



FINANCIAL SERVICES
FOR THE GREATER GOOD™

P. O. Box 1259
Charlotte, NC 28201

NOTICE OF CHANGE OF NAME

| | | |
|------------------|------------------|-----------------|
| TIAA Annuity No. | CREF Annuity No. | TIAA Policy No. |
|------------------|------------------|-----------------|

My Name has been changed to that given below and I authorize you to use the new name hereafter:

(Print New Name Here)

PRINT FORMER NAME HERE _____

My Name has been changed by: *(Check appropriate box below)*

| | Date | Name and Address of Court |
|--|-------|---------------------------|
| <input type="checkbox"/> Marriage | _____ | _____ |
| <input type="checkbox"/> Divorce | _____ | _____ |
| <input type="checkbox"/> Adoption* | _____ | _____ |
| <input type="checkbox"/> Court Order* | _____ | _____ |
| <input type="checkbox"/> Other Means* (Please Explain) | _____ | _____ |

***Note: A certified copy of any Court Order or other document authorizing the change should be furnished.**

Former Signature _____
Sign as Follows:

New Signature _____
Sign as Follows:

Address to which
mail shall be sent _____

FOR TIAA-CREF USE ONLY

**Accepted – Teachers Insurance and Annuity Association
College Retirement Equities Fund**