

## Mail-in Form

If you have joint accounts, your choice(s) will apply to everyone on your accounts.

**Please note: If you have previously informed us of your preference, you do not have to do so again.**

**Mail to:**

TowneBank  
Attn: Compliance Department  
P. O. Box 2818  
Norfolk, VA 23501-2818

**Check here** if you do not want TowneBank and its family of companies to share personal information about you, as outlined below:

- For TowneBank marketing purposes to offer products and services to you.
- For joint marketing with other financial companies to offer products and services to you.
- For Towne affiliates' everyday business purposes (specifically your creditworthiness).
- For Towne affiliates' marketing purposes to offer additional products or services to you.

Full Name: \_\_\_\_\_  
*(Please print your name as it appears on your account statement)*

Street Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Telephone Number: (\_\_\_\_) \_\_\_\_\_  
*(We will contact you if we have questions regarding this request)*

Please check below which companies you utilize:

- Bank
- Insurance
- Investment
- Mortgage
- Real Estate
- Title