MANDATE TO AUTHORIZE CHANGE OF ADDRESS

I, the undersigned,			
Full Name:	_		
Date of Birth:			
Current Address:			
	_		
authorize ChangePal, a Canadian address change	assistant service,	to act on my be	ehalf

to notify

- Government Agencies (e.g. Revenu Québec, CRA, SAAQ)

the following parties of my new residential address:

- Utilities and Telecom Providers (e.g. Hydro-Québec, Bell)
- Financial Institutions (e.g. banks, insurance)
- Subscriptions and Memberships
- Any other institutions or companies I may indicate

I confirm that I am of legal age and have full capacity to authorize this mandate. I understand that ChangePal will use the information I provide solely for the purpose of completing my address change requests and that my personal data will be deleted after the services are completed.

This mandate is valid for a period of 60 days from the date of signing unless revoked earlier in

writing.
Signed in:
On this date:
Signature:
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