

Signature:

CLIENT/ACCOUNT INFORMATION CHANGE FORM

c/o Prometa Fund Support Services 220-155 Carlton Street, Winnipeg MB R3C 3H8 Toll Free: 1-866-992-7696 Fax: 1-855-766-8020 Email: saskworks@prometa.ca www.saskworks.ca

CLIENT INFORMATION		
Name:		
Account Number:		Sin #:
CHANGE OF NAME		
o Change of name by marriage. At	tach copy of marriage certificate.	
o Change of name by divorce. Atta	ach copy of divorce decree.	
o Other. Attach appropriate docur	nentation.	
Previous Name:	Previous Signatu	ıre:
New Name:	New Signature:	
CHANGE OF ADDRESS		
Previous Address		
Street/Box:		
City/Town:	Province:	Postal Code:
New Address		
Street/Box:		
City/Town:	Province:	Postal Code:
Phone (home):	Phone (work):	
SIGNATURE		
SIGNATURE		

Date: