



LEGENDS

BANK

MEMBER FDIC

Change of Address Form

Section 1: Who is moving, and when?

Individual Entire Family Business Effective Date: _____

Note: Marking "Entire Family" will change the address of all members and accounts within your household.

Section 2: Name(s) and Address

Name(s): _____

If this form affects other household individuals or entities, please list each one and their relationship to you:

Old Address

Street: _____

City, State, Zip: _____

Contact Information

Home Phone: _____

Business Phone: _____

Cell Phone: _____

New Address

Street: _____

Mailing (if different): _____

City, State, Zip: _____

Email Address: _____

Section 3: Account Relationships

Are all your accounts affected by this address request form? Yes No

If not, please check all that apply and include account numbers. **Only accounts indicated will be changed.**

- Checking IRA
- Savings Safe Deposit Box
- CD Loan

Account Numbers:

Section 4: Signature and Date

Authorized signature and date are required for valid address change

Signature: _____ Date: _____

Signature: _____ Date: _____

For Bank Use Only

Form Received at Branch by _____ (Print Name)

Verified at Main by _____ (Print Name)

- Notify Visa/MC Notify Internet Banking Notify Shazam

Check this box if you do not want to send change of address notice (i.e. change of an organization's officers).