



## 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 \_\_\_\_\_

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

Request received In Person: \_\_\_\_\_ By Mail: \_\_\_\_\_

Verified by HHSB employee: \_\_\_\_\_ Date Received: \_\_\_\_\_

Input by: \_\_\_\_\_ Verified by: \_\_\_\_\_ Date: \_\_\_\_\_