



CHANGE OF ADDRESS FORM

Instructions:

Please specify the new address below and which certificate(s) this address change will be applicable for. This form is intended solely for the use by the owner of the certificate(s) listed.

If you have any questions, or for additional information, please contact us at ☎ 1-800-772-8632 or visit our website at www.prcua.org.

1. OWNER INFORMATION

FIRST (MI) LAST NAME

NEW STREET ADDRESS / CITY, STATE, ZIP CODE

PHONE NUMBER

EMAIL ADDRESS

 _____
SIGNATURE OF OWNER

DATE – (MONTH/DAY/YEAR)

2. CERTIFICATE/AGENT ID INFORMATION

Please apply the above address change to the following certificate(s)/loan(s)/Sales Representative(s):

_____ CERTIFICATE/LOAN/SALES REP	_____ CERTIFICATE/LOAN/SALES REP	_____ CERTIFICATE/LOAN/SALES REP
_____ CERTIFICATE/LOAN/SALES REP	_____ CERTIFICATE/LOAN/SALES REP	_____ CERTIFICATE/LOAN/SALES REP
_____ CERTIFICATE/LOAN/SALES REP	_____ CERTIFICATE/LOAN/SALES REP	_____ CERTIFICATE/LOAN/SALES REP
_____ CERTIFICATE/LOAN/SALES REP	_____ CERTIFICATE/LOAN/SALES REP	_____ CERTIFICATE/LOAN/SALES REP

Please apply the new address change to all Life Insurance, Annuities, Loans, and Sales Representative Information (if applicable) to which I am named.

3. ADDITIONAL INFORMATION

Please mail this completed form to:

SECRETARY-TREASURER DEPARTMENT
POLISH ROMAN CATHOLIC UNION OF AMERICA
984 N MILWAUKEE AVE
CHICAGO, IL 60642-4101

INTERNAL OFFICE USE ONLY

PROCESSED BY: _____ (PLACE DEPARTMENT RECEIVED STAMP BELOW)

Auditing _____ Member Services _____

Sales _____ Treasury _____

ATTENTION DEPARTMENTS: PLEASE RETURN FORM TO MEMBER SERVICES AFTER ALL DEPARTMENTS PROCESSING IS COMPLETE