

Address Change Request Form

NAME OF PUBLICATION RECEIVED: _____

ORIGINAL CONTACT INFORMATION *(as it appears on the address label)*

NAME: _____

COMPANY: _____

ADDRESS: _____

SUITE: _____ POSTAL CODE: _____

PROVINCE / STATE: _____ COUNTRY: _____

NEW CONTACT INFORMATION

NAME: _____

COMPANY: _____

ADDRESS: _____

SUITE: _____ POSTAL CODE: _____

PROVINCE / STATE: _____ COUNTRY: _____

TEL: _____ FAX: _____

Please forward this **Address Change Request Form** to tanja@perkspub.com or
Fax: (905) 697-2536.

Thank you for your information. We will tend to your Address Change Request within four weeks.
Should you miss an issue in the transition, please contact our head office to receive any missing issues.