



## OPT IN TO MAIL STATEMENT & MARKETING MAILINGS

Date:.....

Account (s): .....

Name:.....

**Please select one option:**

I wish to receive paper Statement and mailings related to Marketing from PSFCU or CUNA Mutual\* 2

I wish to receive paper Statements but not any mailing related to Marketing from PSFCU or CUNA Mutual\*4

*I understand that PSFCU Notices required by law are not subject to this request and I will continue to receive them.*

\_\_\_\_\_  
**Member's Signature**

\*\*\*FOR PSFCU USE ONLY\*\*\*

Mail Codes:

2.

Please select Opt-In and Opt-Out:

4.

Please select Opt-In and Opt-Out: