



SAVINGS BANK

**Change of Address**  
(or addition of alternate address)

Please change my/our mailing address, effective: \_\_\_\_\_

<i>Old Address:</i>	<i>New Address:</i>

<p><b>Accountholder (1):</b></p> <p>Primary phone # _____ <span style="margin-left: 20px;">Cell Home Work <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></span></p> <p>Secondary phone # _____ <span style="margin-left: 20px;"><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></span></p> <p>Other phone # _____ <span style="margin-left: 20px;"><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></span></p> <p>Email address _____</p>	<p><b>Accountholder (2) (if applicable):</b></p> <p>Primary phone # _____ <span style="margin-left: 20px;">Cell Home Work <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></span></p> <p>Secondary phone # _____ <span style="margin-left: 20px;"><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></span></p> <p>Other phone # _____ <span style="margin-left: 20px;"><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></span></p> <p>Email address _____</p>
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**Option 1:** I/we authorize Arundel Federal Savings Bank to change my/our address of record on any and all accounts to which I/we are a party.

**Option 2:** I/we authorize Arundel Federal Savings Bank to change my/our address of record on only the account (s) listed below:

**INCLUDE ALL ACCOUNTS** (i.e. Savings, Checking, Certificates, IRA's, Safe Deposit Box, Debit MasterCard™, Share Loans, Consumer Loans, Mortgage Loans, Ready Reserve, Home Equity Loans, 2nd Mortgages)

ACCOUNT TYPE	ACCOUNT NUMBER	ACCOUNT TYPE	ACCOUNT NUMBER
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

<p><input type="checkbox"/> <b>I/we wish to use the "Alternate Address" listed below for the following mail:</b></p> <p><input type="checkbox"/> Interest Checks <input type="checkbox"/> Statements <input type="checkbox"/> Other: _____</p> <p>Alternate Address _____</p> <p>Effective from _____ to _____ <input type="checkbox"/> PERMANENT <input type="checkbox"/> SEASONAL</p>
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Signature(s):

(1) \_\_\_\_\_  
Signature Date

\_\_\_\_\_

Print Name

(2) \_\_\_\_\_  
Signature (if applicable) Date

\_\_\_\_\_

Print Name

For Office Use Only		
Signature (1) verified by:	Date verified:	Branch:
Signature verification method:		
Signature (2) verified by:	Date verified:	Branch:
Signature verification method:		
Maintenance Review by:	Date verified:	Branch:

**For Bank Use:**  
If the customer is a loan customer, please forward a copy to the lending department.