

Quick Reference

13768 Form Power of Attorney (Accounts for individuals only)

1

ACCOUNT HOLDER 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 letters)	Date of Birth of the Account co-holder (MM DD YYYY)
(hereinafter collectively 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)	
residing at	Home Address of Attorney (street number, street, city, province, postal code in block letters)	(hereinafter the "Attorney")
	Country	
	Telephone number of Attorney	

the powers set out below with respect to all of the Account holder's Accounts, present and future, grouped under the Account root(s) listed below and held at National Bank Direct Brokerage, a division of National Bank Financial Inc. (hereinafter "NBDB"). A root is defined by the first six digits of the Account number.

1. _____ 2. _____ 3. _____ (hereinafter the "Account")

Important notice: Please note that further to the review of the said form, NBDB reserves the right to request any additional information it deems necessary.

*Include the Verification identity form (F.19447-702) filled-out by the Attorney mentioned above receiving the grant of powers.

1

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.

2

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: _____

¹ 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: _____

2

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.

3

2. Does the Attorney hold any Trading Authorization or Power of Attorney for other individuals (individuals or entities) who hold **brokerage accounts** at NBDB or in any other **brokerage firms**?

☐ Yes ☐ No If yes, please specify how many (including the ones that may be outstanding or pending approval at NBDB or in any other brokerage firms):

2.1. Please specify (by checking the boxes provided for this purpose)

- a) the relationship you have with each person for whom you are an Attorney; and
b) if that person holds a brokerage account with one of the brokers of the National Bank of Canada.

PERSON 1 A) Relationship:

☐ Immediate family member

☐ Professional ²

☐ Other (please specify):

B) Holding of a brokerage account:

☐ A broker of the National Bank of Canada

☐ Other broker

PERSON 2 A) Relationship:

☐ Immediate family member

☐ Professional ²

☐ Other (please specify):

B) Holding of a brokerage account:

☐ A broker of the National Bank of Canada

☐ Other broker

4

VERIFICATION OF IDENTITY AND DECLARATION OF ATTORNEY

In compliance with the *Proceeds of Crime (Money Laundering) and Terrorist Financing Act*, the identity of any person authorized to give instructions for a brokerage Account must be checked. In order to do so, the Attorney must complete the "Verification of Identity" Form (F.19447-702).

The Attorney undertakes to complete the above form for identification purposes and in order to perform the powers hereby given under this Power of Attorney. Please note that if the Attorney is a National Bank of Canada client, unless otherwise instructed and if certain conditions are satisfied, NBDB will automatically verify his identity with National Bank of Canada.

Furthermore, the Attorney accepts his appointment as an Attorney. He has kept a copy of the present Power of Attorney, has read it and understood it, and agrees to be bound by it. Subject to the compliance of the laws in effect in the province of residence of the Account holder, the Attorney acknowledges that the present Power of 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, the Attorney states that the information found in the section "Additional Information to obtain from the Attorney" is true and accurate and agrees to notify NBDB as soon as possible if any change occurs.

Date (MM DD YYYY) X
Signature of Attorney

5

DECLARATION(S) AND SIGNATURE(S) OF THE ACCOUNT HOLDER AND ACCOUNT CO-HOLDER

I acknowledge having read and understood and I accept all the provisions of the present form.

Date (MM DD YYYY) X Signature of the Account Holder Date (MM DD YYYY) X Signature of the Account Co-Holder (if applicable)

3

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).

4

Attorney's identity verification

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

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

5

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.