



Fax Completed Form to:
416-933-2505 All Provinces Except Quebec
514-281-5299 Quebec

TO: ScotiaMcLeod Direct Investing (SMDI)

ISSUER NAME	CONTACT NAME	PHONE NUMBER
EMPLOYEE NAME	PHONE NUMBER	SMDI ACCOUNT NUMBER

I elect to exercise my option to purchase the common shares of the above issuer as follows:

Date of Grant	No. of shares exercised	Exercise price/share	Purchase Price
____/____/____ MM DD YYYY	_____ X	_____ =	\$ _____
____/____/____ MM DD YYYY	_____ X	_____ =	\$ _____

I instruct SMDI to sell _____ of the above shares at the price discussed with the SMDI Investment Representative.

I request that SMDI loan me the amount of the Purchase Price on trade date and direct SMDI to pay this amount to the Issuer as directed by the Issuer.

I authorize SMDI to disclose my account number to the issuer.

STOCK OPTION AGREEMENT

I will advise SMDI at the time of sale if I am deemed by securities regulations to be an insider of the Issuer.

I confirm that the stock certificate representing the shares of the exercised option(s) will be registered in the name of Scotia Capital in Trust for (employee name), unless otherwise arranged with the SMDI Investment Representative and delivered to the SMDI Head Office in Toronto on or before the settlement date of the sale. If I am unable to commit to delivery on settlement date I agree to execute the sale of the shares as a short sale.

I acknowledge that if my certificate is not received by SMDI on or before settlement date the shares may be repurchased at current market value at my expense.

I acknowledge that interest on the loan will be charged to me at a rate of prime + 1%.

I acknowledge that proceeds owing to me on settlement date of the sale will be net of commission, loan interest, and a \$50 administration fee.

I agree that I am liable for any charges or losses incurred from late or failed settlement.

CLIENT SIGNATURE

DATE