

**PEOPLES FEDERAL SAVINGS & LOAN ASSN.
CHANGE OF CUSTOMER INFORMATION**

DATE: _____ **SSN:** _____

PRESENT NAME & ADDRESS **NAME** _____ **PHONE** _____
ADDRESS _____ **CITY** _____
STATE _____ **ZIP CODE** _____

NEW NAME & PRIMARY ADDRESS **NAME** _____ **PHONE** _____
ADDRESS _____ **CITY** _____
STATE _____ **ZIP CODE** _____

MAILING ADDRESS (IF DIFFERENT) **ADDRESS** _____ **CITY** _____
STATE _____ **ZIP CODE** _____

ADDITIONAL INFORMATION **MOTHER'S MAIDEN NAME** _____
DRIVER'S LICENSE # _____
ISSUE DATE _____ **EXP DATE** _____
DATE OF BIRTH _____

OTHER NAMES IN HOUSEHOLD AFFECTED BY ADDRESS CHANGE _____

SIGNATURE _____ **TAKEN BY** _____

ATTACH A CUSTOMER PROFILE AND CIRCLE OR HIGHLIGHT THE ACCOUNT NUMBERS THAT THIS AFFECTS.

DATE _____

MAINTENANCE DONE BY _____