

To wire funds to you, the following information is required. Please complete this form in full and return to:

Mailing Address:

Olympia Trust Company
Investment Account Services Division
PO Box 2581, STN Central
Calgary, AB T2P 1C8

Courier Address:

Olympia Trust Company
Investment Account Services Division
4000 - 520 3 Ave SW
Calgary, AB T2P 0R3

Email: myaccount@olympiatrust.com

Fax: (403) 261-7523

1. Company Information	<div style="text-align: right; margin-bottom: 10px;"><input type="checkbox"/> In Trust</div> <div style="border-bottom: 1px solid black; margin-bottom: 10px;">Company Name</div> <div style="border-bottom: 1px solid black;">Company Address (<i>street, city, province, postal code</i>)</div>						
2. Account Information	<div style="border-bottom: 1px solid black; margin-bottom: 10px;">Bank Name</div> <div style="border-bottom: 1px solid black; margin-bottom: 10px;">Bank Address (<i>street, city, province, postal code</i>)</div> <div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div style="border: 1px solid black; width: 40px; height: 25px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; width: 40px; height: 25px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; width: 40px; height: 25px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; width: 40px; height: 25px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; width: 40px; height: 25px; margin-bottom: 5px;"></div> </div> <div style="display: flex; justify-content: space-between; margin-top: 5px;"> Institution Number Transit Number Account Number </div> <p style="text-align: center; margin-top: 10px;"><u>A VOID cheque or wire instruction sheet from the financial institution must be attached</u></p>						
3. Authorization	<p>Please note, it is your responsibility to ensure the information provided is correct. By signing below, you represent and warrant that you will not hold Olympia Trust Company responsible for any delay or loss of funds due to incorrect or incomplete information supplied by you or your financial institution due to an error on the part of your financial institution in depositing funds to your account.</p> <table style="width: 100%; margin-top: 20px;"> <tr> <td style="width: 33%; border-bottom: 1px solid black;">Name of Authorized Signatory</td> <td style="width: 33%; border-bottom: 1px solid black;">Signature of Authorized Signatory</td> <td style="width: 33%; border-bottom: 1px solid black;">Date (<i>mm/dd/yyyy</i>)</td> </tr> <tr> <td style="border-bottom: 1px solid black;">Name of Authorized Signatory</td> <td style="border-bottom: 1px solid black;">Signature of Authorized Signatory</td> <td style="border-bottom: 1px solid black;">Date (<i>mm/dd/yyyy</i>)</td> </tr> </table>	Name of Authorized Signatory	Signature of Authorized Signatory	Date (<i>mm/dd/yyyy</i>)	Name of Authorized Signatory	Signature of Authorized Signatory	Date (<i>mm/dd/yyyy</i>)
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Privacy Notice: In providing services to you, we receive non-public, personal information about you. We receive this information through the transactions we perform for you and may also receive information about you by virtue of your transactions with our affiliates and other parties. We will hold your personal information in accordance with our Privacy Policy, a copy of which may be found on our website at www.olympiatrust.com.

OLYMPIA USE ONLY	
Payee ID: _____	Template Name (<i>8-character restriction</i>): _____
Set Up by: _____	Date: _____