

	MIDWEST	Received By:	Branch:	
	5.11.6			
	Debit Ca	rd Change Request Fo	orm	
Date:		Card #		
	Cardholder Nam	e (Please Print):		
		Primary Ph	one:	
		Secondary Phone:		
	S	gnature:		
Check	k all that apply:			
	Immediately cancel (hotcard)□ Order new card at no che□ Fraud forms completed	-		
	Lost, stolen, or misplaced debit card. (hotcard) □ Order new card. *\$10.00 Replacement Fee Applies □ Do NOT order new card.			
	Card is no longer usable due to normal wear or damage. □ Order replacement card at no charge.			
	Request New PIN *\$2.00 repla Order from Shazam (Ra EASY PIN Reference #	andomly generated PIN)	PIN)	
	Link Savings Account #	to debit ca	rd for ATM cash withdrawals.	
		/To/		
	Request To Raise Daily Limit Raise Point-of-Sale Tra			

□ Dates Effective: From ___/___ To ___/___

Effective: March 2017