

**Follow these steps**

1. Complete and sign this form to update the contact information for your accounts.
2. List all accounts that you want updated or select Please change all of my accounts (next page).
3. Send us your updated information.
  - Drop it off at any American Savings Bank ("ASB") branch or
  - Mail to American Savings Bank; Attn: Deposit Support Services; PO Box 2300; Honolulu; HI 96804-2300 or
  - Call the Customer Banking Center at (808) 627-6900 or toll-free at (800) 272-2566 or
  - Login to eBanking. Update your contact information under Settings > Manage Contact Information

CUSTOMER'S LAST NAME OR BUSINESS NAME	MIDDLE INITIAL
CUSTOMER'S FIRST NAME	SUFFIX

**Please change my mailing address:**

OLD MAILING ADDRESS	APT NO	CITY	STATE	ZIP CODE	COUNTRY
NEW MAILING ADDRESS	APT NO	CITY	STATE	ZIP CODE	COUNTRY

**Please change my residence address (if different from mailing address):**

OLD RESIDENCE ADDRESS	APT NO	CITY	STATE	ZIP CODE	COUNTRY
NEW RESIDENCE ADDRESS (PO BOX, PMB, RR, HCR, C/O are not accepted)	APT NO	CITY	STATE	ZIP CODE	COUNTRY

**Please change my contact information (by providing my phone numbers, I give ASB permission to contact me at these phone number(s) and/or email address):**

EMAIL ADDRESS	LAST 4 DIGITS OF SSN/TAX ID NUMBER	
HOME PHONE NUMBER	MOBILE PHONE NUMBER	BUSINESS PHONE NUMBER

Please change all of my accounts (no need to fill out account details below):

Please change ONLY the accounts listed below:

NOTE: Our credit cards are issued by First Bankcard, a division of First National Bank of Omaha ("FNBO"). To update your credit card account contact information, login to your account at <https://firstbankcard.com> and update your profile or call FNBO toll-free at (888) 295-5540.

DEPOSIT ACCOUNTS			
ACCOUNT TYPE	ACCOUNT NUMBER 1	ACCOUNT NUMBER 2	ACCOUNT NUMBER 3
PERSONAL CHECKING			
ATM / DEBIT CARD			
PERSONAL SAVINGS/MONEY MARKET ACCOUNT			
BUSINESS CHECKING			
BUSINESS ATM / DEBIT CARD			
BUSINESS SAVINGS/MONEY MARKET ACCOUNT			
CERTIFICATE OF DEPOSIT (CD)			
INDIVIDUAL RETIREMENT ACCOUNT (IRA)			
SAFE DEPOSIT BOX			
LOAN / LINE ACCOUNTS			
MORTGAGE LOAN			
PERSONAL LOAN / LINE			
BUSINESS LOAN / LINE			
OTHER ACCOUNTS			
AMERICAN INSURANCE AND INVESTMENTS			

**X**

SIGNATURE (required by one accountholder of the above accounts)

DATE

Thank you for submitting your contact information update. Once we receive your request it may take up to 5 days to process the change(s).

**PLEASE DO NOT ENCLOSE DEPOSITS OR PAYMENTS**

BANK USE ONLY		
FOR BRANCH/DEPT USE		FOR DSS USE
CUSTOMER VERIFICATION <input type="checkbox"/> SIGNATURE CARD <input type="checkbox"/> CUSTOMER KNOWN		COMPLETED ONLINE BY:
BRANCH: _____ DATE: _____		DATE:
VERIFIED BY: _____		REVIEWED BY:
FOR BRANCH HELP DESK USE <input type="checkbox"/> ADDRESS ON FILE IS CORRECT. PLEASE REMOVE MAIL CODE 5 FROM THE ACCOUNT(S) ABOVE.		