## This Form TSP-15, Change in Name for Separated Participant, Replaces Form TSP-U-15 and Previous Editions of Form TSP-15

Form TSP-U-15 and previous editions of Form TSP-15, Change in Name for Separated Participant, are no longer available. They have been combined into a single Form TSP-15. This version of Form TSP-15 should be used both by members of the uniformed services and by civilians. (Scroll down to view form.)

**TSP-15** 

Use this form to change your name for your TSP account if you are **no longer employed as a Federal civilian employee** or **are no longer a member of the uniformed services**.

To change your name, **you will need to provide documentation** to the TSP (see back for documentation requirements). (**Note:** The address you provide below will be used to update your TSP address if it is different from the address in your TSP record.)

You cannot use this form to change your name or address on any TSP account associated with *current* employment/service. Only agencies or services can make changes to the TSP accounts of active employees/members.

This form is designed to be read by an optical scanner. To avoid processing problems, type or print using black or dark blue ink. If you print by hand, please use **BLOCK** letters that fit within the boxes. (See examples on back.) Limit your responses to the number of available boxes.

I.	NEW INFORMATION ABO	UT YOU	
	This change applies to my:	Civilian Account Uniformed Servi	ces Account
	1. Last Name	First Name	Middle Name
	2. TSP Account Number	3. Date of Birth (mm/dd/yyyy)	Daytime Phone (Area Code and Number)
	5. Foreign address? 6. Check here.	Street Address or Box Number (For a foreign address, see instruc	ctions on back.)
		Street Address Line 2	
	7. City	8. State	<b>9.</b> Zip Code
II.	YOUR FORMER NAME		
	10. Last Name	First Name	Middle Name
III.	YOUR SIGNATURE AND C	ERTIFICATION	
I	tion substantiating my name	I have provided is true to the best of my knowle change are valid. <b>Warning:</b> Any intentional falsing it is a violation of law that is punishable by a for both (18 U.S.C. § 1001).	se statement in this application or willful
	Participant's Signature		12. Date Signed (mm/dd/yyyy)

Do Not Write Below This Line



## **GENERAL INFORMATION AND INSTRUCTIONS**

To ensure that your request is not delayed, carefully type or print the requested information using black or dark blue ink. If printing, please use simple block letters and numbers. Keep all letters and numbers **inside** the boxes. (See examples below.)

## **EXAMPLES**

CORRECT	INCORRECT
CORRECT	Incorrect
3/6/1982	3/1982

PARTICIPANTS WITH TWO ACCOUNTS. If you have two TSP accounts (civilian and uniformed services), you can use this form to change your name for both accounts **only if** you are no longer employed as a Federal civilian employee **and** are retired or separated from the uniformed services. Personal information for TSP accounts that are associated with active employment can be changed only by an employee's agency or member's service. For example, if you have two TSP accounts, one as an active Federal civilian employee and another as a retired or separated member of the uniformed services, you can use this form to change the name on your uniformed services TSP account only. You must ask your employing agency to change your name on your civilian TSP account.

**DOCUMENTATION REQUIREMENTS.** In order to change your name in your TSP account record, you will need to submit one of the following types of documentation. (**Note:** Do **not** send original documents; they will not be returned to you.)

- If your name was changed through a court or other legal entity, a copy of the document showing both your new and former names.
- If your name changed as a result of marriage, a copy of your marriage certificate.

**APO AND FPO ADDRESSES.** If you use an Air/Army Post Office (APO) or Fleet Post Office (FPO) address, enter your address in the two available address lines (include the unit designation). Enter APO or FPO, as appropriate, in the City field. In the State field, enter AE as the state abbreviation for Zip Codes beginning with 090-098, AA for Zip Codes beginning with 340, and AP for Zip Codes beginning with 962-966. Then enter the appropriate Zip Code.

**FOREIGN ADDRESSES.** If you have a foreign address, check the box to indicate that this is a foreign address and enter the address as follows:

**First address line:** Enter your street address or post office box number, and any apartment number.

**Second address line:** Enter the city or town name, other principal subdivision (e.g., province, state, county) and postal code, if known. (The postal code may precede the city or town.)

**Third address line:** Enter the entire country name in the City field; leave the State field blank.

## **EXAMPLE OF FOREIGN ADDRESS**

Foreign address? Check here.	2 0 4 5 R U E R O Y A L E  Street Address or Box Number					
	0 6 5 7 0 P A R I S Street Address Line 2					
FRANCE		State	Zip Code			

**MAILING INSTRUCTIONS.** Make a copy of this completed form for your records. Mail or fax the original form with documentation to:

Thrift Savings Plan P.O. Box 385021 Birmingham, AL 35238

Fax: 1-866-817-5023

If you have questions, call the ThriftLine at 1-TSP-YOU-FRST (1-877-968-3778) or TDD: 1-TSP-THRIFT5 (1-877-847-4385). Outside the U.S. and Canada, please call 404-233-4400.

**PRIVACY ACT NOTICE.** We are authorized to request the information you provide on this form under 5 U.S.C. chapter 84, Federal Employees' Retirement System. We will use this information to identify your TSP account and to process your request. In addition, this information may be shared with other Federal agencies for statistical, auditing, or archiving purposes. We may share the information with law enforcement agencies investigating a violation of civil or criminal law, or agencies implementing

a statute, rule, or order. It may be shared with congressional offices, private sector audit firms, spouses, former spouses, and beneficiaries, and their attorneys. We may disclose relevant portions of the information to appropriate parties engaged in litigation and for other routine uses as specified in the Federal Register. You are not required by law to provide this information, but if you do not provide it, we will not be able to process your request.