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Shareholder Change of Address Form
All items in BOLD PRINT & with an * are required to be filled in

*** NAME** (please print)

Last	First	Middle
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Custodian for the following BBNC Shareholders: (please include child's social security number)

*****Returned mail from an old address will affect direct deposits of BBNC and village corporation dividends*****

*** NEW ADDRESS**

*Last four Digits of Shareholder Social Security Number: XXX-XX-_____

Shareholder Date of Birth (mm/dd/yyyy): _____

Phone Numbers: Home: _____

Work: _____

Cell: _____

Other: _____

Email Address: _____

***Signature:** _____ **Date (mm/dd/yyyy):** _____

A new address can only be changed with a signed consent. Please mail or fax completed form to the above address or fax number.

Please check below for form/s you would like sent to your address(for other information please call our toll free #)

- BBNC Stock Will Form Gifting Forms BBNC Identification
- Resume Worksheet Direct Deposit Authorization Name Change Affidavit