

No Mail Request/Release

Complete this form to request Buffalo Metropolitan Federal Credit Union to stop sending correspondents or to release a previous no mail request. Completed forms can be mailed to 62 S. Elmwood Ave., Buffalo, NY 14202.

Name (first/middle/last): _____

Account number: _____ Last four of your SSN: _____

Address: _____ City: _____ State: _____ Zip: _____

Home telephone #: _____ Work #: _____ Cell #: _____

Please select one:

☐ I hereby request and authorize Buffalo Metropolitan Federal Credit Union to stop ALL Credit Union mail including Credit Union statements. I understand I will still receive all Supervisory Committee Audit statements. I understand my statement may be on route to me at the time of my request, so it may take one month for my request to become effective.

☐ Please release my previous no mail request; I would now like to receive ALL Credit Union mail. I understand that it may take one month for my request to become effective.

Signature: _____ Date: _____

Employee Initials: _____

Rev 06/14



Buffalo Metropolitan Federal Credit Union

Banking at its Best

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