



Preserving Your Financial Future

Credit Limit Increase Request Form

NAME: _____

ACCOUNT NUMBER: _____

INCREASE REQUESTED: _____

PHONE NUMBER: _____

CURRENT EMPLOYER: _____

PLEASE COMPLETE FORM & RETURN TO:

ANY BRANCH OFFICE

FAX: 989-766-2652

MAILING ADDRESS:

CALCITE CREDIT UNION

PO BOX 111

POSEN, MI 49776

ROGERS CITY OFFICE: 478 NORTH THIRD STREET * ROGERS CITY, MICHIGAN 49779
VOICE: 989-734-4130 OR 1-877-CALCITE * FAX: 989-734-3422

POSEN OFFICE: 10514 NORTH MICHIGAN AVENUE * POSEN, MICHIGAN 49776
VOICE: 989-766-8111 * FAX: 989-766-2652

CHEBOYGAN OFFICE: 1005 S. MAIN STREET * CHEBOYGAN, MICHIGAN 49721
VOICE: 231-597-9660 * FAX: 231-597-9665