

In accordance with the *Proceeds of Crime (Money Laundering) and Terrorist Financing Act*, National Bank Direct Brokerage Inc. must obtain information on any person who uses or benefits from a brokerage account held by an holder or co-holder, if applicable.

Persons authorized to give instructions and persons on behalf of whom an account is administered under an act, judgement or any other similar document (trading authorization, mandate in case of incapacity, power of attorney, tutorship, curatorship, etc.) are **not** required to complete this form.

ACCOUNT HOLDER(S)

Ms. Mr.

Surname of the Account holder First Name Initial

Surname of the Account co-holder (if applicable) First Name Initial

Indicate the number of the account to be used by or on behalf of a third party

INFORMATION ON THE THIRD PARTY

If the third party is an individual

Surname First Name Date of Birth (MM DD YYYY)

Home Address (may not be a P.O Box) City Province Postal Code

Principal Business or Occupation Relationship to Account holder(s)

If the third party is a corporation

Name of Corporation

Address City Province Postal Code

Incorporation No. Place of Issue

Nature of principal business Relationship to Account holder(s)

If the third party is an entity other than a corporation

Name of Entity

Address City Province Postal Code

Nature of principal business Relationship to Account holder(s)

Comments:

Date (MM DD YYYY)

X
Signature of the Account holder

X
Signature of the Account co-holder (if applicable)