

Name of Trust:

## B2B Bank Non-Registered GIC Schedule A

Please use additional forms if space is insufficient. **FOR TRUSTS** Please provide a copy of the Trust Agreement along with the information noted below for all Beneficiaries. ☐ Mr Miss ☐ Mrs ☐ Ms Date of birth (mm/dd/yyyy) Citizenship Last Name First Name Home phone number Email Cell phone number Residence address (street # and name, apartment #) (not only a P.O. Box number) City Province Postal code Employer Detailed Occupation (examples: actor, cook) Miss ☐ Mr ☐ Mrs Date of birth (mm/dd/yyyy) Citizenship Last Name First Name Home phone number Email Cell phone number Residence address (street # and name, apartment #) (not only a P.O. Box number) City Postal code Province Employer Detailed Occupation (examples: actor, cook) Miss ☐ Mr ☐ Mrs ☐ Ms Date of birth (mm/dd/yyyy) Citizenship Last Name First Name Home phone number Cell phone number Residence address (street # and name, apartment #) (not only a P.O. Box number) Postal code City Province Employer Detailed Occupation (examples: actor, cook) Please provide a copy of the Trust Agreement along with the information noted below for all **Trustees**. ☐ Mrs ☐ Miss ☐ Mr Last Name Date of birth (mm/dd/yyyy) First Name Citizenship Residence address (street # and name, apartment #) (not only a P.O. Box number) City Province Postal code Country of residence Home phone number Cell phone number Email Detailed Occupation (examples: actor, cook) Employer



## B2B Bank Non-Registered GIC Schedule A Trusts

☐ Mr ☐ Mrs ☐ Miss ☐	Ms							
Last Name			First Name		Date of birth (mm/dd/yyyy)	Citizenship		
Residence address (street # and name, apartment #) (not only a P.O. Box number)								
City		Province		Postal code	Countr	Country of residence		
Home phone number Cell phone number		per	Email					
Employer				Detailed Occupation (examples: actor, cook)				
Please provide a copy of the Trust Agreement along with the information noted below for all <b>Settlors</b> .								
☐ Mr ☐ Mrs ☐ Miss ☐ Ms								
Last Name		First Nam	е		Date of birth (mm/dd/yyyy)	Citizenship		
Residence address (street # and name, apartment #) (not only a P.O. Box number)								
City		Province		Postal code	(	lome phone number	Cell phone number	
Email								
Employer				Detailed Occupation (examples: actor, cook)				
☐ Mr ☐ Mrs ☐ Miss ☐	Ms							
Last Name			First Nam	е		Date of birth (mm/dd/yyyy)	Citizenship	
Residence address (street # and name, apartment #) (not only a P.O. Box number)								
City Pro		Province		Postal code	F	Home phone number	Cell phone number ( )	
Email								
Employer	Detailed Occupation (examples: actor, cook)							
☐ Mr ☐ Mrs ☐ Miss ☐	Ms							
Last Name			First Name			Date of birth (mm/dd/yyyy)	Citizenship	
Residence address (street # and name, apartment #) (not only a P.O. Box number)								
City		Province		Postal code	F	Home phone number	Cell phone number	
Email						'		
Employer				Detailed Occupation (examples: actor, cook)				
Form must be signed by one of the following: (i) director or secretary of corporation; (ii) trustee of trust; (iii) partner of partnership; or (iv) chairman, secretary, or treasurer of unincorporated association or other entity.  I,								
hereby certify that the informatio this form.	n indicated abo	ove is complete and	accurate.	. ι unαeιτακέ το advise Β	szk ka	TIK IN WRITING OF ANY CHANGE	to the information in	
Signature					Date (	mm/dd/yyyy)		