WOODLANDS BANK

Change of Address Form

To submit an address change, please print and complete this form by providing the required information and customer signature(s). Then, deliver the completed form to any Woodlands Bank community office for processing.

☐ Permanent/Home Address ☐ Mailing/Alternate Address ■ Effective Date: _____

Customer's Name(s): 1) _____ 2) _____

Social Security Number(s): 1)_____ 2)_____

Previous Address: _____

_____

New Address: _____

_____

County/Township: _____

Home Phone: 1) _____ 2) _____

Work Phone: 1) _____ 2) _____

Account Number(s) Affected: _____

Debit Card Number(s): 1) _____ 2)_____

Does either customer use internet banking? Please circle: Customer 1) **Yes** or **No** Customer 2) **Yes** or **No**

Please list any account number(s) for which new checks should be ordered: _____

Does this address change affect anyone else who has accounts with us? Please circle: **Yes** or **No**

If yes, please provide name(s): _____

_____ _____

Customer's Signature Date 2nd Customer's Signature * Date

** 2nd Customer's signature required if 2nd customer maintains his/her own ATM/Debit card or Internet Banking Service relationship, or is a Woodlands Financial Services Stock owner.*

ID Verified: ☐ Photo ID ☐ Signature ☐ Other_____

County/Census Tract: _____

Changed By: _____ Date: _____

Reviewed By: _____ Date: _____

Comments: _____

COPIES MADE

☐ **Shareholder**

☐ **Internet Banking**

☐ **Consumer Loans**

☐ **Commercial Loans**

SI 4/9/08