

MATERIAL CHANGE FORM

To ensure continuous access to your account(s), please submit the fully completed, dated, and signed original.

Α.	INICONALIC	A A BOUT WOLL (
<u>A</u>	INFORMATIO	N ABOUT YOU (please	e print clearly)					
	Account #1:	ccount #1:			Transaction #			
	Related Accounts	#2		#3		#4		
					Final			
	Title	Last name			First name			Initials
	Preferred Name (If	other than your legal nan	ne) (Optional)					
	Last Name			First name			Middle Initial	
	Primary			Hame			IIIIII	Suite
	Residence Address							No.
		x address is not allowed)						
	City or Town		Prov	/	Postal Code	Country		
	Marital		Home Phone		code	Business Phone		
	Status		(area code, no.)		- 1	(area code, no.)		
	Citizenship				Email Address			
	Residency for Tax p	ourposes (Check all that ap	oply)					
		st be a resident of Canada to vestorLine account)	open Social Insu	urance Number		(required by	y Canada Rever	nue Agency)
	☐ U.S.(including U.S	s. citizen)	Tax Ident	ification Number		(please provide a reason if	Tax Identification	n Number is missing)
	☐ Other (please spe	ecify)	Tax Ident	ification Number		(please provide a reason if	Tax Identification	n Number is missing)
	☐ Other (please spe	ecify)	Tax Ident	ification Number		(please provide a reason if	Tax Identification	n Number is missing)
	Reasons for missing	Tax Identification Number	(TIN):					
	☐ 1. I have applie	d for a TIN but have not yet	received one.	□ 2. My ju	risdiction of tax reside	ence does not issue TINs to its resi	dents.	
	☐ 3. Other (please	provide details)						
	If the country of you	ur primary residence does n	ot match with one of	your tax residence	ies listed on this form	n, please either add the country o country of your primary residence	f primary reside	ence as a tax residence OR
		to be reportable as a foreig					A lack of a rec	asonable explanation may
	cause your account	to be reportable as a foreig	ii resident account no	nder to the canada	a kevende Agency (c	KNJ.		
<u>B</u>	ABOUT YOUR	BUSINESS						
	□ Pro □ BN	NO Staff						
	Employment ☐ Full Status ☐ Ret	l-time (30 hours or more pe ired	r week)	□Part-time (Les	s than 30 hours per w	veek) ☐ Self employed ☐ Casual/Contract		employed asonal
	Occupation				Employer Name			
	оссирации				Job			
	Industry				Title			
	Employer's Address							
	Employer's Phone Number							
	4 4							
	a. An insider, dire	spouse/common-law partne ector or senior officer (i.e. an o		e highest paid emp	oloyees) of a publicly tr	aded (exchange or over-the-counte	er) company or a	affiliate of such a company?
	a. An insider, dire Or		officer or one of the fiv			, 3	er) company or a	affiliate of such a company?
	a. An insider, dire Or Individually, o □ Yes	ector or senior officer (i.e. an or or as part of a group, own m	officer or one of the fiv			, 3	er) company or a	offiliate of such a company?
	a. An insider, dire Or Individually, o ☐ Yes ☐ No Compa	ector or senior officer (i.e. an or or as part of a group, own m any Name(s)	officer or one of the fiv	voting rights attacl		, 3	er) company or a	offiliate of such a company?
	a. An insider, dire Or Individually, o Yes No Compa If yes, are you	ector or senior officer (i.e. an or or as part of a group, own m	officer or one of the fiv	voting rights attacl		, 3	er) company or a	offiliate of such a company?
	a. An insider, dire Or Individually, o Yes No Compa If yes, are you Yes No Compa	ector or senior officer (i.e. an our as part of a group, own many Name(s) I a Reporting Insider under (any Name(s)	officer or one of the fivore than 10% of the	voting rights attacl	hed to all voting secu	rities?		
	a. An insider, dire or Individually, o	ector or senior officer (i.e. an our as part of a group, own many Name(s) I a Reporting Insider under (any Name(s) I no Name(s) In combination with other process.	officer or one of the fivore than 10% of the	voting rights attacl	hed to all voting secu	, 3		
	a. An insider, dire or Individually, o	ector or senior officer (i.e. an our as part of a group, own many Name(s) I a Reporting Insider under (any Name(s)	officer or one of the fivore than 10% of the	voting rights attacl	hed to all voting secu	rities?		
