



CMI ACCOUNT INFORMATION CHANGE FORM

Mark the following:

- Address/Phone **change for all programs** (no fee)
- Name/SSN change *Fee is charged, see below. **ONLY for UFP, Masters**

Old Information

New Information

	Name		
	Address		
	City State Zip		
	Phone	Home Work Cell	Home Work Cell
	Email		
	SSN or Fed ID		

Reason for Name or ID# change: _____

Name changes require a phone number: _____

YOU CANNOT CHANGE THE NAME ON YOUR UBP ACCOUNT.

***Fee charge for account name/id # changes**

Send \$25 (make check or money order) to:

Mercury Services
7437 S Eastern Ave. #445
Las Vegas NV 89123-1505

For office use only:

Approved by: _____

Name Date

Updated by: _____

Name Date