

## Promise Co-op Change Form

Date: \_\_\_\_\_ Name: \_\_\_\_\_

Contact phone number: \_\_\_\_\_ Is this number a change on your account? \_\_\_\_\_

E-mail address changes are done in [www.800link.com](http://www.800link.com) or by calling 800Link customer service: 800-864-2362.

**Please complete only the section you need to be changed.**

- **Credit Card Changes:**

Is this a permanent change for future use? \_\_\_\_\_ Is this a one time only? \_\_\_\_\_

M/C \_\_\_\_\_ VISA \_\_\_\_\_ AMEX \_\_\_\_\_ DISC \_\_\_\_\_

New Credit Card #: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Name on card: \_\_\_\_\_

Address of card holder: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ CC holder phone #: \_\_\_\_\_

**I have authorized the use of my credit card listed above on this account:**

Signature of card holder: \_\_\_\_\_ (this is required)

- **Address Change of Member:**

Street Address \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone#: \_\_\_\_\_

- **Number of Shares\*:** change from \_\_\_\_\_ to \_\_\_\_\_ effective month: \_\_\_\_\_

- If you are decreasing shares, this form must be in our office no later than the 8<sup>th</sup> of the month PRIOR to the month of shares to be decreased. i.e. January 8<sup>th</sup> is the deadline for February decrease in shares.

- \*If you are increasing shares, **you must notify us by the last business day of the month and no later than 12:00 noon CST, to ensure that this change will take place the following month.**

You will receive an email confirmation of any changes made within ONE business day of sending this form. If you do NOT receive a confirmation, call our office immediately. You will need the confirmation for any verification.

**Fax to 573-346-0275 or email in a scanned copy to [customerservice@promisecoop.com](mailto:customerservice@promisecoop.com) After faxing in this form, please call the office at 573-346-7175, or send an e-mail to verify that we received the form.**