

**COGIC CREDIT UNION**  
**P O BOX 5057**  
**LAFAYETTE, LA 70502**  
**Phone:(337) 372-1700 Fax: (877) 471-5646**

**INFORMATION UPDATE**

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

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

City : \_\_\_\_\_ State : \_\_\_\_\_ Zip : \_\_\_\_\_

Home Phone : \_\_\_\_\_ Work : \_\_\_\_\_ Cell : \_\_\_\_\_

Employer : \_\_\_\_\_ Email: \_\_\_\_\_

Social Security Number : \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Beneficiary : \_\_\_\_\_ Relationship : \_\_\_\_\_

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

Beneficiary Phone Number : \_\_\_\_\_

District : \_\_\_\_\_ Church : \_\_\_\_\_

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