GENERAL INSTRUCTIONS

Complete and submit this form to the relevant regulator(s) or in Québec, the securities regulatory authority, or self-regulatory organization (SRO) if an individual is seeking

- registration in individual categories,
- to be reviewed as a permitted individual.

You are only required to submit one form even if you are applying to be registered in several categories. This form is also used if you are seeking to be reviewed as a permitted individual. A post office box is not acceptable as a valid business location address.

Terms

In this form:

“Approved person” means, in respect of a member (Member) of the Investment Industry Regulatory Organization of Canada (IIROC), an individual who is a partner, director, officer, employee or agent of a Member who is approved by IIROC or another Canadian SRO to perform any function required under any IIROC or other Canadian SRO by-law, rule, or policy;

“Canadian Investment Manager designation” means the designation earned through the Canadian investment manager program prepared and administered by CSI Global Education Inc. and so named on the day this Instrument comes into force, and every program that preceded that program, or succeeded that program, that does not have a significantly reduced scope and content when compared to the scope and content of the first-mentioned program;

“CFA Charter” means the charter earned through the Chartered Financial Analyst program prepared and administered by the CFA Institute and so named on the day this Instrument comes into force, and every program that preceded that program, or succeeded that program, that does not have a significantly reduced scope and content when compared to the scope and content of the first-mentioned program;

“Derivatives” means financial instruments, such as futures contracts (including exchange traded contracts), futures options and swaps whose market price, value or payment obligations are derived from, or based on, one or more underlying interests. Derivatives can be in the form of instruments, agreements or securities;

“Major shareholder” and “shareholder” mean a shareholder who, in total, directly or indirectly owns voting securities carrying 10 per cent or more of the votes carried by all outstanding voting securities;

“Sponsoring firm” means the registered firm where you will carry out your duties as a registered or permitted individual; and

“You”, “your” and “individual” mean the individual who is seeking registration or the individual who is filing this form as a permitted individual under securities legislation or derivatives legislation or both.

How to submit this form

NRD format

Submit this form at the National Registration Database (NRD) website in NRD format at www.nrd.ca. If you have any questions, contact the compliance, registration or legal department of the sponsoring firm or a legal adviser with securities law experience, or visit the NRD information website at www.nrd-info.ca.

Format, other than NRD format

If you are relying on the temporary hardship exemption in section 5.1 of National Instrument 31-102 National Registration Database, you may submit this form in a format other than NRD format.

If you need more space, use a separate sheet of paper. Clearly identify the item and question number. Complete and sign the form, and send it to the relevant regulator(s) or, in Québec, the securities regulatory authority, SRO (s) or similar authority. The number of originally signed copies of the form you are required to submit depends on the province or territory, and on the regulator, the securities regulatory authority or SRO.
To avoid delays in processing this form, be sure to answer all of the questions that apply to you. If you have questions, contact the compliance, registration or legal department of the sponsoring firm or a legal adviser with securities law experience, or visit the NRD information website at www.nrd-info.ca.

**Item 1 Name**

1. **Legal name**

   Last name ____________________________
   First name ____________________________
   Second name (N/A) ______________________
   Third name (N/A) ________________________

   NRD number (if applicable)________________________

2. **Other personal names**

   Are you currently, or have you ever been, known by any names other than your full legal name above, for example, nicknames or names due to marriage?

   Yes ☐ No ☐

   If “Yes”, complete Schedule A.

3. **Use of other names**

   Are you currently, or have you ever used, operated under, or carried on business under any name other than the name(s) mentioned above, for example, trade names for sole proprietorships or team names?

   Yes ☐ No ☐

   If “Yes”, complete Schedule A.

**Item 2 Residential address**

Provide all of your residential addresses, including any foreign residential addresses, for the past 10 years.

1. **Current and previous residential addresses**

   (number, street, city, province, territory or state, country, postal code)

   Telephone number ____________________________

   Lived at this address since (YYYY/MM) __________

   If you have lived at this address for less than 10 years, complete Schedule B.

2. **Mailing address**

   ☐ Check here if your mailing address is the same as your current residential address provided above. Otherwise, complete the following:

   (number, street, city, province, territory or state, country, postal code)

3. **Business e-mail address**

**Item 3 Personal information**

1. **Date of birth ____________________________**
   (YYYY/MM/DD)
2. Place of birth ____________________________________
   (city, province, territory or state, country)

3. Gender
   Female ☐    Male ☐

4. Eye colour ____________________________

5. Hair colour ____________________________

6. Height _______ ☐ in. or _______ ☐ cm

7. Weight _______ ☐ lbs. or _______ ☐ kg

Item 4 Citizenship

1. Citizenship information

What is your country of citizenship?

☐ Canada
☐ Other, specify: __________________

2. If you are a citizen of a country other than Canada, complete the following for that citizenship.

☐ Check here if you do not have a valid passport. Otherwise, provide:

   Passport number: _________________________________________________

   Date of issue: ______________________________ (YYYY/MM/DD)

   Place of issue: ____________________________________________
   (city, province, territory or state, country)

Item 5 Registration jurisdictions

1. Are you filing this form under the passport system / interface for registration?

   Only choose “No” if:

   (a) you are seeking registration only in your principal jurisdiction,

   (b) you are seeking review as a permitted individual

   and you are not currently registered under securities legislation in any jurisdiction of Canada.

   Yes ☐    No ☐

2. Check each jurisdiction where you are seeking registration or review as a permitted individual:

   ☐ All jurisdictions

   Alberta
   British Columbia
   Manitoba
   New Brunswick
   Newfoundland and Labrador
   Northwest Territories
   Nova Scotia
   Nunavut
   Ontario
   Prince Edward Island
   Québec
   Saskatchewan
   Yukon
Item 6  Individual categories

1. On Schedule C, check each category for which you are seeking registration as an individual or review as a permitted individual. If you are seeking review as a permitted individual, check each category that describes your position with your sponsoring firm.

2. If you are seeking registration as a representative of a mutual fund dealer or of a scholarship plan dealer in Québec, are you covered by your sponsoring firm’s professional liability insurance?

   Yes  No

If “No”, state:

   The name of your insurer_____________________________________
   Your policy number__________________________________________

Item 7  Address and agent for service

1. Address for service

You must have one address for service in each province or territory where you are submitting this form. A residential address or a business address is acceptable. A post office box is not an acceptable address for service. Complete Schedule D for each additional address for service you are providing.

