



Change of Address Form

Instructions:

- 1. Please complete this form and print in capital letters
- 2. Please mail the completed form to: **Oikocredit USA, PO Box 66383, Washington, DC 20035**
- 3. If you need assistance completing this form, please contact us at **202-728-4143**

A. Individual or Joint Investor Information

Name _____
First Middle Initial Last

If joint account _____
First Middle Initial Last

B. Institutional, Trust, or Other Organizational Information

Institution

C. Investor Information

Investor ID #: _____

D. Current Address on File

Address

City State Zip

Phone Email

E. New Address

Address

City State Zip

Phone Email

F. Signature

Individual, Trustee, or Officer Signature Date

Joint Signature Date