



Loyal Christian Benefit Association
PO Box 13005
Erie, PA 16514-1305
814-453-4331
Toll Free 800-234-5222

Change of Name

Directions: Please complete this form online; then print, sign and send via US Mail to LCBA National Headquarters at the address listed above.

***This form must be signed, mailed, and recorded at LCBA before it becomes effective.**

Certificate Number

Social Security Number

Old Name

New Name

Date of Birth

State of Birth

Daytime Phone

Evening Phone

Gender

Male

Female

Address

City

State

Zip Code

Please include a copy of one of the following to verify your name change:

- 1. New Social Security Card
- 2. Court Order
- 3. Marriage License
- 4. Divorce Decree
- 5. Drivers License

Signature of Owner

Date

A confirmation of this name change will be sent to you.

This is done to protect your account from someone else changing your name without your knowledge.