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	a. An insider, dire Or Individually, o Individually, o Yes No Compair If yes, are you Yes No Compair No Compair Separately or or affiliate of Yes No Compair Yes No Compair Yes Individually, o Individually, o	ector or senior officer (i.e. and or as part of a group, own many Name(s) I a Reporting Insider under (any Name(s) In combination with other parts any Name(s) any Name(s)	officer or one of the fivore than 10% of the Canadian securities le	voting rights attack	hed to all voting secu	rities?	exchange or ove	er-the-counter) company
	a. An insider, dire or Individually, o Individually, o Yes No Comparifyes, are you Yes No Comparifyes No Comparifyes Yes No Comparifyes Individually, o Yes No Comparifyes	ector or senior officer (i.e. an or as part of a group, own many Name(s) a Reporting Insider under (any Name(s)) in combination with other part (any Name(s)) any Name(s) any Name(s) ar as part of a group, a memany Name(s)	officer or one of the fivore than 10% of the Canadian securities lessersons, a holder of market with controlling i	voting rights attack gislation? nore than 20% of t	hed to all voting secu he outstanding voting y traded (exchange o	rities? g securities of a publicly traded (e	exchange or ove	er-the-counter) company
	a. An insider, dire or Individually, o Yes No Compa If yes, are you Yes No Compa b. Separately or or affiliate of yes No Compa c. Individually, o Yes No Compa 2. Do you have, or e	exector or senior officer (i.e. an or as part of a group, own meany Name(s) and a Reporting Insider under of a Reporting Insider under of any Name(s) any Name(s) any Name(s) ar as part of a group, a memeany Name(s) exercise authority over, any	officer or one of the fivore than 10% of the Canadian securities lessersons, a holder of market with controlling i	voting rights attack gislation? nore than 20% of t	hed to all voting secu he outstanding voting y traded (exchange o	rities? g securities of a publicly traded (e	exchange or ove	er-the-counter) company
	a. An insider, dire or Individually, o Yes No Compa If yes, are you Yes No Compa b. Separately or or affiliate of yes No Compa c. Individually, o Yes No Compa 2. Do you have, or e	ector or senior officer (i.e. an or as part of a group, own many Name(s) a Reporting Insider under (any Name(s)) in combination with other part (any Name(s)) any Name(s) any Name(s) ar as part of a group, a memany Name(s)	officer or one of the fivore than 10% of the Canadian securities lessersons, a holder of market with controlling i	voting rights attack gislation? nore than 20% of t	hed to all voting secu he outstanding voting y traded (exchange o	rities? g securities of a publicly traded (e	exchange or ove	er-the-counter) company
	a. An insider, dire or Individually, o Yes No Compa If yes, are you Yes No Compa b. Separately or or affiliate of Separately or or Individually, o Yes No Compa c. Individually, o Yes No Compa 2. Do you have, or e Yes No Account To No Account To No Account To No Account To No	ector or senior officer (i.e. an or as part of a group, own meany Name(s) and Reporting Insider under of any Name(s) in combination with other passuch a company? The sum of a group, a memany Name(s) are part of a group, a memany Name(s) exercise authority over, any l institution(s): The sum of	officer or one of the fivore than 10% of the Canadian securities lessersons, a holder of mother with controlling in brokerage accounts w	yoting rights attack gislation? nore than 20% of t nterest in a publick	hed to all voting secu he outstanding voting y traded (exchange o	rities? g securities of a publicly traded (e	exchange or ove	er-the-counter) company
	a. An insider, dire or Individually, o Yes No Compa If yes, are you Yes No Compa b. Separately or or affiliate of Separately or or Individually, o Yes No Compa c. Individually, o Yes No Compa 2. Do you have, or e Yes No Account To No Account To No Account To No Account To No	ector or senior officer (i.e. an or as part of a group, own many Name(s) and Reporting Insider under (any Name(s) in combination with other passuch a company? The part of a group, a memory Name(s) are part of a group, a memory Name(s) exercise authority over, any I institution(s):	officer or one of the fivore than 10% of the Canadian securities lessersons, a holder of mother with controlling in brokerage accounts w	yoting rights attack gislation? nore than 20% of t nterest in a publick	hed to all voting secu he outstanding voting y traded (exchange o	rities? g securities of a publicly traded (e	exchange or ove	er-the-counter) company

