



Name Change Form

This document authorizes a name change on the Excel Communications account noted below. Please include needed documentations, which verifies that the name of the account or ownership of the account has changed, such as a Certificate of Name Change or Certificate of Death.

Account Number: _____ Effective Date of Change: _____

Change Form:

Name: _____

Address: _____

Tax ID#: _____

Change To:

Name: _____

Address: _____

Tax ID#: _____

I accept responsibility for all charges incurred on the aforementioned account. I understand that the change will not become effective until Excel Communications receives this signed authorization form.

Signature: _____ Date: _____

I transferred responsibility of this account to the above-mentioned person. I understand that change will not become effective until Excel Communications receives this authorization form.

Signature: _____ Date: _____

Please fax completed form along with necessary documentation supporting your needed change to:

1-800-382-0352