



### ADDRESS CHANGE REQUEST

To complete your address change, simply fill out this form in its entirety. One form must be completed per person. Once completed, please sign and return this form in person or by mail to: First Federal Savings Bank of Angola, 212 E Maumee St., Angola, IN 46703. Questions? Contact us at 260-665-7556.

EFFECTIVE DATE: \_\_\_\_\_

NAME: \_\_\_\_\_ SS# \_\_\_\_\_

<b>OLD ADDRESS:</b>		
Mailing Address: _____		
Physical Address: _____		
City: _____	State: _____	ZIP: _____
Home Phone#: _____	Cell#: _____	
Email: _____		

<b>NEW ADDRESS:</b>		
Mailing Address: _____		
Physical Address: _____		
City: _____	State: _____	ZIP: _____
Home Phone#: _____	Cell#: _____	
Email: _____		

Does this change apply to all of your accounts?  Yes  No

If No – please list accounts that need changed: \_\_\_\_\_

Seasonal Address Change: Date From \_\_\_\_\_ to \_\_\_\_\_

Request Received:  In Person  By Mail

\_\_\_\_\_  
Customer Signature

\_\_\_\_\_  
Date

*Thank you for banking with First Federal Savings Bank of Angola*

Bank Use Only: Input By \_\_\_\_\_ Verified By \_\_\_\_\_ Date \_\_\_\_\_