# Change of Name Form

#### Important information about this form:

STABLE》

- Fill out this form to change the name of the Beneficiary or the Authorized Legal • Representative for this STABLE account.
- If you're an Authorized Legal Representative managing more than one account • with a name change, you'll have to fill out a separate form for each account.
- The Beneficiary or the Authorized Legal Representative must sign this form. ٠
- A name change requires a notarization acknowledgement in Step 4.
- The name associated with the STABLE account must match the first and last name on the bank account connected to it. If you are making a change of name, you might also have to update your bank account information.



## **STABLE** account information

Name of the Beneficiary on the STABLE account (First and last)

- \_\_\_ \_\_ \_\_ Beneficiary's Social Security or Taxpayer Identification Number

S\_T-\_\_\_\_

STABLE account number

#### Need help?

Give us a call Monday - Friday from 9am – 8pm ET at 1-800-439-1653

Individuals with speech or hearing disabilities may dial 711 to access Telecommunications Relay Service (TRS) from a telephone or TTY.

#### Mail the form to:

STABLE Account Plan PO Box 534425 Pittsburgh, PA 15253-4425

#### **Overnight Mail:**

STABLE Account Plan Attention: 534425 500 Ross Street, 154-0520 Pittsburgh, PA 15262

#### Fax:

844-745-9612

Tell us about the name change

If you need to make a name change for both the Beneficiary and the Authorized Legal Representative, you will need to fill out two separate forms. Both forms will require a notarization acknowledgement.

This change is for:

Beneficiary

Authorized Legal Representative

New name (First and last)			
Reason for change:	Marriage	Divorce	Other:





# Sign the form

By signing this form, you're confirming the information you've provided is true for the change of name.

Signature of Beneficiary or Authorized Legal Representative

Date (mm/dd/yyyy)

# A notarization acknowledgement is required for a name change

### Keep in mind that:

- You're providing the following information as underwritten certification that your signature is genuine.
- You cannot guarantee your own signature. You may be required to provide proof of your authority to act on behalf of the STABLE account.

### Only sign if you are in the presence of a notary public or other officer providing notarization.

The undersigned has read the foregoing in its entirety before signing. IN WITNESS WHEREOF, I have hereunto

set my hand this day of Day (#) Month	, 20 Year
Signature of Beneficiary or Authorized Legal Representative	
State of , County of	
This instrument was acknowledged before me	
physical presence online notarization	Notary Public (Seal)
on Date (mm/dd/yyyy)	
by Name of person (First and last)	
My term expires: Date (mm/dd/yyyy)	