Address for service:

(number, street, city, province or territory, postal code)

Telephone number ______________________________

Fax number, if applicable _________________________

Business e-mail address

2. Agent for service

If you have appointed an agent for service, provide the following information for the agent in each province or territory where you have an agent for service. The address of your agent for service must be the same as the address for service above. If your agent for service is not an individual, provide the name of your contact person.

   Name of agent for service: ________________________________________

   Contact person: ___________________________________________________

Item 8  Proficiency

1. Course, examination or designation information and other education

   Complete Schedule E to indicate each course, examination and designation that is required for registration or approval and that you have successfully completed or have been exempted from.

   Check here if you are not required under securities legislation or derivatives legislation or both, or the rules of an SRO to satisfy any course, examination or designation requirements.

2. Student numbers

   If you have a student number for a course that you successfully completed with one of the following organizations, provide it below:

   CSI Global Education: ____________________________________________

   IFSE Institute: __________________________________________________
3. Exemption refusal

Has any securities regulator, derivatives regulator or SRO refused to grant you an exemption from a course, examination, designation or experience requirement?

Yes ☐ No ☐

If “Yes”, complete Schedule F.

4. Relevant securities industry experience

If you are an individual applying for IIROC approval, select “N/A”.

If you have not been registered in the last 36 months and you passed the required examination more than 36 months ago, do you consider that you have gained 12 months of relevant securities industry experience during the 36-month period?

Yes ☐ No ☐ N/A ☐

If “Yes”, complete Schedule F.

Item 9 Location of employment

1. Provide the following information for your new sponsoring firm. If you will be working out of more than one business location, provide the following information for the business location out of which you will be doing most of your business. If you are only filing this form because you are a permitted individual and you are not employed by, or acting as agent for, the sponsoring firm, select “N/A”.

NRD location number: ________________________________

Unique Identification Number (optional): ________________________________

Business location address: ________________________________________________

(number, street, city, province, territory or state, country, postal code)

Telephone number: (___) ____________________

Fax number: (___) ____________________

N/A ☐

2. If the firm has a foreign head office, and/or you are not a resident of Canada, provide the address for the business location in which you will be conducting most of your business. If you are only filing this form because you are a permitted individual and you are not employed by, or acting as agent for, the sponsoring firm, select “N/A”.

Business location address: ________________________________________________

(number, street, city, province, territory or state, country, postal code)

Telephone number: (___) ____________________

Fax number: (___) ____________________

N/A ☐
3. Type of business location:
   - Head office
   - Branch or business location
   - Sub-branch (members of the Mutual Fund Dealers Association of Canada only)

4. Name of supervisor or branch manager: ________________________

5. Check here if the mailing address of the business location is the same as the business location address provided above. Otherwise, complete the following:
   - Mailing address: ________________________
     (number, street, city, province, territory or state, country, postal code)

Item 10 Current employment, other business activities, officer positions held and directorships

Complete a separate Schedule G for each of your current business and employment activities, including employment and business activities with your sponsoring firm and any employment and business activities outside your sponsoring firm. Also include all officer or director positions and any other equivalent positions held, as well as positions of influence. The information must be provided
   - whether or not you receive compensation for such services, and
   - whether or not any such position is business related.

Item 11 Previous employment and other activities

On Schedule H, complete your history of employment and other activities for the past 10 years.

Item 12 Resignations and terminations

Have you ever resigned, been terminated or been dismissed for cause by an employer from a position following allegations that you:

1. Violated any statutes, regulations, rules or standards of conduct?
   - Yes  □  No  □  □
   If “Yes”, complete Schedule I, Item 12.1.

2. Failed to appropriately supervise compliance with any statutes, regulations, rules or standards of conduct?
   - Yes  □  No  □  □
   If “Yes”, complete Schedule I, Item 12.2.

3. Committed fraud or the wrongful taking of property, including theft?
   - Yes  □  No  □  □
   If “Yes”, complete Schedule I, Item 12.3.
Item 13  Regulatory disclosure

The questions below relate to any jurisdiction of Canada and any foreign jurisdiction.

1.  Securities and derivatives regulation

a)  Other than a registration or permitted individual status that has been recorded under this NRD number, are you now, or have you ever been, registered or licensed with any securities regulator or derivatives regulator or both, to trade in or advise on securities or derivatives or both?

Yes ☐  No ☐

If “Yes”, complete Schedule J, Item 13.1(a).

b)  Have you ever been refused registration or a licence to trade in or advise on securities or derivatives or both?

Yes ☐  No ☐

If “Yes”, complete Schedule J, Item 13.1(b).

c)  Have you ever been denied the benefit of any exemption from registration provided in any securities or derivatives or both legislation or rules, other than what was disclosed in Item 8.3 of this form?

Yes ☐  No ☐

If “Yes”, complete Schedule J, Item 13.1(c).

d)  Are you now, or have you ever been subject to any disciplinary proceedings or any order resulting from disciplinary proceedings under any securities legislation or derivatives legislation or both?

Yes ☐  No ☐

If “Yes”, complete Schedule J, Item 13.1(d).

2.  SRO regulation

a)  Other than an approval that has been recorded under this NRD number, are you now, or have you ever been, an approved person of an SRO or similar organization?

Yes ☐  No ☐

If “Yes”, complete Schedule J, Item13.2(a).

b)  Have you ever been refused approved person status by an SRO or similar organization?

Yes ☐  No ☐

If “Yes”, complete Schedule J, Item 13.2(b).

c)  Are you now, or have you ever been, subject to any disciplinary proceedings conducted by any SRO or similar organization?

Yes ☐  No ☐

If “Yes”, complete Schedule J, Item 13.2(c).

3.  Non-securities regulation

a)  Are you now, or have you ever been, registered or licensed under any legislation which requires registration or licensing to deal with the public in any capacity other than to trade in or advise on securities or derivatives or both (e.g. insurance, real estate, accountant, lawyer, teacher)?

Yes ☐  No ☐

If “Yes”, complete Schedule J, Item 13.3(a)
b) Have you ever been refused registration or a licence under any legislation relating to your professional activities unrelated to securities or derivatives?

Yes ☐ No ☐

If “Yes”, complete Schedule J, Item 13.3(b).

c) Are you now, or have you ever been, a subject of any disciplinary actions conducted under any legislation relating to your professional activities unrelated to securities or derivatives?

Yes ☐ No ☐

If “Yes”, complete Schedule J, Item 13.3(c).

**Item 14 Criminal disclosure**

The questions below apply to offences committed in any jurisdiction of Canada and any foreign jurisdiction.

