



COAST ELECTRIC

P. O. Box 359
Kiln, MS 39556

Name Change due to Divorce

This document is to certify that I, _____, am a member of Coast Electric
(Print Name)

Power Association, Member # _____ and I have recently
(Member Number)

divorced. I request Coast Electric to change the name of my electric account from

_____ to _____.
(Print Name) (Print Name)

Date

Signature

**Please provide a copy of your divorce decree with this form.*

Please complete information below:

Member Information

Social Security No. _____

Home Phone No. _____

Cell Phone No. _____

Email Address _____

This institution is an equal opportunity provider and employer.

Please mail your completed form to Coast Electric, c/o billing department, P.O. Box 359, Kiln, MS 39556.