

Toll Free: 800-962-4238 PacificPremierTrust.com

# Legal Name Change Request

# IMPORTANT INFORMATION

**NOTE:** This form should be completed by an Account Owner who has legally changed his or her name due to marriage, divorce, or other reasons. This request must be notarized and only the Account Owner may authorize these changes. A notary public, licensed by your state, can notarize your signature to verify that you are, in fact, the person signing this request.

# \*To change the name on an account, Pacific Premier Trust requires a copy of the document indicating the name change (i.e. marriage certificate, court order, divorce decree, etc.).

When completed, please return this form to Pacific Premier Trust by mail, fax, or online upload at PacificPremierTrust.com/upload.

#### All fields are required.

1. ACCOUNT OWNER INFORMATION									
ACCOUNT OWNER NAME (FIRST, MI, LAST)			PACIFIC PREMIER TRUST ACCOUNT NO.						
FULL SSN	DATE OF BIRTH		PRIMARY PHONE						
LEGAL ADDRESS									
CITY	COUNTY	:	STATE/PROVINCE	POSTAL CODE					
I also would like Pacific Premier Trust to update my:									
Reason for Name Change:									
□ Marriage (requires copy of the marriage certificate)									
Divorce (requires copy of the Divorce decree)									
□ Name change by Court Decree (requires accompanying certified court document outlining name change)									
□ Other									
2. AUTHORIZATION									

As owner of the account referenced herein, I hereby authorize Pacific Premier Trust to change the name on my account. I have also included a copy of official documentation supporting this name change to:

# SIGNATURES REQUIRED ON NEXT PAGE



# 3. SIGNATURES

Please sign both former name and current name as indicated, and obtain notaries or Medallion Signature Guarantee for current name.

FORMER	R NAME				
CURREN	IT NAME				
NOTARY ACKN	OWLEDGMENT				
State of			; County of		
On this	day of	, 20	_, before me,		
a Notary Public i	n and for said County and State, p	personally appeared (Name	e):		
evidence) to be t acknowledged to capacity, and tha	n to me (or proved to me on the b the person whose name is subscr o me that he/she executed the sa at by his/her signature on the instr of which the person acted, execu	ribed to the instrument an me in his/her authorized ument the person, or the	d		
WITNESS my hand and official seal.				[SEAL]	     
My commission	expires:///				
NOTAF	RY PUBLIC SIGNATURE			DATE (REQUIRED)	

Pacific Premier Trust performs the duties of an independent custodian of assets for self-directed individual and business retirement accounts and does not provide investment advice, sell investments or offer any tax or legal advice. Clients or potential clients are advised to perform their own due diligence in choosing any investment opportunity as well as selecting any professional to assist them with an investment opportunity.

NON-DEPOSIT INVESTMENT PRODUCTS ARE NOT INSURED BY THE FDIC; ARE NOT DEPOSITS OR OTHER OBLIGATIONS OF, OR GUARANTEED BY, THE BANK OR ANY OF ITS DIVISIONS; AND ARE SUBJECT TO INVESTMENT RISKS, INCLUDING POSSIBLE LOSS OF THE PRINCIPAL AMOUNT INVESTED.

Upload forms to: PacificPremierTrust.com/upload

Fax to: 303-614-7038

Send mail to: Pacific Premier Trust Processing Center P.O. BOX 981012 Boston, MA 02298 For express deliveries: FIS-Remittance Processing Loading Dock #2 Attn: Pacific Premier Trust 10 Dan Road Canton, MA 02021

Questions? Call 800-962-4238