You must disclose all offences, including:

- a criminal offence under federal statutes such as the *Criminal Code* (Canada), *Income Tax Act* (Canada), the *Competition Act* (Canada), *Immigration and Refugee Protection Act* (Canada) and the *Controlled Drugs and Substances Act* (Canada), even if
  - a record suspension has been ordered under the *Criminal Records Act* (Canada)
  - you have been granted an absolute or conditional discharge under the *Criminal Code* (Canada), and
- a criminal offence, with respect to questions 14.2 and 14.4, of which you or your firm has been found guilty or for which you or your firm have participated in the alternative measures program within the previous three years, even if a record suspension has been ordered under the *Criminal Records Act* (Canada)

You are not required to disclose:

- charges for summary conviction offences that have been stayed for six months or more,
- charges for indictable offences that have been stayed for a year or more,
- offences under the *Youth Criminal Justice Act* (Canada), and
- speeding or parking violations.

Subject to the exceptions above:

1. Are there any outstanding or stayed charges against you alleging a criminal offence that was committed?

   Yes ☐ No ☐

   If “Yes”, complete Schedule K, Item 14.1.

2. Have you ever been found guilty, pleaded no contest to, or been granted an absolute or conditional discharge from any criminal offence that was committed?

   Yes ☐ No ☐

   If “Yes”, complete Schedule K, Item 14.2.

3. To the best of your knowledge, are there any outstanding or stayed charges against any firm of which you were, at the time the criminal offence was alleged to have taken place, a partner, director, officer or major shareholder?

   Yes ☐ No ☐

   If “Yes”, complete Schedule K, Item 14.3.
4. To the best of your knowledge, has any firm, when you were a partner, officer, director or major shareholder, ever been found guilty, pleaded no contest to or been granted an absolute or conditional discharge from a criminal offence that was committed?

Yes ☐ No ☐

If “Yes”, complete Schedule K, Item 14.4.

Item 15 Civil disclosure

The questions below relate to any jurisdiction of Canada and any foreign jurisdiction.

1. Are there currently any outstanding civil actions alleging fraud, theft, deceit, misrepresentation or similar misconduct against you or a firm where you are or were a partner, director, officer or major shareholder?

Yes ☐ No ☐

If “Yes”, complete Schedule L, Item 15.1.

2. Have you or a firm where you are or were a partner, director, officer or major shareholder ever been a defendant or respondent in any civil proceeding in which fraud, theft, deceit, misrepresentation or similar misconduct is, or was, successfully established in a judgment?

Yes ☐ No ☐

If “Yes”, complete Schedule L, Item 15.2.

Item 16 Financial disclosure

1. Bankruptcy

Under the laws of any applicable jurisdiction, have you or has any firm when you were a partner, director, officer or major shareholder of that firm:

a) Had a petition in bankruptcy issued or made a voluntary assignment in bankruptcy or any similar proceeding?

Yes ☐ No ☐

If “Yes”, complete Schedule M, Item 16.1(a).

b) Made a proposal under any legislation relating to bankruptcy or insolvency or any similar proceeding?

Yes ☐ No ☐

If “Yes”, complete Schedule M, Item 16.1(b).

c) Been subject to proceedings under any legislation relating to the winding up or dissolution of the firm, or under the Companies’ Creditors Arrangement Act (Canada)?

Yes ☐ No ☐

If “Yes”, complete Schedule M, Item 16.1(c).

d) Been subject to or initiated any proceedings, arrangement or compromise with creditors? This includes having a receiver, receiver-manager, administrator or trustee appointed by or at the request of creditors, privately, through court process or by order of a regulatory authority, to hold your assets.

Yes ☐ No ☐

If “Yes”, complete Schedule M, Item 16.1(d).
2. **Debt obligations**

Over the past 10 years, have you failed to meet a financial obligation of $10,000 or more as it came due or, to the best of your knowledge, has any firm, while you were a partner, director, officer or major shareholder of that firm, failed to meet any financial obligation of $10,000 or more as it came due?

Yes ☐  No ☐

If “Yes”, complete Schedule M, Item 16.2.

3. **Surety bond or fidelity bond**

Have you ever been refused for a surety or fidelity bond?

Yes ☐  No ☐

If “Yes”, complete Schedule M, Item 16.3.

4. **Garnishments, unsatisfied judgments or directions to pay**

Has any federal, provincial, territorial, state authority or court ever issued any of the following against you regarding your indebtedness or, to the best of your knowledge, the indebtedness of a firm where you are or were a partner, director, officer or major shareholder:

- Garnishment
- Unsatisfied judgment
- Direction to pay

Yes ☐  No ☐

If “Yes”, complete Schedule M, Item 16.4.

**Item 17 Ownership of securities and derivatives firms**

Are you now, or have you ever been, a partner or major shareholder of any firm (including your sponsoring firm) whose business is trading in or advising on securities or derivatives or both?

Yes ☐  No ☐

If “Yes”, complete Schedule N.

**Item 18 Agent for service**

By submitting this form, you certify that in each jurisdiction of Canada where you have appointed an agent for service, you have completed the appointment of agent for service required in that jurisdiction.

**Item 19 Submission to jurisdiction**

By submitting this form, you agree to be subject to the securities legislation or derivatives legislation or both of each jurisdiction of Canada, and to the by-laws, regulations, rules, rulings and policies (collectively referred to as “rules” in this form) of the SROs to which you have submitted this form. This includes the jurisdiction of any tribunals or any proceedings that relate to your activities as a registrant or a partner, director or officer of a registrant under that securities legislation or derivatives legislation or both or as an Approved Person under SRO rules.

**Item 20 Notice of collection and use of personal information**

The personal information required under this form is collected on behalf of, and used by, the securities regulatory authorities in the jurisdictions set out in Schedule O to administer and enforce certain provisions of their securities legislation or derivatives legislation or both.

By submitting this form, the individual consents to the collection by the securities regulatory authorities of this personal information, and any police records, records from other government or non-governmental regulators or SROs, credit records and employment records about the individual that the securities regulatory authorities may need to complete their review of the information submitted in this form relating to the individual’s continued fitness for registration or approval, if applicable, in accordance with the legal authority of the securities regulatory authorities while the individual is registered with or approved by
it. Securities regulatory authorities may contact government and private bodies or agencies, individuals, corporations and other organizations for information about the individual.

