



**Doyon, Limited  
Shareholder Records  
Change of Information Form**

**Address    Birthdate    Social Security Number**

(Circle all that apply)

**NOTE: To change anything other than an address requires additional documentation.  
Please contact Shareholder Records for more information.**

Name (please print): \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Minor shareholders in household:	
Name _____	Date of Birth _____
Name _____	Date of Birth _____
Name _____	Date of Birth _____
Name _____	Date of Birth _____

**Old Address:** \_\_\_\_\_

**New Address:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_

**E-mail address:** \_\_\_\_\_

Check box if you wish to **Receive your Annual Meeting materials electronically**; by providing your email address you will also receive **an E-Newsletter**.

I certify that the information provided on this form is true and correct to the best of my knowledge.

Signature: \_\_\_\_\_ Effective Date: \_\_\_\_\_

**You must print this form, SIGN it, and mail or fax it to:**

Doyon, Limited  
Shareholder Records  
1 Doyon Place, Suite 300  
Fairbanks, AK 99701  
Phone: (907) 459-2040  
Toll-free: 1-888-478-4755  
Fax: (907) 459-2065  
E-Mail: records@doyon.com