



STAR PUBLICATIONS (MALAYSIA) BERHAD (10894-D)

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CHANGE OF DELIVERY ADDRESS

Please use this form to notify us on the change of your delivery address.

Subscriber ID:

Full Name:.....

Telephone :

Current Address :

.....

.....

Postcode: **City:**..... **State:**.....

New Address :

.....

.....

Postcode: **City:**..... **State:**.....

New delivery vendor (if any):

Change of delivery address effective month <mm/yy>:

Please note that the effective date can only be on the **1st of the month**. Kindly allow at least **7 working days** upon receiving your application to process the change of delivery address before the 1st of the effective month.

Please state reason (compulsory)

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