

# Name, Address & Email Change Request



Please return the completed form to:

Sun Life Financial  
P.O. Box 9106  
Wellesley Hills, MA 02481-9106  
Phone: (800) 862-6266

Overnight Address:  
Sun Life Financial  
One Sun Life Executive Park  
Wellesley Hills, MA 02481-9106

This form should not be used to change the Ownership or Beneficiary designation. Please use the "Ownership Change Request form" to change the Ownership designation and the "Beneficiary Change Request form" to change the Beneficiary designation.

## Policy Information

Please PRINT clearly.  
Fill out form completely.  
Complete a separate request form for each policy requiring a change.

Policy Number		
Insured(s) Name(s)		
Owner(s) Name(s)		
Social Security/Tax Identification Number		
Address		
City	State	Zip Code
Telephone Number	E-mail Address	

## Type of Change

Check all that apply:  Name Change  Address Change  Email Change

## Name Change Information

Name change of (please check one):

- Owner  
 Insured  
 Beneficiary  
 Other (please specify): \_\_\_\_\_

Change Name:

From
To

Reason for Change (please check one):

- Marriage\*  
 Adoption\*  
 Divorce\*  
 Legally Changed\*  
 Records Incorrect  
 Other (please specify): \_\_\_\_\_

\*Please attach a certified copy of the supporting legal documentation.

## Address or Email Change Information

Note: If changing the "Mailing Address", all policyowners must sign the form.

Change of (please check one):

- Mailing Address  
 Owner Address  
 Owner Email Address  
 Insured Address  
 Insured Email Address  
 Other (please specify): \_\_\_\_\_

Note: If changing Address to a P.O. Box, a residential address must also be provided.

New Address		
City	State	Zip Code
Residential Address		
City	State	Zip Code
Telephone Number	Email Address	

## Signatures

In order to process any change requested, all applicable signatures are required.

If additional space is needed for multiple owner(s), please use the space provided below.

Please Print Owner Name	Date (m/d/y)
Owner Signature X	Date (m/d/y)
Please Print Co-Owner Name	Date (m/d/y)
Co-Owner Signature X	Date (m/d/y)