

## Change of Dealer of Record Request

Please complete a separate form for each fund company

<b>DATE:</b>
<b>FUND COMPANY:</b>

<b>FAX NUMBER:</b>
<b>ADDRESS:</b>

ATTENTION: DEALER SERVICES DEPARTMENT

Re: All funds with the following account numbers and registrations

<b>Registration: (Name(s) on the Account)</b>	<b>Account Type: (OPEN, RRSP, RESP, ITF, SPOUSAL, RRIF, LIF, JTWROS)</b>	<b>Your Account Number:</b>

Dear Sir/Madam:

Please accept this letter as your authority to change my mutual fund dealer/representative as follows:

<b>FROM</b>
<b>REP. NAME:</b>
<b>DEALER/REP NUMBER:</b>

<b>TO</b>
<b>REP. NAME:</b>
<b>DEALER:</b> FundTrade Financial Corp.
<b>DEALER/REP NUMBER:</b> 7648 -

Sincerely,

Signature of Client	Date (mm/dd/yy)
Client Name	
SIN:	
Address	
Phone	

Signature of Joint Account Holder	Date (mm/dd/yy)
Joint Info: Name	
Relationship / SIN:	