VERIFICATION OF ADDRESS

Attention to : St. Francis Xavier Credit Union Ltd	
Branch: Dat	te:/
Dear Sir/Madam,	
l,	hereby confirm that
(Name of Member)	
(If Minor - along with	Parent/Guardian)
Lives at my/the following address being: (Village, Town, D	District, Country)
	for the
pastmonths/years; Therefore, the acc	companying Utility bill in my name.
along with my Identification, serves as his/her addre	
along with my identification, serves as martier addre	ess verilloation
Relationship of Bill Holder to Member	
Sincerely,	
(Circothus of Hillit, Dill Holdon)	
(Signature of Utility Bill Holder)	
For SFXCU official Use only: (revised November 27, 2019)	
I,, certify that a identification document (Social Security Card $\ \square$, Passpo	a true and original copy of the ort
presented to me on this day/ (See attached	
Received hy:	[Teller Stamp or Signature]
Received by: (SFXCU Teller/Officer Name & Signature)	
Member Ac # Branch	