

REQUEST FOR APPROVAL OF SOLE PROPRIETOR OR PARTNERSHIP NAME CHANGE

Name of Existing Firm:

Name of Proposed Firm (Full Name and Address):

Name(s) of Partners (if any):

I understand that the above information will be used by CPA Manitoba only to update its records to replace the existing firm name with the proposed firm name, if approved. I understand that any other changes to the firm structure, ownership or office locations must be reported to CPA Manitoba separately.

I certify that the above information is correct to the best of my knowledge and belief.

Printed Name and Signature of a Partner/Sole Proprietor

Date of Application

For CPA Manitoba Use:

Chartered Professional Accountants of Manitoba consents to the use of the above name by the above firm for the purpose of changing its existing registered name to comply with *The Chartered Professional Accountants Act, Chapter C71, C.C.S.M.* and the CPA Manitoba Bylaws and Code of Professional Conduct.

Signature of the Secretary or Registrar

Date of Approval

**PLEASE SUBMIT COMPLETED FORM TO [EFFIE SIGUENZA](mailto:esiguenza@cpamb.ca) esiguenza@cpamb.ca
OR FAX 204 943.7119**