



LEGAL NAME CHANGE AUTHORIZATION FORM

This form should be completed by a Participant or Beneficiary who has had a legal name change (due to marriage, divorce, etc.). Please return this form with a certified copy of the legal document indicating the name change (for example, marriage certificate or divorce decree). The Fund will also accept a copy of your new Social Security Card or Driver's License that indicates your new name. No changes will be made to your account until a properly completed copy of this form and legal documentation supporting your name change is received by the Fund Office. Please return this form and the required legal documentation to the Fund Office by mail, fax or e-mail using the contact information listed below.

If your address has also changed along with your name, you may authorize us to change your name and address by using one form, a CHANGE OF ADDRESS AUTHORIZATION FORM, or you may submit each request using the two separate forms.

If your address and direct deposit (ACH) information has changed along with your name, you may authorize us to change your name, address and direct deposit (ACH) information by using one form, a PARTICIPANT DIRECT DEPOSIT AUTHORIZATION FORM, or you may submit each request using the three separate forms.

Participant/Beneficiary Social Security Number: _____

Name Change **FROM** (print former name): _____

Name Change **TO** (print current name): _____

Participant/Beneficiary Signature

Date

| |
|-----------------------------|
| FUND OFFICE USE ONLY |
|-----------------------------|

FUND OFFICE PROCESSOR: _____ DATE: _____

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