

Change Of Name Form

Send/Fax this notice to Hannaford Associates Federal Credit Union
FAX (207) 883-8629 Mail Code: 1440

Member / Account #: _____

Current Name: _____

New Name: _____

Effective Date: _____

Signature: **X** _____ Date: _____

CERTIFICATION AS TO TAXPAYER IDENTIFICATION NUMBER AND BACKUP WITHHOLDING

Under penalties of perjury, I certify (1) that _____ is my correct taxpayer identification number, and (2) that I am not subject to backup withholding as a result of a failure to report all interest or dividends, or the Internal Revenue Service (IRS) has notified me that I am no longer subject to backup withholding.

Signature: **X** _____ Date: _____

Instruction to Signer: If you have been notified by the Internal Revenue Service (IRS) that you are subject to backup withholding due to payee under-reporting and you have not received a notice from the IRS that the backup withholding has terminated, you must strike out the language in clause 2 of the certification above.

Please submit a copy of your Hannaford Pay stub showing your new name or send a copy of your driver's license or marriage license for our records.

Mail to:
Hannaford Credit Union
P.O. Box 1440
Portland, ME 04104

Interoffice to:
Hannaford Credit Union
Mail Sort 1440

FAX to: (207) 883-8629

Form H08

Hannaford Associates Federal Credit Union

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