



9th Floor, 100 University Avenue Toronto, Ontario M5J 2Y1 Telephone 1-877-982-8767 www.computershare.com

Holder Account Number

Use a black or blue pen. Pri	int in			Holder Account Number						
CAPITAL letters inside the areas as shown in this examp	grey   A B C   1	2 3 X		C						
Please complete the information fields below (print clearly) in full										
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.
- 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 a	account is	held (e.g.,	lohn Smith	1)								
registere	ou realine in willon e	iccount is	noid (c.g. c	OTHIT OTHICH	1)								
													BNSQ
Pain	vestment E	Enroll	mont	- Dart	icina	nt Declara	tion Form	1					
					icipai	III Deciara		<u> </u>					
	RTICIPANT D  e, the account hold				tify as fol	lows:							
	Date of Birth:		ica above,	noroby cor	uly as loi		siness or Occupa	ion:					
1) [	Date of Diffit	Day	Month	Yea	r	_ Tillicipai bu	зінезз от Оссира		(e.g. cashier,	student, ret	ired, accountir	g firm)	
2) Date of Birth:		Day	Month	Yea	r	_ Principal Bu	rincipal Business or Occupation:						
and	I that the account h	•				nt holder status t	oox. if applicable		(c.g. casilloi,	stadent, ret	irou, accountii	ıgı)	
	a Corporation, Tru (Required docum	st, Partner	rship, or an	unincorpora				a Financial Entity of Section B below. (			exempt from Th	ird Party	Determination in
B – TH	IRD PARTY I	DETER	MINATIO	ON – Che	ck one o	of the two boxes b	pelow. If the sec	ond box is marked	d, you must pi	rovide the i	nformation		
	This account is			This account is intended to be used by, or on behalf of, a 3rd party and I have completed the required information fields below.									
	intended to be u			Name of 3rd party:									
	3rd party.			Address of 3rd party:									
				Date 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	relationsl	nip between accou	int holder and 3rd	party, in respect of	the account: _				
C – FN	IROLLMENT	PARTIC	CIPATIO	N									
	Full Reinvestm	<u>ient</u> e applicabl	le box(es) i		to particip	pate in Full reinves	tment. All dividen	ds/distributions pay	/able on all elig	gible holding	s now held an	d any fu	ture holdings in this
	Common Shares				Divide	nd Reinvestment (	Option	Stock Divide	end Option (US	S residents	only)		
	_	ferred Sha				dinate Debentures							
	Please mark this	s box if yo	u wish to c	ontinue to	receive ca		ibutions on all sha	res/units held in ce dividends/distribution					aking optional cash
	t Note: In order to								Laundering ar	nd Terrorist	Financing Leg	islation.	Please review the
	lote: Residents of T n subordinated deb		ED STATES	OF AMER	RICA, its t	erritories and poss	essions may not p	articipate in the Divi	idend Reinvest	ment Option	n, make optiona	al cash p	ayments or reinvest
that partic	cipation in the plan	will contin the prosp	ue until I/w ectus or br	e notify Co	mputersh	are in writing that	I/we desire to tern	ninate participation.	. I/We acknow	ledge that w	vithdrawals fro	m the pla	he plan. I/We agree an will be subject to n this Reinvestment
	id, this form must /distribution payn			gistered a	ccount h	older(s) or applic	cable authorized	ndividual(s). If yo	ou do not sign	n and returr	n this form, yo	ou will c	ontinue to receive
Signature	1 - Please keep sigr	nature with	in the box			Signature 2 - Pleas	e keep signature w	ithin the box		Day	Month	Ye	ear
												/	

### **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: