

## Change of mailing address for sending of school tax bill

Please print in block letters.

New mailing address for sending account and recipient  Number, street, app. City, province, country Postal code Family name First name	Number S	Stroot	City/Village	Roll	File no.
Number, street, app.  City, province, country  Postal code  Family name  First name	Number 3	oureet	City/ village	KUII	riie no.
Number, street, app.  City, province, country  Postal code  Family name  First name					
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City, province, country  Postal code  Family name  First name		New mailing	address for sending acco	ount and recipient	
Postal code Family name First name	Number, street, app.				
Family name First name	City, province, country				
First name	Postal code				
	Family name				
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	Telephone			Extension	
Effective date	Effective date				
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Does this modification concern all co-owners?  VES NO	שטפט נוווא וווטנ	anication concern an	CO OWITCI3:		
Does this modification concern all co-owners?  YES NO					
Does this modification concern all co-owners?  YES NO			D-1	e:	

By e-mail: taxation@nfsb.qc.ca

By Fax: 450-691-0643

By mail: **Commission scolaire New Frontiers** 

214, rue McLeod

Chateauguay, QC J6J 2H4

Space reserved for	or administ	tration
Correction made		
Initials		