



**Wells Fargo Auto**  
 CPI Payment Program  
 PO Box 3145  
 Portland OR 97208-3145

# Payee Name Change Request Form

If your name appears incorrectly on your check, use this form to request that we reissue the check with your name corrected.

**What you need to do**

- Mail or email the completed form along with appropriate documentation, such as a copy of your driver’s license, and the original check, if available.
- Keep a copy of the completed form and any documents you send with the form for your records.

Please complete the information below and provide your signature in the indicated space to verify the information you provided is true and accurate.

**Information about the check you received from us (to the extent known):**

| Check Enclosed?  | Check Date | Check Number | Check Amount | Reference Number |
|--|------------|--------------|--------------|------------------|
| <input type="checkbox"/> Yes <input type="checkbox"/> No |            |              |              |                  |

**Examples of reason for name change**

Marriage  
 Divorce  
 Legal Name  
 Misspelled Name

**Examples of documentation to submit with this form**

Copy of marriage certificate or copy of driver’s license/state issued ID  
 Copy of divorce decree stating you may resume the use of your maiden name or name confirmed by a court or copy of driver’s license/state issued ID  
 Name change document confirmed by a court or copy of driver’s license/state issued ID  
 Copy of driver’s license/state issued ID

|                                       |       |
|---------------------------------------|-------|
| Name as it currently appears on check |       |
| Name as it should appear on check     |       |
| Mailing address                       |       |
| Email                                 | Phone |
| Signature                             | Date  |

We will send a replacement check approximately 30 days after we receive your request and confirm the information.

This form may not be used to request that the check be reissued payable to a third party such as an estate, heir, or next of kin. If the borrower listed on the check is deceased, please contact us at the phone number or email address below.

**Mail to:**  
 Wells Fargo Auto  
 CPI Payment Program  
 PO Box 3145  
 Portland, OR 97208-3145

**Email to:**  
 info@wellsfargocpipayments.com

**Questions? Call us:**  
 1-888-228-9735  
 Monday – Friday,  
 8:00 a.m. – 8:00 p.m. Eastern Time

\*Your loan may have been serviced under any of the following names: Wachovia Dealer Services, Wells Fargo Dealer Services, or Wells Fargo Auto Finance.