

CHANGE OF ADDRESS FORM

DATE _____

Port _____

CUSTOMER DATA

Name _____

S.S. # _____

Old Address _____

County _____

New Address _____

County _____

New Phone# _____

Web-Bill Pay? Y or N (Circle One) | Verified ID? Y or N (Circle One)

All Accounts or Account # _____ | _____ | _____

Customer Signature _____

-----For Bank Use Only-----

Interest Bearing Accounts: Y or N (Circle One)

Changed Deposit Rate Index: Y or N (Circle One)

Received by _____

Data Entry by _____ Partnercare _____

Data Changed on Checks by _____