



Client Banking Confirmation Form

Fax to: (416) 413-0733

USE THIS FORM TO CONFIRM/CORRECT CLIENT BANKING INFORMATION

1. CLIENT INFORMATION

<input type="text"/>	<input type="text"/>	<input type="text"/>
CLIENT NAME (LAST)	(FIRST)	B2BBSSI ACCOUNT NUMBER
<input type="text"/>	<input type="text"/>	
CLIENT NAME (LAST)	(FIRST)	

2. BANKING INFORMATION – Attach a void cheque and complete information

<input type="text"/>	<input type="text"/>	<input type="text"/>
BANK NUMBER	BANK TRANSIT NUMBER	BANK ACCOUNT NUMBER
<input type="text"/>	<input type="text"/>	<input type="text"/>
BANK NAME	BRANCH LOCATION	
<input type="text"/>	<input type="text"/>	
BANK TELEPHONE NUMBER	BANK FAX NUMBER	

3. CLIENT BANKING AUTHORIZATION

I/We, _____, authorize _____

CLIENT(S) NAME(S)

BANK NAME

to confirm to B2B Bank Securities Services Inc. our bank transit number and account number only.

<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
CLIENT SIGNATURE	CLIENT SIGNATURE

M M D D Y Y Y Y

M M D D Y Y Y Y

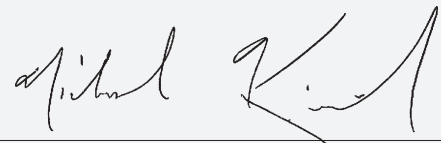
4. BANK BRANCH CONFIRMATION – Bank administrator only

B2B Bank Securities Services Inc. (B2BBSSI) is required by the Investment Industry Regulatory Organization of Canada (IIROC) to confirm that the banking reference on our client's application corresponds to the reference on file at the financial institution.

Simply circle Yes or No and return this form to the following fax number: 416-413-0733.

Do the transit and account numbers shown above belong to the client indicated above?

YES / NO


 MIKE KAZMIEROWSKI, VICE PRESIDENT OPERATIONS

199 Bay Street, Suite 610 PO Box 35 STN Commerce Court Toronto ON M5L 0A3