

IMPORTANT INFORMATION

- ✓ In order to serve you better and maintain accurate account information, please complete all required information in full.
- ✓ Please complete one form per mailing address. Where multiple bond holders exist at the same address, please indicate each individual bond holder name in section 1.
- ✓ By completing this form, you are requesting that the address change should be applied to all your records with Israel Bonds and Computershare Trust Company of Canada, the Fiscal Agent for the State of Israel.
- ✓ Please note, Computershare Trust Company of Canada, the Fiscal Agent for the State of Israel, requires notification of your address change 15 business days prior to your next payment date.
- ✓ All bond holders over the ages of 18 requesting the change of address must sign Section 5 of the form. In the case of minors, parent(s) or guardian(s) may sign on their behalf.

ISRAEL BONDS OFFICES

NATIONAL TOLL FREE 1.866.543.3351

TORONTO & GTA | 1120 Finch Avenue W., Suite 801, Toronto, ON M3J 3H7
T. 416.789.3351 | F. 416.789.9436 | toronto@israelbonds.ca

MONTREAL & QUEBEC REGION | 3500 de Maisonneuve West, Suite 690, Montreal, Quebec, H3Z 3C1
T. 514.482.0427 | F. 514.482.9640 | montreal@israelbonds.ca

OTTAWA & ATLANTIC CANADA | 11 Nadolny Sachs Private, Suite 206, Ottawa, ON K2A 1R9
T. 613.792.1142 | F. 613.792.1144 | ottawa@israelbonds.ca

WINNIPEG | 1607-90 Avenue S. W., Calgary, AB T2V 4V7
T. 204.942.2291 | F. 403.640.2192 | winnipeg@israelbonds.ca

CALGARY & EDMONTON | 1607 90 Avenue S. W., Calgary, AB T2V 4V7
T. 403.255.8136 | T. 780.491.0034 | F. 403.640.2192 | calgary@israelbonds.ca

VANCOUVER | 950 West 41st Avenue, Suite 304A, Vancouver, BC V5Z 2N7
T. 604.266.7210 | F. 604.266.1217 | vancouver@israelbonds.ca

- ✓ This form should be used to update your addresses of record with Israel Bonds and Computershare Trust Company of Canada, the fiscal agent of the State of Israel.
- ✓ The completed and signed form can be faxed, emailed or mailed to your local Israel Bonds office.

1 NAME(S)

NAME(S)	<input type="text"/>	HOME PHONE	<input type="text"/>
NAME(S)	<input type="text"/>	CELL PHONE	<input type="text"/>
EMAIL	<input type="text"/>	BUSINESS PHONE	<input type="text"/>

2 NEW ADDRESS

APARTMENT OR SUITE #	<input type="text"/>	ADDRESS	<input type="text"/>				
CITY	<input type="text"/>	PROVINCE / STATE	<input type="text"/>	POSTAL CODE / ZIP	<input type="text"/>	COUNTRY	<input type="text"/>

3 MAILING ADDRESS (If different from home address)

APARTMENT OR SUITE #	<input type="text"/>	ADDRESS	<input type="text"/>				
CITY	<input type="text"/>	PROVINCE / STATE	<input type="text"/>	POSTAL CODE / ZIP	<input type="text"/>	COUNTRY	<input type="text"/>

4 PREVIOUS ADDRESS 1

APARTMENT OR SUITE #	<input type="text"/>	ADDRESS	<input type="text"/>				
CITY	<input type="text"/>	PROVINCE / STATE	<input type="text"/>	POSTAL CODE / ZIP	<input type="text"/>	COUNTRY	<input type="text"/>

PREVIOUS ADDRESS 2

APARTMENT OR SUITE #	<input type="text"/>	ADDRESS	<input type="text"/>				
CITY	<input type="text"/>	PROVINCE / STATE	<input type="text"/>	POSTAL CODE / ZIP	<input type="text"/>	COUNTRY	<input type="text"/>

FOR INTERNAL USE ONLY

CPU ACCOUNTS RELATED TO THIS ADDRESS CHANGE

5 SIGNATURES

By signing below, you authorize Israel Bonds and Computershare Trust Company of Canada to act on all instructions provided on this form, attest that you are authorized to request these changes, and attest that all this information is correct. This form must be signed by all individuals associated with this change request. For Entity Accounts, you must be authorized to sign on behalf of the Entity.

_____ NAME	_____ SIGNATURE	_____ DATE
_____ NAME	_____ SIGNATURE	_____ DATE
_____ NAME	_____ SIGNATURE	_____ DATE
_____ NAME	_____ SIGNATURE	_____ DATE