beneva

Signature

Sentence power of attorney Beneva Inc., P.O. Box 10510, Station Sainte-Foy, Quebec QC G1V 0A3

| I, the undersigned, | | | | |
|--|--------------|--------------|----------------|--|
| • | Name | | | |
| residing and demiciled at | | | | |
| esiding and domiciled at | | | | |
| | | | | |
| authorize | | | - Deletienship | |
| Name | | | Relationship | |
| | | | | |
| Address | | | Date of birth | |
| | | | | |
| to administer my | | account, | | |
| | Product name | Contract No. | | |
| held at Beneva inc. and make deposits, redemptions or transfers deemed necessary in my account. | | | | |
| Tield at Defleva inc. and make deposits, redemptions of transfers deemed necessary in my account. | | | | |
| | | | | |
| | | | | |
| This authorization is valid until receipt of a notice to the contrary. A certified true copy of this power of attorney has the same value as the original. | | | | |
| | | | | |
| | | | | |
| In witness whereof, I have signed at | | , on | , 20 | |
| | | | | |
| X | | | | |
| | | | | |

Investment

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