

Second Name Letter/ Name Change Form

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	nation (This portion to be completed b	
IA Firm Name (please print): COR	NERSTONE CAPITAL ADVISOR	
IA Master Account Number:		Service Team: East 10
Please complete this form if you are kn	own by or have used any other names. You	may also use this form to request a name change.
1. Account Holder Informati	ion	
Eight-Digit Schwab Account Number(s) (List all	affected account numbers.)	
Account Holder's First Name	Middle	Last
2. Other Names		
If you are known by other names please	e complete the information below with the co	orresponding signature(s).
First Name	Middle	Last
•		
Signature (Sign as indicated above.)		
First Name	Middle	Last
Signature (Sign as indicated above.)		
3. Name Changes		
To request a name change, please compor other Certified Court Document).	plete the information below and include veri	fication of the name change (a copy of a Marriage Certificate, Divorce Decree
Former Name:		
First Name	Middle	Last
New Name:		
First Name	Middle	Last
4. Please Read and Sign		
I authorize Charles Schwab & Co., Inc. to	o carry my account and register my securitie	es in the following name:
First Name	 Middle	Last
•		Doto
Signature: Account Holder		Date (mm/dd/yyyy)

