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Please complete the information fields below (print clearly). In order to be processed, information must be completed in full.

Registered Account Name(s): _____

Address: _____

City / Province / Postal Code: _____

Use a black or blue pen. Print in CAPITAL letters inside the grey areas as shown in this example.



Reinvestment Plan - Enrollment and Optional Cash Purchase Form

Please refer to the Plan before enrolling.

If you do not check any box, then FULL DIVIDEND REINVESTMENT will be assumed.

Full Dividend Reinvestment:
 Please mark this box if you wish to reinvest all dividends that become payable on this account, on all shares now held or any future holdings.

Optional Cash Purchase

If you wish to make an optional cash purchase at this time, please make your personal certified cheque payable to Computershare Investor Services Inc. No third party cheques will be accepted. Please write the Holder Account Number on your cheque.

This form should ONLY be used for Superior Plus. The enclosed contribution will ONLY be applied to the Holder Account Number.

Attached is a certified cheque for

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Please refer to the Plan to determine your investment dates and the allowable minimum and maximum amounts.

Please note: No interest will be paid on the funds held pending purchase.

By participating in the Plan, I agree to be bound by the terms and conditions of the brochure that governs the Plan. I have read and fully understand the terms and conditions of the Plan. I further agree that my participation in the Plan will continue until I notify Computershare in writing that I desire to terminate my participation in the Plan. Upon providing such notification, I acknowledge that my withdrawal from the Plan will be subject to the terms and conditions of the brochure that governs the Plan.

To be valid, this form must be signed by all registered holders. If you do not sign and return this form, you will continue to receive dividend payments in cash.

Signature 1 - Please keep signature within the box

Signature 2 - Please keep signature within the box

Date - Day Month Year

/ /

Daytime Telephone Number

SECQ

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Privacy Notice

Computershare is committed to protecting your personal information. In the course of providing services to you and our corporate clients, we receive non-public personal information about you - from transactions we perform for you, forms you send us, other communications we have with you or your representatives, etc. This information could include your name, address, social insurance number, securities holdings and other personal and financial information. We use this to administer your account, to better serve your and our clients' needs and for other lawful purposes relating to our services. We have prepared a *Privacy Code* to tell you more about our information practices and how your privacy is protected. It is available at our website, computershare.com, or by writing us at 100 University Avenue, 9th Floor, Toronto, Ontario, M5J 2Y1. Computershare will use the information you are providing on this form in order to process your request and will treat your signature(s) on this form as your consent to the above.

Please return completed form to:

Computershare
100 University Ave, 9th Floor Toronto Ontario M5J 2Y1