

South Central Credit Union Travel Notification

Cardholder Information:

Card Number: _____ Account Number: _____

Last Name: _____ First Name: _____

E-mail Address: _____

Phone Number: _____ Type: _____

Phone Number: _____ Type: _____

Travel Details:

Date From: _____ Date To: _____

Destination Country (if applicable): _____

State(s) (if in the US): _____

Travel Details (flying, driving, etc): _____

Members Signature (Not Required): _____

**(Out of wallet verification is required for last minute notification by member.
Obtain signature whenever possible on Travel Notification.)**

SCCU Employee's Signature: _____ Date: _____

Received by: _____ Date Logged: _____

Scanned: _____

** All information is to be completed by member traveling, or employee if over phone. We can use this information to update accounts as necessary.*