card:

Replacement ATM Card:

Additional ATM Card:

Email Address: _____

Member's Signature (Required): _____

For your protection, we will verify this signature with the one on your original membership card.

For office use only.

Employee Initials: _____ ID/Signature Verified: _____