



Texas Partners Federal Credit Union

Thank you for your interest in a Texas Partners Federal Credit Union's Automated *T*eller *M*achine card.

In order to process your request, please complete the following:

Name: _____

Account #: _____

Address: _____

Phone #: _____

ADDITIONAL CARD

Name: _____

You must select your own **P**ersonal **I**dentification **N**umber for this card, below. We will not retain nor return the number once it is issued. Please make a note of your selection.

Signature_____ Signature_____

NOTE: If you are requesting the card and you are not the primary member on this account, the primary member must also sign.

Please select a FOUR (4) DIGIT **P**ersonal **I**dentification **N**umber:

Offices:

1011 Wales Dr, Killeen, TX
809 S Main, Copperas Cove, TX
2445 N Main, Belton, TX

Mailing Address:

Post Office Box 1389
Killeen, Texas 76540-1389
(254) 526-3081 • (800) 246-7039