

Address/Name Change(s)

Information submitted on this form replaces information on file for all of your WEA Tax Sheltered Annuity Trust 403(b) and/or WEA Member Benefits IRA accounts.

You may update your address by logging into your online account, yourMONEY™.

1. Participant Information

Name _____ Check if Name Change _____
Last First Middle Former Name

Address _____ Date of Birth _____
City State ZIP Employer _____

Email _____ Social Security No. _____

Marital Status Single Married Widowed Phone (_____) _____

2. Name Change

If you are requesting a name change, please provide a copy of one of the following documents documenting your new name.

- A valid driver's license
- Your Social Security card
- A valid state-issued ID
- Your marriage license

3. Signature and Date (Required for ALL changes.)

Participant Signature _____ Date _____

To ensure the security of your account, your plan may temporarily restrict disbursement requests after your address changes. If you plan to request a disbursement from your account, contact WEA Member Benefits for more information before making these changes.