

CHANGE OF ADDRESS FORM

Reliv Australia Pty Ltd and Reliv New Zealand Limited PO Box 70 Seven Hills NSW 1730 Australia

FAX: AUSTRALIA - 02 9620 7600
NEW ZEALAND - 61 2 9620 7600



YOUR NAME

NAME

RELIV ID NUMBER

PREVIOUS ADDRESS

STREET ADDRESS

CITY/STATE POSTCODE COUNTRY

PHONE NUMBER MOBILE NUMBER

PO BOX (IF APPLICABLE)

NEW ADDRESS

STREET ADDRESS

CITY/STATE POSTCODE COUNTRY

PHONE NUMBER WORK NUMBER

MOBILE NUMBER EMAIL

PO BOX (IF APPLICABLE)

YOUR SIGNATURE DATE

SPOUSE'S / PARTNER'S SIGNATURE (IF APPLICABLE) DATE

OFFICE USE ONLY

DATE UPDATED _____ CUSTOMER SERVICE _____

DATE UPDATED _____ MARKETING & SALES _____

DATE UPDATED _____ ACCOUNTS _____