B2B BANK
SECURITIES SERVICES

Third Party Statement Request

FAX to: Direct Trading (416) 413-0733
B2B Bank Securities Services Inc. ("B2BBSSI")

CLIENT INFORMATION:

LAST NAME

FIRST NAME

B2BBSSI ACCOUNT NUMBER

PLEASE PROVIDE COPIES OF MY ACCOUNT STATEMENTS BY MAIL TO:

NAME

TITLE

ADDRESS

CITY

PROVINCE

POSTAL CODE

AUTHORIZATION:

I hereby request and authorize the instructions stated above.

AUTHORIZED SIGNATURE

AUTHORIZED SIGNATURE (if more than one signature is required).

DATE (mm/dd/yyyy)

DATE (mm/dd/yyyy)

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