



Teachers Insurance and Annuity Association  
College Retirement Equities Fund

730 Third Avenue  
New York, NY 10017-3206



NOTICE OF CHANGE OF NAME

TIAA Annuity No.	CREF Annuity No.	TIAA Policy No.
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My Name has been changed to that given below and I authorize you to use the new name hereafter:

*(Print New Name Here)*

My Name has been changed by: *(Check appropriate box below)*

	Date	Name and Address of Court
<input type="checkbox"/> Marriage	_____	_____
<input type="checkbox"/> Divorce	_____	_____
<input type="checkbox"/> Adoption*	_____	_____
<input type="checkbox"/> Court Order*	_____	_____
<input type="checkbox"/> Other Means* (Please Explain)	_____	_____

*\*NOTE: A certified copy of any Court Order or other document authorizing the change should be furnished.*

Former Signature \_\_\_\_\_  
*Sign as Follows:*

New Signature \_\_\_\_\_  
*Sign as Follows:*

Address to which mail shall be sent \_\_\_\_\_

FOR TIAA-CREF USE ONLY

Accepted - - Teachers Insurance and Annuity Association  
College Retirement Equities Fund

Recorded Date \_\_\_\_\_ By \_\_\_\_\_, Registrar