

The BANK 1905

Serving Fayette, Hardeman, and McNairy Counties

*P.O. Box 519
Rossville, TN 38066*

Regardless of where you are moving, we want to make your move easier. When you know your new address, please complete this change of address form, tell us when it will be effective, and mail or deliver this form to the Bank at any branch location. We will update our records so that your statements and other correspondence are sent to your new location after the move. Our new accounts representative will be glad to help you if you need to order checks with your new address.

ACCOUNT NAME		EMAIL ADDRESS	
OLD ADDRESS		STREET	
CITY		STATE	ZIP CODE
NEW ADDRESS			
CITY		STATE	ZIP CODE
P.O. BOX, STATE, ZIP CODE (IF MAILING ADDRESS IS DIFFERENT THAN STREET ADDRESS)			
HOME PHONE	WORK PHONE (S)	CELL NUMBER(S)	

Please indicate the account(s) to be changed:

- | | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> CHECKING
ACCT.# _____
ACCT.# _____

<input type="checkbox"/> SAVINGS
ACCT.# _____
ACCT.# _____

<input type="checkbox"/> IRA AND/OR CD
ACCT.# _____
ACCT.# _____

<input type="checkbox"/> MONEY MARKET
ACCT.# _____
ACCT.# _____

<input type="checkbox"/> SAFE DEPOSIT BOX
NUMBER _____ | <input type="checkbox"/> CONSUMER LOAN
ACCT.# _____
ACCT.# _____

<input type="checkbox"/> REAL ESTATE LOAN
ACCT.# _____
ACCT.# _____

<input type="checkbox"/> COMMERCIAL LOAN
ACCT.# _____
ACCT.# _____

<input type="checkbox"/> BANK CREDIT/ATM CARDS
ACCT.# _____
ACCT.# _____

<input type="checkbox"/> OTHER
ACCT.# _____
ACCT.# _____ |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

X _____
Authorized Signer

X _____
Authorized Signer **Date**