



## APPLICATION TO CHANGE THE CARD MONTHLY STATEMENT SENDING ADDRESS

To AB Ūkio bankas \_\_\_\_\_ branch

Date: \_\_\_\_ \ \_\_\_\_ \ \_\_\_\_  
DD MM YYYY

\_\_\_\_\_  
First name, last name / Company name

\_\_\_\_\_  
Personal code / Company code

\_\_\_\_\_  
Address (street, house N°, city / district, post code, country)

\_\_\_\_\_  
Telephone No. (with country code)

Please send the card account monthly statement of the card (s) listed in the table (choose one):

By e-mail: \_\_\_\_\_

By address \_\_\_\_\_  
(street, house N°, city / district, post code, country)

Do not send

No.	Card name	Card No.

I confirm that information submitted is correct:

\_\_\_\_\_  
Client's first name, last name

Signature \_\_\_\_\_

**AB ŪKIO BANKAS**

The Client's application accepted by:

\_\_\_\_\_  
Bank officer's first name, last name

Signature \_\_\_\_\_