STERLING
MUTUALS INC.

DEALER CHANGE REQUEST

880 Ouellette Ave., Suite 102 Windsor, ON N9A 1C7
Phone (519)256-8999 Fax (519)256-9730

To whom it may concern:

I would like the servicing of my account(s) listed below to be changed. Please transfer the administration of my account(s) to:

Sterling Mutuals Inc. use only

Sterling Mutuals Inc.

Dealer/Rep No.: _____

Representative: _____

(List Fund Company Name(s) and Account Numbers:)

_____

_____

_____

_____

_____

_____

_____

_____

_____

Yours sincerely,

✗ _____ _____ ✗ _____

Planholder signature | Date (YYYY/MM/DD) | Joint-account planholder signature

_____ _____

Planholder name (please print) | Joint-account planholder name