

NOTICE OF CHANGE OF ACCOUNT TYPE

Date:			
Account No	o.:		
Old Accour	nt Type:		
New Accou	ınt Type:		
To be Effe	ctive:		
above and specific da	to make ned te is stated a	cessary chango above.	o change my/our account type as described es to be effective immediately unless a angs Disclosure for the new account type.
Signature			Signature
Name (Print)			Name (Print)
(Internal Use	ONLY)		
Hanmi Bank			Branch
Date			
Input by	Review by	Approved by	