



NOTICE OF CHANGE

Please complete applicable sections only

NAME OF MEMBER _____ NR# _____

REINSTATEMENT OF PREVIOUS MEMBERSHIP PHOTOCOPY OF RECO NOTICE OF CHANGE FORM ATTACHED

TRANSFER FROM _____ OFFICE # _____

TO _____ OFFICE # _____

NEW OFFICE PHONE# _____ FAX# _____

NEW EMAIL ADDRESS _____ WEB PAGE _____

PHOTOCOPY OF RECO NOTICE OF CHANGE FORM ATTACHED

TERMINATION OF MEMBER TERMINATION OF OFFICE

TERMINATION EFFECTIVE DATE _____

PHOTOCOPY OF LETTER SENT TO RECO ATTACHED OR TERMINATION IS REFLECTED ON RECO'S WEBSITE

NOTICE OF BUSINESS CHANGE

NEW BROKER OF RECORD _____

NEW BUSINESS NAME _____

NEW ADDRESS _____

CITY _____ POSTAL CODE _____

NEW PHONE # _____ NEW FAX # _____

EMAIL _____ WEBSITE _____

PHOTOCOPY OF RECO NOTICE OF BUSINESS CHANGE FORM ATTACHED

CATEGORY CHANGE (eg. SALESPERSON TO BROKER) _____

NAME CHANGE _____

BROKER OF RECORD SIGNATURE _____

TODAY'S DATE _____

OFFICE NAME _____

September 2018