NORTHLAND COMMUNITY AND TECHNICAL COLLEGE CARDHOLDER ACCOUNT MAINTENANCE REQUEST FORM

CARDH	OLDER NAME		
DATE _			
TYPE O	F REQUEST		
	CANCEL CARD SINGLE TRANSACTION LIMIT CHANGE-LIST AMOUNT O TEMPORARY CHANGE-INDICATE END DATE O PERMANENT CHANGE MONTHLY LIMIT CHANGE-LIST AMOUNT O TEMPORARY CHANGE-INDICATE END DATE O PERMANENT CHANGE CARDHOLDER NAME CHANGE		
EXPLAN	NATION OF REQUEST		
	OLDER SIGNATURE		
CANDII	OLDER SIGNATURE	DAIL	
SUPER	VISOR SIGNATURE	DATE	
BUSINE	ESS MANAGER'S SIGNATURE	DATE	
RETUR	N COMPLETED REQUEST TO:		

Account Maintenance Form

EAST GRAND FORKS BUSINESS OFFICE ATTN: Rachel Larsen, Business Manager