

Address Change ☐ (customer requested) Bank Correction ☐ (signature not required) Returned Mail ☐

Customer Name			Date			
ACCOUNT TYPE	ACCOUNT NUMBER	A	CCOUNT TYPE	ACCOUNT NU	JMBER	
Disease DDINIT /s Library silvers		`	0 / "	•		
Please PRINT (address chanç <sub>Name</sub>	je affects customer(s) below	<b>')</b> :	Customer "CIS"* (Physical)	Account* (Mailing)	Alternate**	
			New Address (if "hold," must b		Shipping** unt address)	
Social Security Number Home Phon	e Work Phone					
Cell Phone	Primary Foreign Phone					
<b>-</b> "						
Email Address						
Name			<del>_</del>			
Social Security Number Home Phon	e Work Phone		Additional Instructions			
,			Additional Institutions			
Cell Phone Email A	Address					
					•	
Customer Signature			Date			
-			Date			
			Date			
Branch Use Only Received By (Employee Name and Nu	mber)		Received By:	e 🗌 Mail	☐ In Person	
☐ Does customer have Debit Card?	☐ Yes ☐ No					
(If yes, send copy to BankCard Center.)			*Confirmation Card Sent (Date) Cust. ID Type and #			
☐ Change Mail Code: (see Deposit System Codes Referen Guide, CM-5087, for codes.)	From Toce					
☐ Change Foreign Country Codes:						
☐ Does Customer Initiate Repetitive \	Vire Transfers? ☐ Yes ☐ No	(If "yes," s	send copy of this form along with EX	-844 to Wire Trans	fer Dept.)	
Department Use Only						

\_\_\_\_\_ Verified By\_\_\_\_

CM-518 (Modified for SRM 10/26/22)

## ADDRESS CHANGE FORM ROUTING CHECKLIST

Change To	Form Routing Instructions		
Customer Record	Scan to FCM		
Deposit Accounts	Scan to FCM		
Loans & FirstLines	D1 to Consumer Credit Service Center D1 to Guam Dealer Center/Consumer Credit Center D1 to Dealer Loans		
Credit Cards	D1 to Card Services - Address Changes		
Business Debit	D1 to Card Services - Address Changes		
HELOC	D1 to HELOC		
Mortgage	D1 to Mortgage Service Center		
OTHER			
Auto Leasing	D1 to EOS - Commercial Loan Center		
Business Cash Manager	Interoffice to Cash Mgt Services		
Commercial Loan*	D1 to EOS - Commercial Loan Center		
Merchant Services	Interoffice to Merchant Services Dept.		
Quick Tax/Payroll	Interoffice to Business Services Support		
Wealth Management	Interoffice to Wealth Management Service Center		
Institutional Advisory Services	Interoffice to Institutional Advisory Services		
Personal Trust	Interoffice to Personal Trust		
Trust Real Estate Services	Interoffice to Real Estate Services		
Trust Retirement Benefits	Interoffice to Trust Retirement Benefits		

<sup>-</sup>Scan to FCM: Follow standard FCM scanning instructions. File the original for 90 days, then shred it.
-D1: Use the Contact Information Change - Address, Phone, or Email case (select recipient via drop down menu), scan signed form & attach.
-Interoffice: Use Interoffice Mail and send the signed form to the recipient identified above.

<sup>\*</sup> Indicate Physical (Customer CIS), Mailing (Account) or check both

<sup>\*\*</sup> Alternate Address - additional mailing address for statements Shipping Address - additional shipping addresses for credit/debit card purchases