



**Unified  
Communities**  
FEDERAL CREDIT UNION

ATM/DEBIT CARD RE-ORDER FORM

Account # Phone #

Member name: \_\_\_\_\_ S/S Number: \_\_\_\_\_

Address: \_\_\_\_\_

Joint Owner's Name: \_\_\_\_\_ S/S Number: \_\_\_\_\_

(ATM CARD / DEBIT CARD / PIN ONLY) Circle one

REASON FOR REPLACEMENT

Lost – Date \_\_\_\_\_

Stolen – Date \_\_\_\_\_

If the member does not know when the card was lost/stolen please put the date they last used the card on here

Machine took card

Magnetic strip worn out / Card cracked

Other – Specify \_\_\_\_\_

Member Signature: \_\_\_\_\_

\*\*There will be a \$5.00 fee charged for all card replacements and a \$2.00 fee for PIN numbers.  
This fee will be deducted from your account\*\*

OFFICE USE ONLY

Date Received: \_\_\_\_\_ Member Service Representative: \_\_\_\_\_

Fee Taken \_\_\_\_\_ Fee Waived \_\_\_\_\_ Reason \_\_\_\_\_

Date ordered: \_\_\_\_\_ By Whom: \_\_\_\_\_

Card Number: \_\_\_\_\_