



CHANGE OF ADDRESS

Completing your change of Address:

To complete your change of address, simply fill out this Change of Address form. Once completed please sign and return this form to your nearest Hoosier Heartland State Bank Branch or by mailing to: Hoosier Heartland State Bank, PO Box 8, Ladoga, IN 47954.

DATE _____ SSN/TN# _____

PRESENT NAME AND ADDRESS
NAME _____ PHONE _____
ADDRESS _____ CITY _____
STATE _____ ZIP CODE _____ E-MAIL _____

NEW ADDRESS
NAME _____ PHONE _____
ADDRESS _____ CITY _____
STATE _____ ZIP CODE _____ E-MAIL _____

ACCOUNT NUMBER(S) (please indicate your accounts by check mark)

WILL THIS APPLY TO ALL YOUR HHSB ACCOUNTS? YES NO

If no, please list accounts that need to be changed:

IF THIS IS A SEASONAL ADDRESS:

Effective Date: _____ to _____

Request received: In Person By Mail

Customers Signature: _____

Verified by HHSB employee _____ Date Received _____

Need help? Call 765-364-6666 or 765-364-0784 to speak with Customer Service.

Thank you for choosing HHSB and being part of our family.

Bank use only: Input by _____ Verified by _____ Date _____