If you have any questions about the collection and use of this information, contact the securities regulatory authority in any jurisdiction in which the required information is submitted. See Schedule O for details. In Québec, you can also contact the Commission d’accès à l’information at 1-888-528-7741 or visit its website at www.cai.gouv.qc.ca.

SROs

The principal purpose for the collection of personal information is to assess your suitability for registration or approval and to assess your continued fitness for registration or approval in accordance with the applicable securities legislation and the rules of the SROs.

By submitting this form, you authorize the SROs to which this form is submitted to collect any information from any source whatsoever. This includes, but is not limited to, personal confidential information about you that is otherwise protected by law such as police, credit, employment, education and proficiency course completion records, and records from other government or non-governmental regulatory authorities, securities commissions, stock exchanges, or other SROs, private bodies, agencies, individuals or corporations, as may be necessary for the SROs to complete their review of your form or continued fitness for registration or approval in accordance with their rules for the duration of the period you remain so registered or approved. You further consent to and authorize the transfer of confidential information between SROs, securities commissions or stock exchanges from whom you now, or may in the future, seek registration or approval, or with which you are currently registered or approved for the purpose of determining fitness or continued fitness for registration or approval or in connection with the performance of an investigation or other exercise of regulatory authority, whether or not you are registered with or approved by them.

By submitting this form, you certify that you understand the rules of the applicable SROs of which you are seeking registration or approval or of which your sponsoring firm is a member or participating organization. You also undertake to become conversant with the rules of any SROs of which you or your sponsoring firm becomes a member or participating organization. You agree to be bound by, observe and comply with these rules as they are from time to time amended or supplemented, and you agree to keep yourself fully informed about them as they are amended and supplemented. You submit to the jurisdiction of the SROs from whom you are seeking registration or approval, or of which your sponsoring firm is now or in the future becomes a member or participating organization and, wherever applicable, their Governors, Directors and Committees. You agree that any registration or approval granted pursuant to this form may be revoked, terminated or suspended at any time in accordance with the then applicable rules of the respective SROs. In the event of any such revocation or termination, you must terminate all activities which require registration or approval and, thereafter, not perform services that require registration or approval for any member of the SROs or any approved affiliated company or other affiliate of such member without obtaining the approval of or registration with the SROs, in accordance with their rules.

By submitting this form, you undertake to notify the SROs from whom you are seeking registration or approval or with which you are currently or may in the future be registered or approved of any material change to the information herein provided in accordance with their respective rules. You agree to the transfer of this form, without amendment, to other SROs in the event that at some time in the future you seek registration or approval from such other SROs.

You certify that you have discussed the questions in this form, together with this Agreement, with an Officer, Supervisor or Branch Manager of your sponsoring member firm and, to your knowledge and belief, the authorized Officer, Supervisor or Branch Manager was satisfied that you fully understood the questions and the terms of this Agreement. You further certify that your business activities that are subject to securities rules and derivatives rules or both will be limited strictly to those permitted by the category of your registration or approval.

Item 21 Warning

It is an offence under securities legislation and derivatives legislation, including commodity futures legislation, to give false or misleading information on this form.

Item 22 Certification

1. Certification - NRD format

I confirm I have discussed the questions in this form with an officer, branch manager or supervisor of my sponsoring firm. To the best of my knowledge, the officer, branch manager or supervisor was satisfied that I fully understood the questions. I will limit my activities to those permitted by my category of registration. If the business location specified in this form is a residence, I hereby give my consent for the regulator or, in Québec, the securities regulatory authority to enter that residence for the administration of securities legislation and derivatives legislation, including commodity futures legislation.

☐ I am making this submission as agent for the individual identified in this form. By checking this box, I certify that the individual provided me with all of the information on this form and the certification above.
2. Certification - Format other than NRD format

Individual

By signing below, I certify to the regulator, or in Québec the securities regulatory authority, in each jurisdiction where I am filing or submitting this form, either directly or through the principal regulator, that:

- I have read this form and understand the questions,
- all of the information provided on this form is true, and complete, and
- if the business location specified in this form is a residence, I hereby give my consent for the regulator or, in Québec, the securities regulatory authority to enter that residence for the administration of securities legislation and derivatives legislation, including commodity futures legislation.

Signature of individual ___________________________ Date ___________________________

Authorized partner or officer of the firm

By signing below, I certify to the regulator or, in Québec, the securities regulatory authority, in each jurisdiction where I am submitting this form, either directly or through the principal regulator, for the individual that:

- the individual identified in this form will be engaged by the sponsoring firm as a registered individual or a permitted individual, and
- I have, or a branch manager, or supervisor, or another officer or partner has, discussed the questions set out in this form with the individual and, to the best of my knowledge, the individual fully understands the questions.

Name of firm ________________________________________________________________

Name of authorized signing officer or partner _______________________________________

Title of authorized signing officer or partner _______________________________________

Signature of authorized signing officer or partner ________________________________

Date signed ____________________________

(YYYY/MM/DD)
Schedule A
Names (Item 1)

Item 1.2 Other personal names

Name 1:

<table>
<thead>
<tr>
<th>Last name</th>
<th>First name</th>
<th>Second name (N/A)</th>
<th>Third name (N/A)</th>
</tr>
</thead>
</table>

Provide the reasons for the use of this name (for example, marriage, divorce, court order, commonly used name or nickname):

When did you use this name? From: To:

/YYYY/MM  /YYYY/MM

Name 2:

<table>
<thead>
<tr>
<th>Last name</th>
<th>First name</th>
<th>Second name (N/A)</th>
<th>Third name (N/A)</th>
</tr>
</thead>
</table>

Provide the reasons for the use of this name (for example, marriage, divorce, court order, commonly used name or nickname):

When did you use this name? From: To:

/YYYY/MM  /YYYY/MM

Name 3:

<table>
<thead>
<tr>
<th>Last name</th>
<th>First name</th>
<th>Second name (N/A)</th>
<th>Third name (N/A)</th>
</tr>
</thead>
</table>

Provide the reasons for the use of this name (for example, marriage, divorce, court order, commonly used name or nickname):

When did you use this name? From: To:

/YYYY/MM  /YYYY/MM

Item 1.3 Use of other names

Name 1:

Name: ________________________________________________

Provide the reasons for the use of this other name (for example, trade name or team name): __________________

If this other name is or was used in connection with any sponsoring firm, did the sponsoring firm approve the use of the name?

Yes  No  N/A

When did you use this name? From: To:

/YYYY/MM  /YYYY/MM
Name 2:

Name: _________________________________________________

Provide the reasons for the use of this other name (for example, trade name or team name): ___________________

If this other name is or was used in connection with any sponsoring firm, did the sponsoring firm approve the use of the name?

