



AFTER
the Wedding

CHECKLIST

Name Changing

<i>Change name at / in / on</i>	<i>Notes</i>	<i>Check</i>
BELL SIGN / MAILBOX		<input type="checkbox"/>
ID		<input type="checkbox"/>
PASSPORT		<input type="checkbox"/>
DRIVING LICENSE		<input type="checkbox"/>
SOCIAL SECURITY CARD		<input type="checkbox"/>
HEALTH INSURANCE		<input type="checkbox"/>
DOCTORS		<input type="checkbox"/>
BANK ACCOUNTS / CREDIT CARDS		<input type="checkbox"/>
HR OFFICE OF YOUR EMPLOYER		<input type="checkbox"/>
COLLEAGUES AND BUSINESS PARTNERS		<input type="checkbox"/>
INSURANCES		<input type="checkbox"/>
CONTRACTS		<input type="checkbox"/>
OTHER IDs (I.E. STUDENT ID OR LIBRARY CARD)		<input type="checkbox"/>
TENANT / LANDLORD		<input type="checkbox"/>
SOCIAL NETWORKS		<input type="checkbox"/>
E-MAIL ADDRESS / WEBSITE		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>

