

# SONYBMG ROYALTY PARTICIPANT PAYEE CHANGE REQUEST FORM

Please print, complete and return this form so we may begin processing your request! (\*Designates Required Fields)

\* Full Name of Current Payee:

\* Address of Current Payee:

Attention: \_\_\_\_\_  
Street: \_\_\_\_\_ Apt.#: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Country: \_\_\_\_\_

\* Full Name of *NEW* Payee:

\* Address of *NEW* Payee:

Attention: \_\_\_\_\_  
Street: \_\_\_\_\_ Apt.#: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Country: \_\_\_\_\_

Account Number(s) this payee change applies to:  
(If this is for the entire list of current payee accounts,  
Please state "ALL ACCOUNTS")

\* Current Payee Daytime Phone #:

Email Address:

If you have any additional information that will assist SONYBMG in expediting your request please include below:

SIGN HERE:

DATED:

Did you remember to?

- ✓ Enclose a completed W-9 Form (U.S. residents) & W8-BEN (Non-U.S. residents)
- ✓ Sign & Notarize this form
- ✓ Send to SONYBMG Royaltor, SONYBMG, Royalty Department, 210 Clay Avenue, Lyndhurst, NJ 07017

Notarize this  
form here

Thank you for assisting us in maintaining up to date records regarding your royalty account. Once your form is received by SONYBMG, your information will be reviewed. We will contact you if additional supporting documentation is required in order to ensure the accuracy and validity of your request. SONYBMG reserves the right to require you to sign and deliver an affidavit affirming the information provided to SONYBMG herein.  
**SONYBMG**