Yes ☐ No ☐ N/A ☐

When did you use this name? From: __________________ To: __________________

(YYYY/MM) (YYYY/MM)

Name 3:

Name: _____________________________________________________

Provide the reasons for the use of this other name (for example, trade name or team name): __________________

If this other name is or was used in connection with any sponsoring firm, did the sponsoring firm approve the use of the name?

Yes ☐ No ☐ N/A ☐

When did you use this name? From: __________________ To: __________________

(YYYY/MM) (YYYY/MM)
**Schedule B**  
**Residential address (Item 2)**

**Item 2.1 Current and previous residential addresses**

If you have lived at your current address for less than 10 years, list all previous addresses for the past 10 years.

You do not have to include a postal code or ZIP code, or a telephone number for any previous address.

**Address 1:**

<table>
<thead>
<tr>
<th>Residential address:</th>
<th>From:</th>
<th>To:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>(YYYY/MM)</td>
<td>(YYYY/MM)</td>
</tr>
</tbody>
</table>

**Address 2:**

<table>
<thead>
<tr>
<th>Residential address:</th>
<th>From:</th>
<th>To:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>(YYYY/MM)</td>
<td>(YYYY/MM)</td>
</tr>
</tbody>
</table>

**Address 3:**

<table>
<thead>
<tr>
<th>Residential address:</th>
<th>From:</th>
<th>To:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>(YYYY/MM)</td>
<td>(YYYY/MM)</td>
</tr>
</tbody>
</table>
Schedule C
Individual Categories (Item 6)

Check each category for which you are seeking registration, approval or review as a permitted individual.

Categories common to all jurisdictions under securities legislation

Firm categories [Format other than NRD format only]
[ ] Investment Dealer
[ ] Mutual Fund Dealer
[ ] Scholarship Plan Dealer
[ ] Exempt Market Dealer
[ ] Restricted Dealer
[ ] Portfolio Manager
[ ] Restricted Portfolio Manager
[ ] Investment Fund Manager

Individual categories and permitted activities
[ ] Dealing Representative
[ ] Advising Representative
[ ] Associate Advising Representative
[ ] Ultimate Designated Person
[ ] Chief Compliance Officer
[ ] Permitted Individual as described in paragraph (c) of the definition of “permitted individual” in section 1.1 of National Instrument 33-109 Registration Information

[ ] Officer – Specify title:
[ ] Director
[ ] Partner
[ ] Shareholder
[ ] Branch Manager (MFDA members only)
[ ] IIROC approval only

IIROC

Approval categories
[ ] Executive
[ ] Director (Industry)
[ ] Director (Non-Industry)
[ ] Supervisor
[ ] Investor
[ ] Registered Representative
[ ] Investment Representative
[ ] Trader

Additional approval categories
[ ] Chief Compliance Officer
[ ] Chief Financial Officer
[ ] Ultimate Designated Person
**Products**

[ ] Non-Trading
[ ] Securities
[ ] Options
[ ] Futures Contracts and Futures Contract Options
[ ] Mutual Funds only

**Customer type**

[ ] Retail
[ ] Institutional
[ ] Not Applicable

**Portfolio management**

[ ] Portfolio Management

**Categories under local commodity futures and derivatives legislation**

**Ontario**

**Firm categories**

[ ] Commodity Trading Adviser
[ ] Commodity Trading Counsel
[ ] Commodity Trading Manager
[ ] Futures Commission Merchant

**Individual categories and permitted activities**

[ ] Advising Representative
[ ] Salesperson
[ ] Branch Manager
[ ] Officer – Specify title:
  [ ] Director
  [ ] Partner
[ ] Shareholder
[ ] IIROC approval only

**Manitoba**

**Firm categories**

[ ] Dealer (Merchant)
[ ] Dealer (Futures Commission Merchant)
[ ] Dealer (Floor Broker)
[ ] Adviser
[ ] Local
Individual categories and permitted activities

[ ] Floor Broker
[ ] Salesperson
[ ] Branch Manager
[ ] Adviser
[ ] Officer – Specify title:
[ ] Director
[ ] Partner
[ ] Futures Contracts Portfolio Manager
[ ] Associate Futures Contracts Portfolio Manager
[ ] IIROC approval only
[ ] Local

Québec

Firm categories

[ ] Derivatives Dealer
[ ] Derivatives Portfolio Manager

Individual categories and permitted activities

[ ] Derivatives Dealing Representative
[ ] Derivatives Advising Representative
[ ] Derivatives Associate Advising Representative
Schedule D
Address and agent for service (Item 7)

Item 7.1 Address for service

You must have one address for service in each province or territory in which you are now, or are seeking to become, a registered individual or permitted individual. A post office box is not an acceptable address for service.

Address for service: _______________________________________________________________
                     (number, street, city, province or territory, postal code)

Telephone number: (___) ____________________
Fax number: (___) ____________________
Business e-mail address: __________________________________________________________________

Item 7.2 Agent for service

If you have appointed an agent for service, provide the following information about the agent. The address for service provided above must be the address of the agent named below.

Name of agent for service: __________________________________________________________
(if applicable)

Contact person: _____________________________________________________________________
                  Last name, First name
### Schedule E
#### Proficiency (Item 8)

**Item 8.1** Course, examination or designation information and other education

<table>
<thead>
<tr>
<th>Course, examination, designation or other education</th>
<th>Date completed (YYYY/MM/DD)</th>
<th>Date exempted (YYYY/MM/DD)</th>
<th>Regulator / securities regulatory authority granting the exemption</th>
</tr>
</thead>
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</tbody>
</table>

If you have listed the CFA Charter in Item 8.1, please indicate by checking “Yes” below if you are a current member of the CFA Institute permitted to use this charter.

Yes [ ] No [ ]

If “No”, please explain why you no longer hold this designation:

________________________________________________________________________
________________________________________________________________________

If you have listed the Canadian Investment Manager Designation in Item 8.1, please indicate by checking “Yes” below if you are currently permitted to use this designation.

Yes [ ] No [ ]

If “No”, please explain why you no longer hold this designation:

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
Schedule F
Proficiency (Items 8.3 and 8.4)

Item 8.3 Exemption refusal

Complete the following for each exemption that was refused.

