Verification of Taxpayer Identification Number Changes

| Date: [Insert Date] |
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| To Whom It May Concern, |
| This letter serves as confirmation that [Taxpayer's Name], with Taxpayer Identification Number (TIN) [Old TIN], has requested a change in their Taxpayer Identification Number. The new TIN assigned to them is [New TIN]. |
| All records associated with the old TIN will be updated accordingly to reflect this change. Please ensure that any future correspondence and filings reference the new TIN. |
| If you have any questions or require further verification, please contact us at [Your Contact Information]. |
| Thank you for your attention to this matter. |
| Sincerely, |
| [Your Name] |
| [Your Title] |
| [Your Organization] |
| [Your Organization's Address] |
| [Your Phone Number] |
| [Your Email Address] |