

SECURITY DONATION AT NATIONAL BANK DIRECT BROKERAGE

1100 Robert-Bourassa Blvd, 7th Floor, Montreal, Quebec H3B 2G7

Name(s) of the Account h	older(s):	-		
	currently hold the following se Bank Financial Inc. (hereinafter	curity ("Security" or "Securities") in "NBDB"):	my account at N	lational Bank Direct Brokerage,
Quantity		Description of Security		ISM Code
•	at the Security(ies) mentioner rone of the following reasons:	d above have no market value, littl	e market value,	or that a restriction limits their
the Securities' issu	uing firm is bankrupt, insolvent	or restructuring;		
• the issuing firm is	no longer in operation and has	s terminated its activities;		
 the Securities are 	subject to a trading halt.			
NDDD I I I				
NBDB has advised me it is possible that the and transferable in	the restriction limiting transact	ons on the Securities may be lifted	and that the Sec	curities may become negotiable
	,	no longer be able to claim their own	nership or marke	t value from NBDB:
it is incumbent upo		e transfer of the Securities to NBDE	·	
l hereby acknowledge	and declare that:			
-		regarding all aspects pertaining to	the transfer of th	e Securities to NRDR:
	t I understand the fiscal impac		the transfer of th	e decumes to NDDD,
_	·	dvice regarding this transfer or, spec	cifically concerni	ing the reculting tay treatment:
 I undertake to ind 	•	e or loss it may suffer in relation to	-	-
 I hereby acknowle 	-	essential condition without which N	NBDB would not	have authorized the transfer of
Close the account a	and deposit any remaining bal	ance in the following account*:		
_	, , ,	_	Bank account No.	Transit
* If the bank account is held	with another institution, please include	a cheque marked "void".		
•	I measures required, including	evocably and permanently, the Sec the signing of documents, to transfe	-	
	erstand all provisions of the to the Securities transfer.	e present authorization and conf	irm that said p	rovisions represent fairly the
		X		
Name of Account holder (in	block letters)	X Signature of Account holder or authorized sig	gnatory	Date (MM DD YYYY)
		X		
Name of co-applicant (in blo	ock letters)	Signature of co-applicant or authorized signa	tory	Date (MM DD YYYY)