

Dickman v. Banner Life Insurance Co. Settlement Administrator
P.O. Box 43434
Providence, RI 02940-3434



BND

Dickman v. Banner Life Insurance Co.
UNITED STATES DISTRICT COURT
DISTRICT OF MARYLAND
Case No. 1:16-cv-00192-RDB

CHANGE OF ADDRESS FORM

I wish to change my name and/or mailing address and/or other contact information, for purposes of receiving communications related to this Lawsuit and Settlement, to the following:

<input type="text"/>			<input type="text"/>	<input type="text"/>	
FIRST NAME	M.I.	LAST NAME			
<input type="text"/>					
PRIMARY ADDRESS					
<input type="text"/>					
PRIMARY ADDRESS CONTINUED					
<input type="text"/>			<input type="text"/>	<input type="text"/>	
CITY			STATE	ZIP CODE	
<input type="text"/>			<input type="text"/>		
TELEPHONE NUMBER					
<input type="text"/>					
E-MAIL ADDRESS					
<input type="text"/>					
I understand all future correspondence in this Lawsuit, including but not necessarily limited to important notices or settlement payments, will be sent to the address listed above and not to the address previously used. I hereby request and consent to the use of the address listed above for these purposes.					
Signature of Claimant: _____			Dated (mm/dd/yyyy): _____		
Print Name: _____					

PLEASE RETURN THIS FORM VIA UNITED STATES FIRST-CLASS MAIL TO:

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