

# **Computershare**

9th Floor, 100 University Avenue Toronto, Ontario M5J 2Y1 Telephone 1-888-838-1407 www.computershare.com

Holder Account Number

	int in										
Use a <u>black</u> or <u>blue</u> pen. Pr CAPITAL letters inside the areas as shown in this examp	grey   A R C   1	2 3 X		C							
Please complete the informat	tion fields below (print clearly) in f										
Registered Name in which account is held (eg. John Smith)											
Apt.	Street Number	Street Name									
City				Prov. / State	Postal / Zip Code						

## **Reinvestment Enrollment - Participant Declaration Form**

The *Proceeds of Crime (Money Laundering) and Terrorist Financing Act* (Canada) and the Regulations made thereunder (collectively, the "Act") require that Computershare Trust Company of Canada collect and record specified information on accounts it opens for individuals or entities under a Plan. Please read Instructions below before completing the Reinvestment Enrollment - Participant Declaration Form on the reverse.

#### **INSTRUCTIONS**

In order that Computershare may comply with its legal obligations under the Act, this declaration and enrollment form must be completed in full and signed by all registered holder(s). Otherwise Computershare cannot process your enrollment.

#### Part A - PARTICIPANT DECLARATION

If a plan account is registered to:

- 1) an individual account holder or more than one holder each individual must complete their Date of Birth and Principal Business or Occupation.
- 2) a Corporation it <u>must</u> mail or hand-deliver this declaration and enrollment form along with a copy of its official corporate records relating to the authority to operate this account. Neither Date of Birth nor Principal Business or Occupation is required to be completed. Mark the applicable account holder status box.
- 3) a Trust, Partnership, or an unincorporated Fund or Organization Complete the field for Principal Business or Occupation. Date of Birth is not required to be completed. Mark the applicable account holder status box.

As space on the front of this form is limited to 2 holder declarations and signatures, photocopies of this form may be made if required.

#### Part B - THIRD PARTY DETERMINATION

In order that Computershare may comply with its legal obligations under the Act, you must check one of the two boxes provided with regard to any third party interest in the account, and fill in the additional fields if required, including a description of the relationship. For example, are you an agent, custodian, attorney, or legal guardian, or otherwise holding the account on behalf of a spouse, relative, business partner or friend?

#### Part C - ENROLLMENT PARTICIPATION

This section must be completed to process your request for enrollment.

Registere	ed Name in which account is	held (e.g. John Smi	th)								
j			,								
										NABQ	
Reinv	estment Enrol	lment - Par	ticipa	nt Declaratio	n Form						
A – PA	RTICIPANT DECLA	RATION									
	e, the account holder(s) nam	ned above, hereby c	ertify as fo	llows:							
1) [	Date of Birth: Day	Month Ye	ar	_ Principal Business	s or Occupation:	(e.g	ı. cashier,	student, re	tired, accounting	firm)	
2) [	Date of Birth:			Principal Business or Occupation:							
	Day	Month Ye		ook baldan akakoa bare 14	i amalia ablah	(e.g	ı. cashier,	student, re	tired, accounting	firm)	
and	I that the account holder is (	Check the appropri	ate accou	int holder status box, if	applicable):						
	a Corporation, Trust, Partner (Required documents enc			or Organization		I Entity or Se below. <b>(Proc</b>			exempt from Third	d Party Determination in	
В – IH	IRD PARTY DETER										
	This account is not intended to be used	_		ended to be used by, or	, ,						
	by, or on behalf of, a 3rd party.			:							
			Address of 3rd party:								
			of Birth of 3rd party (if an individual):								
			Nature of Principal Business or Occupation of 3rd party:  If 3rd party is a Corporation, provide incorporation number and place of issue:								
		•	Describe relationship between account holder and 3rd party, in respect of the account:								
			o rolationo	THE SOLMOON GOODIN NO	dor and ord party, in roo	poor or the c					
_	ROLLMENT PARTIC	CIPATION									
Ш	Full Reinvestment (You must be a registered holder of a minimum of 100 Common shares for this option) Please mark this box if you wish to reinvest all dividends/distributions that become payable on this account, on all Common Shares now held or any future holdings.										
		Partial Reinvestment You must be a registered holder of a minimum of 100 Common shares for this option) Please mark this box if you wish to reinvest all dividends/distributions that become payable on this account, on all <b>Common</b> Shares now held or any future holdings.									
	(You must be a registered only (an initial cash paym	Optional Cash Payments Only – To select this option, see important note below. (You must be a registered holder of a minimum of one Common share for this option) Please mark this box if you wish to participate in the plan through the investment of cash payments only (an initial cash payment is required when selecting this option). Dividends on new Common shares purchased with your payments will be reinvested. Any dividends on your certificated Common shares that you now own will NOT be reinvested.									
	Note: In order to make an ns provided in the Optional C						ndering ar	nd Terrorist	Financing Legis	lation. Please review the	
that partic the terms	pating in the plan, I/we confir cipation in the plan will contin and conditions of the prosp at – Participation Declaration	ue until I/we notify C ectus or brochure the	omputersl	nare in writing that I/we d	esire to terminate partic	ipation. I/W	e acknow	ledge that	withdrawals from	the plan will be subject to	
	id, this form must be signe distribution payments in c		account l	nolder(s) or applicable	authorized individual(s	s). If you do	o not sigi	n and retur	n this form, yoເ	will continue to receive	
Signature	1 - Please keep signature with	nin the box		Signature 2 - Please keep	signature within the box			Day	Month	Year	

### **Privacy Notice**

Computershare is committed to protecting individuals' personal information. In the course of providing our services, we receive non-public personal information - from transactions we perform for investors, forms sent to us, other communications we have with investors or representatives, etc. This information could include name, address, social insurance number, social security number, securities holdings and other financial information. We use this to administer investor accounts, to better serve investors' and clients' needs and for other lawful purposes relating to our services. We have prepared a Privacy Code to tell you more about our information practices and how personal information is protected. It is available at our website, www.computershare.com, or by writing us at 100 University Avenue, Toronto, Ontario, M5J 2Y1.

Please return completed form to:

Computershare, 9th Floor, 100 University Ave, Toronto Ontario M5J 2Y1