



THIS SECTION FOR BANK USE
Accepted By:

Change of Name / Address Request
(complete one form for each accountholder affected by change)

Name as currently listed on accounts (please print): _____

New name if applicable: _____

Last 4 digits of social security number _ _ _ _

Please change my address and telephone information as follows:

Old address: _____

Old home telephone number: _____

New address (physical address): _____

New mailing address, if different: _____

New home telephone number: _____

Business telephone number: _____

Personal cellphone number: _____

Email address: _____

Signature (required)

Date

Drop off this form at any Peoples State Bank branch, or you may mail or fax it to:
Peoples State Bank
Attn: Customer Service
205 W. Lockhart St.
Sayre PA 18840
Fax 570-888-9856