## Address Change Form



Change of address can be made by submitting this form.

Name:	Einst Manne /	M	neck One:	Sharehold		
	First Name /	IVIIC	ddle Initial	/	Last Name	Last 4-digits of SSN: (xxxx)
failing Add	droce	City		State	Zip (	Codo
Tannig Aut	uress.	City		State	Zip	Loue
Iome Num	ıber:	Но	me Number:			Mobile Number:
Email Address:			Would you like to receive electronic updates from Koniag?			
		Au	to Phone Messa	ages: 🗌 Ye	s 🗆 No	Text Messages: ☐ Yes ☐ N
CUSTODIA	N INFORMATION	If a	applicant is a mir	nor (under age	18), provide informa	ation of the Custodian/Guardian.
Name:	First Name	/	Middle Initia			Name
Mailing Ado	dress:	City		State	Zip (	Code
elephone:		Ema	il:			Last 4-digits of SSN: (xxxx)
Signatura	(or Custo dian/Cuar	dian			Data	
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certify tha	t the information provide  MAIL, FAX OR EMAIL	ed on this form	is true and corn	rect to the be	st of my knowledg	
DELIVER, I	MAIL, FAX OR EMAIL	ed on this form	is true and cor	rect to the be	st of my knowledg Shareholder Reco	ords
DELIVER, Chareholder 94 Alimaq	MAIL, FAX OR EMAIL  Records  Drive	ed on this form	is true and corn	rect to the be	st of my knowledg Shareholder Recc 3800 Centerpoint	ords Drive, Ste 700
DELIVER, Chareholder, 94 Alimaq Kodiak, AK	MAIL, FAX OR EMAIL  Records  Drive	ed on this form	is true and cor	rect to the be	Shareholder Reco 3800 Centerpoint Anchorage, AK 9	ords Drive, Ste 700
DELIVER, hareholder 94 Alimaq Godiak, AK 2: 907-486-2 : 907-486-3	MAIL, FAX OR EMAIL or Records Drive 199615 12530 or toll free: 800-658-3	ed on this form	is true and cor		Shareholder Reco 3800 Centerpoint Anchorage, AK 9 P: 907-561-2668 o F: 907-562-5258	ords Drive, Ste 700 9503 r toll free: 800-658-3818
DELIVER, Chareholder 94 Alimaq Codiak, AK 2: 907-486-2 3: 907-486-3	MAIL, FAX OR EMAIL or Records Drive 99615 2530 or toll free: 800-658-3	ed on this form	is true and cor		Shareholder Reco 3800 Centerpoint Anchorage, AK 9 P: 907-561-2668 o F: 907-562-5258	ords Drive, Ste 700 9503
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Last Saved: 09/11/2023