HARVARD UNIVERSITY
EMPLOYEES CREDIT UNION

Name Change

Complete this form to notify the Credit Union of a name change to be applied to your HUECU membership.
Once complete, use one of these options to deliver this form to the Credit Union, please include a copy of ID listed as well as the legal documents of name change with the submission.

- Upload to HUECU using the **Document Uploader** at huecu.org/upload. (**Preferred!**)
- Fax to 617.812.8401
- Mail to P.O. Box 382609, Cambridge MA, 02238-2609
- Visit any HUECU Branch

Previous Name: _____

New Name: _____

Member #: _____ Date of Birth: _____ (mm/dd/yyyy)

Address: _____

Driver's License / State I.D.#: _____

[Please include a copy of ID listed above with this form submission and copies of legal documents of name change (example: marriage certificates, certified record of divorce]

Member Signature: _____ Date: _____ (mm/dd/yyyy)

INTERNAL USE ONLY
Reference Information: _____

Request Received by: _____ Date: _____ (mm/dd/yyyy)

OFAC: ☐ YES ☐ NO by: _____