



PLEASE PRINT OR TYPE

RETURN THIS FORM TO:
Alberta Government Services
Consumer Services Division
3rd Floor, 10155 102 Street
EDMONTON AB T5J 4L4
Fax No.: (780) 427-3033

Notice of Attorney for Service/
Change of Attorney/
Alternative Attorney

Cooperatives Act
Sections 369(2), 377(2) and 377(5)

For new registrations, Items 1, 3, 4, 5 and 6 must be completed.
For changes, complete Items 1, 2, 3, 4, 5 and 6.
This form can also be used for a change of attorney's address.

1. Name of Cooperative
2. Alberta Corporate Access Number
(as noted on registration documents)

3. Attorney Status: (select one)
(NOTE: Only one attorney can be appointed per form. Attorneys must be individuals.)

- Attorney appointed for the purpose of registration
Change of Attorney
Alternative Attorney
Change of Alternative Attorney
Resignation/Revocation of _____ as Alternative Attorney.

4. The above mentioned cooperative has appointed _____ as the cooperative's Attorney for service.

5. Full Address of Attorney (This address must be accessible to the public and must be within Alberta.)

Is this a change of address? Yes No If Yes, effective date is: _____ (mm/dd/yyyy)

Address Street City / Town Province Postal Code
Mailing Address (if different from above) Street City / Town Province Postal Code

6. Attorney's Consent:
I, _____ Name of Attorney
consent to act as the Attorney of the above named cooperative,
as of _____ Date (mm/dd/yyyy)
Signature of Attorney
Witness
Name of Witness
Address of Witness City/Town
Province Postal Code
Signature of Witness

Signature of Authorized Person Title (please PRINT) Date (mm/dd/yyyy)
Name (please PRINT) Daytime Telephone Number

This information is being collected for the purposes of corporate registry records in accordance with the Cooperatives Act. Questions about the collection of this information can be directed to the Freedom of Information and Protection of Privacy Coordinator for Alberta Government Services, Box 3140, Edmonton, Alberta T5J 2G7, (780) 427-5210.