

Contract No.

## **List of Authorized Signatories**

Beneva Inc., P.O. Box 10510, Station Sainte-Foy, Quebec (Quebec) G1V 0A3

## 1. Group Identification Name of Trustees: Account No.: Name of Plan(s): 2. Identification of Signatories Name (in block letters) Title X Signature Authorized for: Web Access Benefits Invoices Funds Title Name (in block letters) X Authorized for: Web Access Benefits Invoices Funds Signature Name (in block letters) Title X Signature Authorized for: Web Access Benefits Invoices Funds Title Name (in block letters) X Authorized for: Web Access Benefits Signature Invoices Funds Name (in block letters) Title X Authorized for: Web Access Benefits Invoices Signature Funds 3. Identification of Authorized External Signatories The plan sponsor also authorizes all employees of its authorized mandatories to act with Beneva Inc. for the following: Name (in block letters) Firm Title X Signature Authorized for: Web Access Benefits Invoices Funds Name (in block letters) Firm Title X Authorized for: Web Access Benefits Invoices Funds Signature Name (in block letters) Firm Title X Authorized for: Web Access Benefits Funds Signature Firm Title Name (in block letters) X Signature Authorized for: Web Access Benefits Invoices Funds Reserved for Beneva Investment Client Services • Tel.: 1 877 841-8822

The copy sent to Beneva constitues the original document

4. Number of Signatures Required	
Benefits:	
Invoices:	
Fund transfer and balancing:	
5. Special Instructions	
6. Authorization of the plan sponsor	
	[Y,Y,Y,Y M,M D,D]
Plan sponsor's representative	Date
7. Authorization of the firm by authorized mandatories (ap	oplies only if you have completed section 3)
Authorized officer	
Authorized officer  Authorized officer	

Reserved for Beneva

Contract No.