



**ADDRESS CHANGE REQUEST**

**TO:** I.A. Michael Investment Counsel Ltd.

**Account Number(s):** \_\_\_\_\_

**Effective date of address change (mm/dd/yyyy):** \_\_\_\_\_

**Previous address of account:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**New address of account:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Is your taxable country changing?:**

**NO:** \_\_\_\_\_, **YES:** \_\_\_\_\_ (if Yes, ensure you are aware of the tax consequences)

**New phone number(s) (if any) (e.g. 416-555-1234 - Residence):**

\_\_\_\_\_

**Authorized Person's Name:** \_\_\_\_\_

**Authorized Person's Signature:** \_\_\_\_\_  
(If more than one name is on the account(s), ensure all parties sign)