

P.O. BOX 6048
DEARBORN, MICHIGAN 48121
PH 313.336.2700 PH 888.336.2700 www.dfcufinancial.com

## **Record of Legal Name Change**

## **Member Number:**

ormer Name				
First Name	Middle Name	Last Name		Suffix
ew Name				
First Name	Middle Name	Last Name		Suffix
entification				
Type of Identification:	☐ Driver's License	☐ State Identification	☐ Passport	
Identification Number:				
Issued By:				
upporting Documentat				
Documentation Provide	☐ Court Order	□ Divorce Decree		
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ignature:		Date:		
			Patt	
gnature must be notarized if r				
knowledged before me in		County, State of _		
the day of	, 20	_•		
otary Public's Signature		Notary Stamp		
				ol Hone
			Affix Se	al Hete