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ACCOUNT HOLD	ER AND ATTORNEY IDENTIFICATION						
I, the undersigned,							
•	Surname and first name of Account holder (in block letters)		Date of Birth of the Account holder (MM DD YYYY)				
and							
	Surname and first name of Account co-holder, if applicable (in block	Date of Birth of the Account co-holder (MM DD YYYY)					
(hereinafter collecti	vely the "Account holder")						
grant to							
	Surname and first name of Attorney (in block letters)		Date of Birth of Attorney (MM DD YYYY)				
	Occupation of Attorney (in block letters)						
	Name and type of business of the Attorney's employer (in block letters)						
	Name and type of business of the Attorney's employer (in block lette	15)	(1,; 64 41 41 A 44 27)				
residing at	Home Address of Attorney (street number, street, city, province, pos	(hereinafter the "Attorney")					

	Country						
	Telephone number of Attorney						
	t below with respect to all of the Account holder's A ect Brokerage, a division of National Bank Financial I		under the Account root(s) listed below and held at ed by the first six digits of the Account number.				
1.	2.	3(hereinafter the "Account")				
Important nation	Please note that further to the review of the said form, NE	DD vacanica the vight to vaccinat any addition	ional information it decree				
	tion identity form (F.19447-702) filled-out by the Attorne						

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ADDITIONAL INFORMATION TO OBTAIN FROM THE ATTORNEY (Section to be completed by the Attorney)

In order to enable NBDB to meet its regulatory obligations in the protection of the markets and risk management, NBDB must obtain additional information when a person is appointed as an Attorney for a NBDB client.

Please tick all applicable situations:

1. The Attorney is:

a.	An immediate	family	member1	of the	Account	holder	or	co-holder

Specify the relationship:

By an immediate family member we mean a spouse, father and mother, child, brother and sister, grandfathers and grandmothers, grandsons and granddaughters, and any other family member who shares the Account holder's home.

b. Other

If the Attorney is not an immediate family member, please specify in details the relationship between the Attorney and the Account holder:

Quick Reference

Form 13768
Power of Attorney
(Accounts for individuals only)



Account holder identification

Enter the name and the date of birth of the account holder and, if applicable, the co-holder.

Attorney identification

- Complete all boxes identifying the attorney.
- If the attorney is retired, indicate it in the "Occupation" box and leave the "Type of business" box empty.

Account identification

> Enter the first six (6) digits of the account number.



Additional information about the attorney

- Specify the relationship between the account holder and the attorney.
- Answer questions 11 to 15 if the attorney is not an immediate family member of the account holder or co-holder.



	orney hold any Trading Authorization or Power of Attorney for other individuals (individuals or entities) who hold brokerage accounts at NBDB ter brokerage firms?
Yes	
	brokerage firms:
a) 1	specify (by checking the boxes provided for this purpose) elationship you have with each person for whom you are an Attorney; and t person holds a brokerage account with one of the brokers of the National Bank of Canada.
PERSON 1	Relationship:
	Immediate family member
	Professional ²
	Other (please specify) :
	Holding of a brokerage account:
	A broker of the National Bank of Canada
	Other broker
PERSON 2	Relationship:
	Immediate family member
	Professional ²
	Other (please specify):
	Holding of a brokerage account:
	A broker of the National Bank of Canada
	Other broker
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VERIFICATION	F IDENTITY AND DECLARATION OF ATTORNEY
In compliance brokerage Ac	h the Proceeds of Crime (Money Laundering) and Terrorist Financing Act, the identity of any person authorized to give instructions for the must be checked. In order to do so, the Attorney must complete the "Verification of identity" Form (F.19447-702).
Please note t	ertakes to complete the above form for identification purposes and in order to perform the powers hereby given under this Power of Attorney it the Attorney is a National Bank of Canada client, unless otherwise instructed and if certain conditions are satisfied, NBDB will automatical with National Bank of Canada.
agrees to be present Powe Attorney state	Attorney accepts his appointment as an Attorney. He has kept a copy of the present Power of Attorney, has read it and understood it, an dby it. Subject to the compliance of the laws in effect in the province of residence of the Account holder, the Attorney acknowledges that th Attorney, at the start of incapacity of the Account holder, will not allow him in any way to act as an Attorney for the Account. Moreover, that the information found in the section "Additional Information to obtain from the Attorney" is true and accurate and agrees to notify NBDB at any change occurs.
	X
Date (MM DD YY	Signature of Attorney
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DECLARATIO) AND SIGNATURE(S) OF THE ACCOUNT HOLDER AND ACCOUNT CO-HOLDER
acknowledge	ng read and understood and I accept all the provisions of the present form.
	X



List of trading authorizations held by the attorney

- The attorney must declare any other powers of attorney held in connection with a brokerage account, regardless of the brokerage firm.
- > If this is not the case:
 - Check the "No" box and go on to the next questions.
- > If this is the case:
 - Check the "Yes" box and write the number of authorizations.
 - Complete questions A and B for each authorization.
 - Answer questions 11 to 15 (mandatory).



Attorney's identity verification

> The attorney's signature and the date are mandatory.

Important: the <u>form 19447</u> must be completed by the attorney (section 3.1 must be certified by a National Bank representative).



Account holder signature

- The signature of the account holder / co-holder and the date are mandatory.
- An electronic signature using Adobe software is also accepted.

Sending the form

 Important: Send your request via the secure
 Message Centre of the online brokerage platform.

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