1. Which securities regulator, derivatives regulator or SRO refused to grant the exemption?

______________________________________________________________________________________
State the name of the course, examination, designation or experience requirement:
______________________________________________________________________________________
State the reason given for not being granted the exemption:
______________________________________________________________________________________
Date exemption refused: ________________________________  (YYYY/MM/DD)

2. Which securities regulator, derivatives regulator or SRO refused to grant the exemption?

______________________________________________________________________________________
State the name of the course, examination, designation or experience requirement:
______________________________________________________________________________________
State the reason given for not being granted the exemption:
______________________________________________________________________________________
Date exemption refused: ________________________________  (YYYY/MM/DD)

3. Which securities regulator, derivatives regulator or SRO refused to grant the exemption?

______________________________________________________________________________________
State the name of the course, examination, designation or experience requirement:
______________________________________________________________________________________
State the reason given for not being granted the exemption:
______________________________________________________________________________________
Date exemption refused: ________________________________  (YYYY/MM/DD)
Item 8.4  Relevant securities industry experience

Describe your responsibilities in areas relating to the category you are applying for, including the title(s) you have held, as well as start and end dates:

______________________________________________________________________________

______________________________________________________________________________

What is the percentage of your time devoted to these activities?

_____ %

Indicate the continuing education activities in which you have participated during the last 36 months and that are relevant to the category of registration you are applying for:

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________
Schedule G
Current employment, other business activities, officer positions held and directorships
(Item 10)

Complete a separate Schedule G for each of your current business and employment activities, including employment and business activities with your sponsoring firm and any employment and business activities outside your sponsoring firm. Also include all officer or director positions and any other equivalent positions held, as well as positions of influence. The information must be provided

- whether or not you receive compensation for such services, and
- whether or not any such position is business related.

1. Start date __________________________
   (YYYY/MM/DD)

2. Firm information

☐ Check here if this activity is employment with your sponsoring firm.

If the activity is with your sponsoring firm, you are not required to indicate the firm name and address information below:

Name of business or employer: _________________________________________________
Address of business or employer: _______________________________________________
   (number, street, city, province, territory or state, country)

Name and title of your immediate supervisor: ______________________________________

3. Description of duties

Describe all employment and business activities related to this employer. Include the nature of the business and your duties, title or relationship with the business. If you are seeking registration that requires specific experience, include details such as level of responsibility, value of accounts under direct supervision, number of years of experience, and percentage of time spent on each activity.

____________________________________________________________________________

4. Number of work hours per week

How many hours per week do you devote to this business or employment? _____________

If this activity is employment with your sponsoring firm and you work less than 30 hours per week, explain why.

____________________________________________________________________________

5. Conflicts of interest

If you have more than one employer or are engaged in business related activities:

A. Disclose any potential for confusion by clients and any potential for conflicts of interest arising from your multiple employment or business related activities or proposed business related activities.

____________________________________________________________________________

____________________________________________________________________________

B. Indicate whether or not any of your employers or organizations where you engage in business related activities are listed on an exchange.

____________________________________________________________________________
C. Confirm whether the firm has procedures for minimizing potential conflicts of interest and if so, confirm that you are aware of these procedures.

D. State the name of the person at your sponsoring firm who has reviewed and approved your multiple employment or business related activities or proposed business related activities.

E. If you do not perceive any conflicts of interest arising from this employment, explain why.
Schedule H
Previous employment and other activities (Item 11)

Provide the following information for each of your employment and other activities in the past 10 years. Account for all of your time, including full-time and part-time employment, self-employment or military service. Include your status for each, such as unemployed, full-time student, or other similar statuses. Do not include short-term employment of four months or less while a student, unless it was in the securities, derivatives or financial industry.

In addition to the information required in the paragraph above, if you were employed or had business activities in the securities or derivatives industry or both during and before the 10-year period, disclose all your securities and derivatives or both employment or business activities (both before and during the 10-year period).

☐ Unemployed
☐ Full-time student
☐ Employed or self-employed

From: __________________________  
(YYYY/MM)

To: ____________________________  
(YYYY/MM)

Complete the following only if you are, or were, employed or self-employed during this period.

Name of business or employer:
____________________________________________________________________________

Address of business or employer:
____________________________________________________________________________
(Number, street, city, province, territory or state, country)

Name and title of immediate supervisor, if applicable:
____________________________________________________________________________

Describe the firm’s business, your position, duties and your relationship to the firm. If you are seeking registration in a category of registration that requires specific experience, include details of that experience. Examples include level of responsibility, value of accounts under direct supervision, number of years of that experience and research experience, and percentage of time spent on each activity.

Reason why you left the firm:
____________________________________________________________________________

____________________________________________________________________________
____________________________________________________________________________

(Add more lines if necessary)
Schedule I
Resignations and terminations (Item 12)

Item 12.1

For each allegation of violation of any statutes, regulations, rules or internal/external standards of conduct, state below (1) the name of the firm from which you resigned, were terminated or dismissed for cause, (2) whether you resigned, were terminated or dismissed for cause, (3) the date you resigned, were terminated or dismissed for cause, and (4) the circumstances relating to your resignation, termination or dismissal for cause.

_______________________________________________________________________________

Item 12.2

For each allegation of failure to supervise compliance with any statutes, regulations, rules or standards of conduct, state below, (1) the name of the firm from which you resigned, were terminated or dismissed for cause, (2) whether you resigned, were terminated or dismissed for cause, (3) the date you resigned, were terminated or dismissed for cause, and (4) the circumstances relating to your resignation, termination or dismissal for cause.

_______________________________________________________________________________

Item 12.3

For each allegation of fraud or the wrongful taking of property, including theft, state below (1) the name of the firm from which you resigned, were terminated or dismissed for cause, (2) whether you resigned, were terminated or dismissed for cause, (3) the date you resigned, were terminated or dismissed for cause, and (4) the circumstances relating to your resignation, termination or dismissal for cause.

_______________________________________________________________________________
Schedule J
Regulatory disclosure (Item 13)

Item 13.1 Securities and derivatives regulation

a) For each registration or licence, state below (1) the name of the firm, (2) the securities or derivatives regulator with which you are, or were, registered or licensed, (3) the type or category of registration or licence, and (4) the period that you held the registration or licence.

_______________________________________________________________________________

b) For each registration or licence refused, state below (1) the name of the firm, (2) the securities or derivatives regulator that refused the registration or licence, (3) the type or category of registration or licence refused, (4) the date of the refusal, and (5) the reasons for the refusal.

