

Authorization

I/We agree that the changes on this Card amend the previously signed Account Card and are subject to the terms and conditions of the Membership and Account Agreement, Truth-in-Savings, Disclosure Rate and Fee Schedule, and Funds Availability Policy Disclosure, if applicable, and to any amendment the Credit Union makes from time to time which are incorporated herein. I/We acknowledge receipt of a copy of the Agreements and Disclosures applicable to the accounts and services requested above. If an ATM Card or EFT service is requested and provided, I/We agree to the terms of and acknowledge receipt of the Electronic Funds Transfer Agreement.

X _____
Signature _____ Date _____

X _____
Signature _____ Date _____

X _____
Signature - **removed owner** _____ Date _____

On _____, 20____, above signatory personally came before me and being duly sworn, did state that he/she is the person described in the above document and that he/she signed the above document in my presence.

Notary Signature _____

County of _____

State of _____

My commission expires: _____

Credit Union Representative
Witness Signature _____

**Signature of Removed Owner must be notarized.*



Member Services

(404) 676-2586 | (877) 277-2586
Fax (404) 676-8894 | Loan Fax (404) 676-1107

CU Audio Response

(404) 676-2586
(877) 277-2586

ATM Locator

(Non-surcharging network)
(888) 495-2824

Website

www.creditunion.coca-cola.com

Email

creditunion@na.ko.com

Physical Address

One Coca-Cola Plaza, NW
USA 215
Atlanta, GA 30313

Mailing Address

PO Box 1734
USA 215
Atlanta, GA 30301

THE COCA-COLA COMPANY FAMILY FEDERAL CREDIT UNION USE ONLY

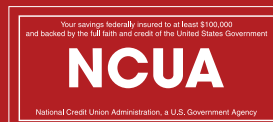
See Account Card

Date of Membership _____ Opened by _____

Member verification _____ PIN Request _____

Credit Report _____ Check Verify _____

ATM Card _____ Authorized by _____



ACCOUNT CHANGE FORM



Account Modification Form

For existing members only: This form is designed to help us process changes to your existing Credit Union account(s) and to provide the additional services you request. Return this completed application and any applicable funds/deposit(s) to any branch of The Coca-Cola Company Family Federal Credit Union or mail to: P. O. Box 1734, USA 215, Atlanta, Georgia 30301. Please DO NOT mail cash. For information, please contact Member Services at 404-676-2586 or 877-277-2586.

Current Account Information

Account Owner(s) _____

Member Number _____

Type Of Change

I /We authorize the Credit Union to make and accept the following changes to my/our accounts: (Please indicate the type of change)

- Add Account/Service.** Add the account/service designated under Account or Services.
- Terminate Account/Service.** Terminate the account/service designated under Account or Services
- Add Account Owner.** Add the following account owner on the account(s) indicated
- Personal Account Information Change.**
 - All Accounts
 - As designated

The account(s) is a Multiple Party Account:

- with Rights of Survivorship
- without Rights of Survivorship

Primary Owner

Primary Owner _____

SSN/TIN _____

Address _____

City/State/Zip Code _____

Date of Birth _____ Driver's Lic. # _____

Home Phone _____ Work Phone _____

E-mail _____

Mother's Maiden Name (security code word) _____

Joint Information

Joint account with right of survivorship. If account owner is a minor child, a parent who is member of The Coca-Cola Company Family Federal Credit Union member must be Joint Owner.

Joint Owner _____

SSN/TIN _____

Address _____

City/State/Zip Code _____

Date of Birth _____ Driver's Lic. # _____

Home Phone _____ Work Phone _____

E-mail _____

Mother's Maiden Name (security code word) _____

- Add Agent.** Add the following agent:

Name _____

- All Accounts
- Designate Specific Accounts _____

Type Of Change (cont'd)

Remove Account Owner. Please remove the following account owner from the account(s) designated:

Name _____

We understand removal of a Multiple Party Account Owner requires consent of all account owners, and we will hold Credit Union harmless for actions regarding account access. The removed account owner relinquishes ownership interest including any membership share in the account(s) set forth on the reverse side. This relinquishment does not affect my/our obligation on any loan account(s). **Removed owner must sign on the reverse. Signatures are required and must be notarized.**

- Change Trustee.**
 - Add**
 - Remove the Trustee named below on the following account(s):** (copy of trust documents and photo ID of trustee required to add new trust account)
 - Revocable
 - Irrevocable
- All accounts
- Designate specific accounts

Trustee _____

Address _____

City/State/Zip Code _____

Change Name

- Change Name.**

Change my name as follows:

New Name _____

- Marriage** (attach copy of marriage certificate)
- Divorce** (attach copy of divorce decree)
- Other** (Copy of new I.D. is required for all name changes.)

- Driver License No.** _____

Address Change

- Change Mailing Address.**

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

Old Address

P. O. Box _____

City/State/Zip Code _____

Street _____ Apt. # _____

City/State/Zip Code _____

Country _____

Home Phone _____ Work /Other Phone _____

Email Address _____

New Address

P. O. Box _____

City/State/Zip Code _____

Street _____ Apt. # _____

City/State/Zip Code _____

Country _____

Home Phone _____ Work /Other Phone _____

Email Address _____

Accounts:

- Share/Savings** _____ Add Terminate

Type# _____

- Share Draft/Checking** _____ Add Terminate

- Money Market** _____ Add Terminate

- Share Certificate** _____ Add Terminate

- VISA CheckCard (Checking Account Required)** _____ Add Terminate

- IRA** _____ Add Terminate

Services

- Overdraft Protection:** _____ Add Terminate

Savings Account # _____ Loan CLC _____

(Transfer Priority: _____)

- ATM Card/EFT Service** _____ Add Terminate

- VISA CheckCard (must have checking account and complete required form)** _____ Add Terminate

- Other**

E-Branch

- Add Teller Only** **Add E-Pay**
- Add E-Teller and E-Pay** **Add E-Statement**

- Add new account Acct #:** _____

- New User ID (must be alphanumeric and exactly 9 characters)**

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- Terminate E-Branch**

