

Address Verification Agreement

Account Number		

Please read agreement carefully and sign below.

I understand and agree that, in order to comply with the Customer Identification Program in accordance with the U.S. Patriot Act, I must submit verification of address. I understand and agree that, if I do not submit a document verifiying my correct address within the next ten calendar days, my account services will be restricted, including ATM Card, VISA Debit Card, GTNet/GTCall access and Service Center access. If the required documentation has not been received within 30 days from the date the account was opened, the account will be closed and any remaining funds will be sent to me via check mailed to the address on the account.

Acceptable forms of address verification:

- Apartment Lease
- Mortgage Statement
- Gas/Electric/Phone Bill
- Credit Card Statement
- Voter's Registration Card
- Insurance Card
- Bank Statement
- Payroll Stub
- Valid Texas Identification Card/Driver's License

The document providing address verification may be submitted through the mail, by fax or in person.

Member Signature	Date	
GTFCU Employee Signature	Date	
For Credi	it Union Use Only	
Received address verification on	Received by OP#	
(date)		
Account services restricted:		
ATM/VISA Debit Card on	by OP#	
(date)		
GTNet/GTCall on by O)P#	
(date)		
Service Center Access on	by OP#	
(date)		
Account Closed:		
Closed account on Clos	sed by OP#	
(date)		
Check #in the amount of \$	S mailed to member on	
	(date)	