_______________________________________________________________________________

c) For each exemption from registration denied or licence refused, other than what was disclosed in Item 8.3 of this form, state below (1) the party that was refused the exemption from registration or licence, (2) the securities or derivatives regulator that refused the exemption from registration or licence, (3) the type or category or registration or licence refused, (4) the date of the refusal, and (5) the reasons for the refusal.

_______________________________________________________________________________

d) For each order or disciplinary proceeding, state below (1) the name of the firm, (2) the securities or derivatives regulator that issued the order or is conducting or conducted the proceeding, (3) the date any notice of proceeding was issued, (4) the date any order or settlement was made, (5) a summary of any notice, order or settlement (including any sanctions imposed), (6) whether you are or were a partner, director, officer or major shareholder of the firm and named individually in the order or disciplinary proceeding, and (7) any other relevant details.

_______________________________________________________________________________

Item 13.2 SRO regulation

a) For each approval, state below (1) the name of the firm, (2) the SRO with which you are or were an approved person, (3) the categories of approval, and (4) the period that you held the approval.

_______________________________________________________________________________

b) For each approval refused, state below (1) the name of the firm, (2) the SRO that refused the approval, (3) the category of approval refused, (4) the date of the refusal, and (5) the reasons for the refusal.

_______________________________________________________________________________

c) For each order or disciplinary proceeding, state below (1) the name of the firm, (2) the SRO that issued the order or that is, or was, conducting the proceeding, (3) the date any notice of proceeding was issued, (4) the date any order or settlement was made, (5) a summary of any notice, order or settlement (including any sanctions imposed), (6) whether you are or were a partner, director, officer or major shareholder of the firm and named individually in the order or disciplinary proceeding, and (7) any other information that you think is relevant or that the regulator or, in Québec, the securities regulatory authority may request.

_______________________________________________________________________________

Item 13.3 Non-securities regulation

a) For each registration or licence, state below (1) the party who is, or was, registered or licensed (if insurance licensed, also indicate the name of the insurance agency), (2) with which regulatory authority, or under what legislation, the party is, or was, registered or licensed, (3) the type or category of registration or licence, and (4) the period that the party held the registration or licence.

_______________________________________________________________________________
b) For each registration or licence refused, state below (1) the party that was refused registration or licensing (if insurance licensed, also indicate the name of the insurance agency), (2) with which regulatory authority, or under what legislation, the registration or licence was refused, (3) the type or category of registration or licence refused, (4) the date of the refusal, and (5) the reasons for the refusal.

c) For each order or disciplinary proceeding, indicate below (1) the party against whom the order was made or the proceeding taken (if insurance licensed, indicate the name of the insurance agency), (2) the regulatory authority that made the order or that is, or was, conducting the proceeding, or under what legislation the order was made or the proceeding is being, or was conducted, (3) the date any notice of proceeding was issued, (4) the date any order or settlement was made, (5) a summary of any notice, order or settlement (including any sanctions imposed), (6) whether you are or were a partner, director, officer or major shareholder of the firm and named individually in the order or disciplinary proceeding and (7) any other information that you think is relevant or that the regulatory authority may request.
Schedule K
Criminal disclosure (Item 14)

Item 14.1
For each charge, state below (1) the type of charge, (2) the date of the charge, (3) any trial or appeal dates, and (4) the court location.

_______________________________________________________________________________

Item 14.2
For each finding of guilty, pleading no contest to, or granting of an absolute or conditional discharge from a criminal offence, state below (1) the offence, (2) the date found guilty, and (3) the disposition (any penalty or fine and the date any fine was paid).

_______________________________________________________________________________

Item 14.3
For each charge, state below (1) the name of the firm, (2) the type of charge, (3) the date of the charge, (4) any trial or appeal dates, and (5) the court location.

_______________________________________________________________________________

Item 14.4
For each finding of guilty, pleading no contest to, or granting of an absolute or conditional discharge from a criminal offence, state below (1) the name of the firm, (2) the offence, (3) the date of the conviction, and (4) the disposition (any penalty or fine and the date any fine was paid).

_______________________________________________________________________________
Schedule L
Civil disclosure (Item 15)

Item 15.1
For each outstanding civil proceeding, state below (1) the dates the statement of claim and statement of defence were issued, (2) the name of the plaintiff(s) in the proceeding, (3) whether the proceeding is pending or on appeal, (4) whether the proceeding was against a firm where you are, or were, a partner, director, officer or major shareholder and whether you have been named individually in the allegations, and (5) the jurisdiction where the action is being pursued.

Item 15.2
For each civil proceeding, state below (1) the dates the statement of claim and statement of defence were issued, (2) each plaintiff in the proceeding, (3) the jurisdiction where the action was pursued, (4) whether the proceeding was about a firm where you are, or were, a partner, director, officer or major shareholder and whether you have been named individually in the allegations and (5) a summary of any disposition or any settlement over $10,000. You must disclose any actions settled without admission of liability.
Schedule M
Financial Disclosure (Item 16)

Item 16.1 Bankruptcy

(a) For each event, state below (1) the date of the petition or voluntary assignment, (2) the person or firm about whom this disclosure is being made, (3) any amounts currently owing, (4) the creditors, (5) the status of the matter, (6) a summary of any disposition or settlement, (7) date of discharge or release, if applicable, and (8) any other information that you think is relevant or that the regulator or, in Québec, the securities regulatory authority may request.

(b) For each event, state below (1) the date of the proposal, (2) the person or firm about whom this disclosure is being made, (3) any amounts currently owing, (4) the creditors, (5) the status of the matter, (6) a summary of any disposition or settlement, and (7) any other information that you think is relevant or that the regulator or, in Québec, the securities regulatory authority may request.

(c) For each event, state below (1) the date of the proceeding, (2) the person or firm about whom this disclosure is being made, (3) any amounts currently owing, (4) the creditors, (5) the status of the matter, (6) a summary of any disposition or settlement, and (7) any other information that you think is relevant or that the regulator or, in Québec, the securities regulatory authority may request.

(d) For each proceeding, arrangement or compromise with creditors, state below (1) the date of proceeding, (2) the person or firm about whom this disclosure is being made, (3) any amounts currently owing, (4) the creditors, (5) the status of the matter, (6) a summary of any disposition or settlement, and (7) any other information that you think is relevant or that the regulator or, in Québec, the securities regulatory authority may request.

