

# REQUEST TO REMOVE AUTHORIZED USER

JSC Federal Credit Union  
P.O. Box 58346 • Houston, Texas 77258  
281.488.7070 • www.jscfcu.org



The Request to Remove Authorized User form is used to remove an authorized user from your Visa Credit Card.

## INSTRUCTIONS

- The form must be filled out completely.

## WHERE DO I SEND MY COMPLETED FORM?

- Return the **completed** form to any JSC FCU branch.
- Or fax the form to 281.488.5116, Attn: Accounting Department.
- If eSigning this document, follow the DocuSign procedures.

## QUESTIONS

Contact the Accounting Department  
Phone: 281.488.7070  
Fax: 281.488.5116

## GOOD TO KNOW

- Please allow 24 to 48 hours to process the request.

Date: \_\_\_\_\_

VISA Account #: \_\_\_\_\_

Member #: \_\_\_\_\_

I, \_\_\_\_\_ request to remove the following person,  
\_\_\_\_\_ from my Visa Credit Card as an authorized user.

I have destroyed the card.

I am enclosing the card to be destroyed.

Print Member Name: \_\_\_\_\_

Member Signature: \_\_\_\_\_