В	ABOUT YOU	R BUSINESS (continue	·d)						
	4. Will any other person have authority over, or any financial interest in, your account(s)? If another person will have authority over your account(s), please complete our "Authorized Trading Agent or Power of Attorney" form.								
	☐ Yes ☐ No Name:								
	5. Will anyone other than yourself use or direct transactions in this account? This excludes those authorized to give instructions about the account, i.e., Joint Account Holder, Tradin Agent, Power of Attorney and Trustee.								
	Yes If yes, please complete the "Third Party Information"form. Please contact BMO InvestorLine for this form.								
	6. Do you want to add a trusted contact person? If ever we think your account may be at risk for fraud, have concerns about your mental capacity, or need to confirm details about you or your legal representative, we may get in touch with your TCP. They'll have the authority to confirm details about you, but won't be able to make decisions or transact on your account.								
	Yes If yes,	please complete our "Trust	ed Contact Person" form.						
C	SPOUSE or o	common-law partne	er information						
Ť	— Please omit this s	•		ner is the Co-applicant. Co	o-applicants must comp	plete their own materia	I change form if their information		
	has changed.	Last			First				
	Title	Name			Name Employer				
	Occupation				Name				
	Industry								
		MO Staff	eone you live with is emn	loved with an CIRO memb	er firm or related compa	any Please provide a lett	ter of confirmation from the member		
	firm's Compliance	department authorizing this	account(s).	loyed with all elko memo	er min or related compa	my. Fredse provide a lett	er or committation from the member		
D	FINANCIAL	information							
	— Please round to t	he nearest dollar.							
	Annual Income								
	from all sources Net Liquid Assets	(A)							
	(Cash & Securities outstanding again	less loans st securities)							
	Net fixed Assets ((Fixed assets less outstanding again	liabilities							
	Estimated Net Wo	,							
	Source of Annual Income	☐ Employment income ☐ Retirement income	Student loans/bursari	ies or RESP Une	mployment benefits ent Investment i	☐ Social assistance in securities ☐ Other	☐ Alimony (spousal support)		
	Intended use	Short Term Investment	Long Term Investmen		Savings				
_	of the Account	☐ Retirement Savings	L Education Savings	☐ Estate Planning	☐ Other				
E	SIGNATURE								
	•	e and Consent - Your Personal how we collect use dis		Personal Information Vour	choices, and the rights	vou have please see ou	ır Privacy Code (available at		
	To learn more about how we collect, use, disclose and safeguard your Personal Information, your choices, and the rights you have, please see our Privacy Code (available at bmo.com/privacy , or from any of our branches).								
	What is Personal Information? Your Personal Information is information about you that you provided to us or information we collected from other sources such as credit reporting agencies, and includes your								
name, address, age, financial data, Social Insurance Number, employment information, and other information that could be used to identify you. Why do we need your Personal Information?									
We collect and use your Personal Information to:									
Verify your identity; Ensure we have accurate information about you;									
 Understand your financial needs (including your eligibility for products and services you requested or accepted or were pre-approved for) To manage our relationship; 									
	 Protect aga 	inst fraud and manage othe							
	 Understand 	nte with you regarding produ Our customers, including th	rough analytics, and to dev	velop and tailor our produc	cts and services;				
 Comply with legal or regulatory requirements, or as permitted by law; and Respond to questions you may have. 									
We will also use your Personal Information to make decisions in real time by using tools to automate the processing of your Personal Information, for example, whether to approve or decline a trade. These decisions can affect the products, prices, services or features we may offer you and are also used to protect you from fraud.							n, for example, whether to		
		e a trade. These decisions co rsonal Information for a diff	• • • • • • • • • • • • • • • • • • • •	•	e may offer you and are	also used to protect you	J Trom fraud.		

E SIGNATURE (continued)

Sharing your Personal Information

BMO Financial Group consists of Bank of Montreal and its affiliates. Your Personal Information, including information about your authorized representatives and beneficiaries, is shared within BMO Financial Group, to the extent permitted by law, to:

- Ensure we have accurate information about you, and your authorized representatives and beneficiaries;
- Manage our total relationship;
- Provide a better customer experience;
- Meet your needs as they change and grow; and
- · Manage our business.

I certify that the information on this form is true and complete; the information on this form shall supersede information previously provided; and the terms and conditions of my Client Account Agreement remain in effect.

Certification: I certify that the tax information given on this form is correct and complete. I will notify BMO InvestorLine Inc within 30 days of any change in circumstances that causes the information on this form to become incomplete or inaccurate.

 Client
 Date

 Signature
 (YY/MM/DD)