

CHANGE OF MAILING OR E-MAIL ADDRESS FORM

Mailing and/or e-mail address changes can be made electronically by the contract Purchaser through the Profile
section when you log in to your account at collegeillinois.org or may be submitted to College Illinois!® using any of the
ways listed at the bottom of this form.

Current Cont	ract Information	n					
Current Purcha	ser						
Daytime Phone	Number						
New Address	Information						
Please indicate	NEW informati	on below:					
Street Address/P	O Box/Apt. #						_
City / State / Zip	Code						_
Daytime Telepho	ne Number						_
E-mail address							_
Does this change apply to: (check all that apply) Beneficiary Only				Beneficiary	<u> </u>	ser Only sor Purchaser	
Please indicate	all accounts th	at are affected b	y this chan	ge:			
Account Number(s):				Beneficiary name(s):			
X							
Signature of Purchaser				Date			
Questions should	d be directed to C	ustomer Service a	at our toll-fre	e number, 1-877-87	7-3724.		
Please mail to:	College Illinois! P.O. Box 44030 Jacksonville, FL		Cus	lege Illinois! stomer Service Dep 00-519-4652		oad at: collegeillinois.org Online account access, Document Upload section	ı