



## Name Change Audit Sheet

Previous Name: \_\_\_\_\_

New Name: \_\_\_\_\_

Extension: \_\_\_\_\_

*(HR representative to initial in blanks to the left)*

Attach copies:

- 1) \_\_\_\_\_ Social Security Card Showing New Name
- 2) \_\_\_\_\_ Marriage/Divorce Notice

Reason for name change: \_\_\_\_\_

Notification to:

- 1) \_\_\_\_\_ Benefits
  - a. Medical \_\_\_\_\_
  - b. Dental \_\_\_\_\_
  - c. Life Ins. Beneficiary Changes \_\_\_\_\_
  - d. Retirement Funds (Spousal Consent)
    - RA: Fidelity \_\_\_\_\_
    - TIAA \_\_\_\_\_
    - Vanguard \_\_\_\_\_
    - SRA: American Century \_\_\_\_\_
    - Fidelity \_\_\_\_\_
    - Jefferson Pilot \_\_\_\_\_
    - TIAA \_\_\_\_\_
    - Vanguard \_\_\_\_\_
  - e. Flexible Spending Healthcare \_\_\_\_\_
  - f. Flexible Spending Dependent Care \_\_\_\_\_
  - g. Label changed on Benefit file \_\_\_\_\_
- 2) \_\_\_\_\_ Action Form Completed
- 3) \_\_\_\_\_ I - 9
- 4) \_\_\_\_\_ Bitech
- 5) \_\_\_\_\_ Label changed on Employee File

File:  
Benefits File