



# J. Safra Sarasin

## Change of address Vested Benefits Foundation

- Primary address  
 Additional address (please also enter the previous address)

Change of address can **only be carried out in writing**. Please complete this form with your **signature and a copy of your passport or ID** and return it to J. Safra Sarasin Vested Benefits Foundation, Elisabethenstrasse 62, 4002 Basel.

### Client

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\_\_\_\_\_  
Name

\_\_\_\_\_  
First Name

\_\_\_\_\_  
Date of birth

### Previous address

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\_\_\_\_\_  
Street/house no.

\_\_\_\_\_  
Postal code/place

\_\_\_\_\_  
Country

### New address

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\_\_\_\_\_  
Street/house no.

\_\_\_\_\_  
Postal code/place

\_\_\_\_\_  
Country

\_\_\_\_\_  
Place/date

\_\_\_\_\_  
Client's signature

### Enclosure

- Copy of passport or ID relevant