

# SAN DIEGO MESA COLLEGE

## Accounting

### Fiduciary Account Name Change

Date: \_\_\_\_\_

Account name change (Please fill out Section I)

Person name change (Please fill out Section II)

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#### **Section I : Account Name Change**

I, \_\_\_\_\_ authorize to change the name of the account  
(Account Custodian Name)

Old name of account: \_\_\_\_\_

New name of account: \_\_\_\_\_

Reason: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Please submit to Vice President of Administrative Services (Room A-102) for approval.**

Approved by: \_\_\_\_\_ Date: \_\_\_\_\_  
( VP of Administrative Services Signature)

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#### **Section II : Person Name Change**

Previous Name \_\_\_\_\_  
(Last, First)

New Name \_\_\_\_\_  
(Last, First)

Previous Name \_\_\_\_\_  
(Last, First)

New Name \_\_\_\_\_  
(Last, First)

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Approved by: \_\_\_\_\_ Date: \_\_\_\_\_  
(Account Custodian Signature)

**Please submit to Accounting Supervisor in Student Accounting (Room I4-106)**