Item 16.2 Debt obligation

For each event, state below (1) the person or firm that failed to meet its financial obligation, (2) the amount that was owing at the time the person or firm failed to meet its financial obligation, (3) the person or firm to whom the amount is, or was, owing, (4) any relevant dates (for example, when payments are due or when final payment was made), (5) any amounts currently owing, and (6) any other information that you think is relevant or that the regulator or, in Québec, the securities regulatory authority may request, including why the obligation has not been met/satisfied.

Item 16.3 Surety bond or fidelity bond

For each bond refused, state below (1) the name of the bonding company, (2) the address of the bonding company, (3) the date of the refusal, and (4) the reasons for the refusal.

Item 16.4 Garnishments, unsatisfied judgments or directions to pay

For each garnishment, unsatisfied judgment or direction to pay regarding your indebtedness, indicate below (1) the amount that was owing at the time the garnishment, judgment or direction to pay was rendered, (2) the person or firm to whom the amount is, or was, owing, (3) any relevant dates (for example, when payments are due or when final payment was made), (4) the percentage of earnings to be garnished or the amount to be paid, (5) any amounts currently owing, and (6) any other information that you think is relevant or that the regulator or, in Québec, the securities regulatory authority may request.
Schedule N
Ownership of securities and derivatives firms (Item 17)

Name of firm (whose business is trading in or advising on securities or derivatives, or both):
_____________________________________________________________________

What is your relationship to the firm? Partner ☐ Major shareholder ☐

What is the period of this relationship?

From: To: (if applicable)
(YYYY/MM) (YYYY/MM)

Provide the following information:

a) State the number, value, class and percentage of securities, or the amount of partnership interest you own or propose to acquire when you are registered or approved as a result of the review of this form. If acquiring shares when you are so approved or registered, state the source (for example, treasury shares, or if upon transfer, state name of transferor).
_______________________________________________________________________________

b) State the market value (approximate, if necessary) of any subordinated debentures or bonds of the firm to be held by you or any other subordinated loan to be made by you to the firm:
_______________________________________________________________________________

c) If another person or firm has provided you with funds to invest in the firm, provide the name of the person or firm and state the relationship between you and that person or firm:
_______________________________________________________________________________

d) Are the funds to be invested (or proposed to be invested) guaranteed directly or indirectly by any person or firm?

Yes ☐ No ☐

If “Yes”, provide the name of the person or firm and state the relationship between you and that person or firm:
_______________________________________________________________________________

e) Have you directly or indirectly given up any rights relating to these securities or this partnership interest, or do you, when you are registered or approved as a result of the review of this form, intend to give up any of these rights (including by hypothecation, pledging or depositing as collateral the securities or partnership interest with any firm or person)?

Yes ☐ No ☐

If “Yes”, provide the name of the person or firm, state the relationship between you and that person or firm and describe the rights that have been or will be given up:
_______________________________________________________________________________

f) Is a person other than you the beneficial owner of the shares, bonds, debentures, partnership units or notes held by you?

Yes ☐ No ☐

If “Yes”, complete (g), (h) and (i).
g) Name of beneficial owner:

Last name | First name | Second name (N/A) | Third name (N/A)

h) Residential address:

(number, street, city, province or state, country, postal code)

i) Occupation:
Schedule O  
Contact information for  
Notice of collection and use of personal information

Alberta  
Alberta Securities Commission  
Suite 600, 250–5th St. SW  
Calgary, AB T2P 0R4  
Attention: Information Officer  
Telephone: (403) 297-6454

British Columbia  
British Columbia Securities Commission  
P.O. Box 10142, Pacific Centre  
701 West Georgia Street  
Vancouver, BC V7Y 1L2  
Attention: Freedom of Information Officer  
Telephone: (604) 899-6500 or (800) 373-6393 (in Canada)

Manitoba  
The Manitoba Securities Commission  
500 - 400 St. Mary Avenue  
Winnipeg, MB R3C 4K5  
Attention: Director of Registrations  
Telephone: (204) 945-2548  
Fax: (204) 945-0330

New Brunswick  
Financial and Consumer Services Commission of New Brunswick / Commission des services financiers et des services aux consommateurs du Nouveau-Brunswick  
Suite 300, 85 Charlotte Street  
Saint John, NB E2L 2J2  
Attention: Registration  
Telephone: (506) 658-3060

Newfoundland and Labrador  
Superintendent of Securities, Service NL  
Government of Newfoundland and Labrador  
P.O. Box 8700  
2nd Floor, West Block  
Confederation Building  
St. John’s, NL A1B 4J6  
Attention: Manager of Registrations  
Telephone: (709) 729-5661

Nova Scotia  
Nova Scotia Securities Commission  
Suite 400, 5251 Duke Street  
Halifax, NS B3J 1P3  
Attention: Deputy Director, Capital Markets  
Telephone: (902) 424-7768

Northwest Territories  
Government of the Northwest Territories  
Department of Justice  
1st Floor Stuart M. Hodgson Building  
5009 – 49th Street  
Yellowknife, NWT X1A 2L9  
Attention: Deputy Superintendent of Securities  
Telephone: (867) 920-8984

Nunavut  
Government of Nunavut  
Department of Justice  
P.O. Box 1000 Station 570  
Iqaluit, NU X0A 0H0  
Attention: Superintendent of Securities  
Telephone: (867) 975-6590

Ontario  
Ontario Securities Commission  
22nd Floor  
20 Queen Street West  
Toronto, ON M5H 3S8  
Attention: Compliance and Registrant Regulation  
Telephone: (416) 593-8314  
e-mail: registration@osc.gov.on.ca

Prince Edward Island  
Securities Office  
Department of Community Affairs and Attorney General  
P.O. Box 2000  
Charlottetown, PE C1A 7N8  
Attention: Superintendent of Securities  
Telephone: (902) 368-6288

Québec  
Autorité des marchés financiers  
800, square Victoria, 22e étage  
C.P. 246, tour de la Bourse  
Montréal (Québec) H4Z 1G3  
Attention: Responsable de l’accès à l’information  
Telephone: (514) 395-0337 or (877) 525-0337

Saskatchewan  
Financial and Consumer Affairs Authority of Saskatchewan  
Suite 601, 1919 Saskatchewan Drive  
Regina, SK S4P 4H2  
Attention: Deputy Director, Capital Markets  
Telephone: (306) 787-5871

Self-regulatory organization  
Investment Industry Regulatory Organization of Canada  
121 King Street West, Suite 2000  
Toronto, Ontario M5H 3T9  
Attention: Privacy Officer  
Telephone: (416) 364-6133  
E-mail: PrivacyOfficer@iiroc.ca