

MAILED STATEMENT OPT-OUT FORM
ORIGINAL SIGNATURE REQUIRED

IF YOU DO **NOT** WANT TO RECEIVE A MAILED STATEMENT, COMPLETE THIS FORM AND SUBMIT IT ONE OF THE FOLLOWING WAYS:

- SCAN AND E-MAIL TO muskfcu@memberreach.com
- MAIL TO 65 W. LAKETON AVENUE, MUSKEGON, MI 49441
- BRING TO THE CREDIT UNION

PRIMARY OR JOINT OWNERS SIGNATURE

DATE

ACCOUNT NUMBER

STAFF INITIALS