

# REQUEST FOR A NAME CHANGE TO AN EXISTING AURORA FUND, ORGANIZATION OR ACCOUNT

Use Part A to request a name change to an existing Fund.

Use Part B to request a name change to an existing Org.

Use Part C to request a name change to an existing Acct.

## GENERAL INFORMATION

Your Name: \_\_\_\_\_

Organization: \_\_\_\_\_

Email: \_\_\_\_\_

Phone #: \_\_\_\_\_ Date: \_\_\_\_\_

### PART A

#### FUND:

Suggested New Fund Name  
(35 Chars max): \_\_\_\_\_

Current Fund Name: \_\_\_\_\_

Fund Number (required): \_\_\_\_\_

Reason for Change: \_\_\_\_\_

### PART B

#### ORGANIZATION (Org):

Suggested New Org Name  
(35 Chars max): \_\_\_\_\_

Current Org Name: \_\_\_\_\_

Org Number (required): \_\_\_\_\_

Reason for Change: \_\_\_\_\_

### PART C

#### ACCOUNT (Acct):

Suggested New Acct  
Name (35 Chars max): \_\_\_\_\_

Current Acct Name: \_\_\_\_\_

Acct Number (required): \_\_\_\_\_

Reason for Change: \_\_\_\_\_

## FINANCIAL SERVICES USE ONLY

APPROVED BY: \_\_\_\_\_ DATE: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

Please submit form to: Financial Analysis & Reporting, Room 412 Administration Bldg.  
Email: FAR@umanitoba.ca Fax: 474-7925