

Contact Information Change Form

Complete the information below to notify BMO Benefit Services of an address or email change for your Flexible Spending Accounts.

RETAIN A COPY OF THIS COMPLETED FORM FOR YOUR RECORDS

Name: _____

Employer: _____

Change Effective as of: _____

Current Address: _____

New Address: _____

Update email address to: _____

Update phone number to: _____

Participant Signature: _____ **Date:** _____

Mailing address: BMO Benefit Services, PO Box 2517, Appleton, WI 54912-2517
Phone: 800-236-3539 | Fax: 888-244-2759 | Email: bmoflex@bmo.com | Website: bmoflex.com

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