



## Participating Organization Simple Name Change Form

Please complete and submit this name change form to the PCI SSC Participating Organization Program Manager if your company has simply changed its legal name.

**IMPORTANT:** Please note that this document only applies to simple name changes, and only applies for purposes of the Participating Organization program. If your company has changed its name in connection with a merger, asset sale or similar transaction (each a "Transaction"), or participates in another PCI SSC program, additional information may be required. Please contact the appropriate Program Manager for further details.

Submit via Fax: 1-781-623-1063

Submit via E-mail: [participation@pcisecuritystandards.org](mailto:participation@pcisecuritystandards.org)

**New Company Name**

\_\_\_\_\_

**Current Company Name**

\_\_\_\_\_

**Organization Address**

\_\_\_\_\_

**Business Contact**

Check here if unchanged

New Name:

\_\_\_\_\_

E-mail:

\_\_\_\_\_

Job Title:

\_\_\_\_\_

Address:

\_\_\_\_\_

**Technical Contact**

Check here if unchanged

New Name:

\_\_\_\_\_

E-mail:

\_\_\_\_\_

Job Title:

\_\_\_\_\_

Address:

\_\_\_\_\_

**Billing Contact**

Check here if unchanged

New Name:

\_\_\_\_\_

E-mail:

\_\_\_\_\_

Job Title:

\_\_\_\_\_

Address:

\_\_\_\_\_

By signing below, as an authorized representative of the organization identified above, the undersigned hereby confirms that the legal name of the organization has been changed as noted above, and that this change was not in connection with a Transaction.

**Authorized Signatory:**

Signature:

\_\_\_\_\_

Print Name:

\_\_\_\_\_

Job Title:

\_\_\_\_\_

Date:

\_\_\_\_\_