beneva

CHANGE OF MAILING ADDRESS AND EMAIL ADDRESS FORM

Plan no / Contract no: _____

1 CONTRACTHOLDER'S/INVESTOR'S IDENTIFICATION

Last name _____ First name _____

2 CHANGES REQUESTED (IF YOU ARE MOVING OUTSIDE OF CANADA, PLEASE COMPLETE FORM FRA1737)

Effective date: Year Month Day

Address (No., street, apt.) _____

City _____ Province _____ Postal code _____

Country _____

Area code Home tel. Area code Work tel. (extension) Area code Cell tel.

Email address _____

3 CONTRACTHOLDER'S/INVESTOR'S DECLARATION

I have verified the information contained in this form and certify it to be true.

Signed at _____ on this _____ day of _____ 20 _____.

X _____

Contractholder's/Investor's signature

Beneva Inc.
PO Box 10510 Succ Sainte-Foy, Quebec QC G1V 0A3

IND047E (05-2023)