FYI

LBS
LIVE
EVENT
SPECIALS

THE ROSWELL INCIDENT:

The Beginning of a Government Cover-Up?

On July 2, 1947, a shining disk-shaped object hurtled through the night sky over Roswell, New Mexico. The next day a local ranch manager, William Brazel, and his two children found widely scattered crash wreckage of unknown origin. Within several days the site had been cordoned off by military personnel, who removed all traces of debris. Since then, secret government documents and interviews with over two dozen military and civilian eyewitnesses have indicated that this incident not only spurred an ongoing systematic investigation of UFO phenomena by the government, but also resulted in a decision at the highest level that, in order to avoid a public panic, "the strictest security precautions should continue without interruption..."

Though an official press statement confirming the recovery of the wreckage was released, a later press statement stated the recovered wreckage was nothing more than a stray weather balloon. Yet U.S. Army Major Jesse Marcel, the intelligence officer in charge of the recovery operation, was convinced the material had nothing to do with weather balloons and identified various objects -- some

covered with a strange form of hieroglyphics -- and types of material unlike anything he had ever seen before.

In 1984 William Moore, co-author of The Roswell Incident, acquired a government document alleged to be a top secret briefing paper prepared in 1952 for president-elect Eisenhower. Outlining the organization of a highly secret panel formed by President Truman to investigate UFO reports, the document also maintains that the remains of four alien bodies were recovered two miles from the Roswell wreckage site. It further names the 12 members of the panel, code-named "Majestic 12," which included then Secretary of Defense James Forrestal and Central Intelligence director Vice Admiral Roscoe Hillenkoetter.

A third name listed among the Majestic 12 is particularly interesting. Dr. Donald Menzel, director of the Harvard College Observatory, is remembered chiefly for his numerous articles and books, such as Flying Saucers, all of which sought to debunk UFO phenomena and explain all such encounters in common sense terms.

Menzel, however, was also involved with the National Security Agency and held a Top Secret Ultra security clearance. The MJ-12 team's astronomical consultant, Menzel's activities as a UFO debunker are thought to confirm another theory regarding the government cover-up, that is, the use of a systematic program of ridicule against those who insist they have had some contact, visual or otherwise, with vehicles or beings from other planets.

While Dr. Menzel continued to throw cold water on civilian claims of UFOs, the Office of Naval Intelligence was preparing such documents as the Top Secret "Analysis of Flying Object Incidents in the U.S." This 19-page paper, dated December 10, 1948 and declassified in 1985, avoided mentioning a possible extraterrestrial source but concluded nevertheless that "some type of flying objects have been observed, although their identification and origin are not discernable."

Moore claims to receive communications and information about ongoing UFO investigations on a regular basis from a network of confidential sources within the government. His explanation for the continual leaking of such classified material is that the government, long afraid of public panic over the existence of extraterrestrial beings, is presently seeking a way to educate the public to the truth behind the UFO phenomena -- that the citizens of Earth are not alone in the universe.

* * *

L B S
L I V E
E V E N T
SPECIALS

LBS COMMUNICATIONS' LIVE EVENT SPECIAL

TO EXPLORE GOVERNMENT SECRECY IN

'UFO COVER-UP?...LIVE' ON OCTOBER 14

LBS Communications will explore the controversy surrounding an alleged government cover-up of the existence of unidentified flying objects in a "Live Event" special entitled, "UFO Cover-Up?...Live." The two-hour special, hosted by Mike Farrell, will air Friday, October 14, 1988, at 8:00 p.m. (EST).

Originating live from Washington, D.C., "UFO Cover-Up?...Live" will present previously classified documents, photographs, and film footage, as well as interviews with high ranking Pentagon officials, members of Congress, scientific experts, and individuals claiming to be UFO eyewitnesses. The show will explore a variety of incidents, ranging from UFO sightings to actual contact with alien beings.

Government and civilian witnesses will also visit actual sites around the world where such phenomena are alleged to have occurred. Experts will range from photo analyst Dr. Bruce Macabee, to Budd Hopkins, who has made a study of people who claim to have been abducted by aliens, to William Moore and Jaime Shandera, who claim to receive

information periodically from officials regarding the government's ongoing secret study of such phenomena. One such official will also describe his firsthand knowledge of the government's meticulous cover-up of UFO investigations over the last four decades.

Viewers will also have the opportunity to express opinions and share their own related experiences during the program via several special telephone lines.

LBS president Paul Siegel notes, "The subject is one that has fascinated people around the world for generations. We plan to present viewers with comprehensive arguments for both sides and allow them to draw their own conclusions. We will also introduce evidence and information that has not previously been disclosed to the general public."

Michael Seligman will serve as executive producer of "UFO Cover-Up?...Live." Seligman has over 100 television events to his credit, including the 1980 and 1984 "Presidential Inaugural Galas," which he produced at the request of the Inaugural Committee, and "Return to the Titanic...Live," the second-highest rated syndicated special in television history.

Curtis Brubaker is supervising producer of the special. The Brubaker Group's activities in the entertainment field include projects with ABC, CBS, and NBC, as well as Paramount and Disney Studios. Brubaker also enjoys an international reputation for his design work and expertise in aeronautics.

Host Mike Farrell is a successful actor, director, writer, and producer, best known for his eight-year stint starring in the television series, "M*A*S*H." Farrell has also starred in such movies of the week as "Memorial Day," "Choices of the Heart," and "Private Sessions." In addition to hosting such documentary specials as "Saving the Wildlife" and "The Best of the National Geographic Specials," he has appeared in PBS' "JFK -- A One-Man Show" and is a tireless activist on behalf of handicapped, veterans' and human rights causes.

"UFO Cover-Up?...Live" is the third "Live Event" special from LBS Communications, following the company's highly successful "Return to the Titanic...Live" and "Mysteries of the Pyramids...Live."

LBS Communications, in addition to its distribution role, will handle ad sales for the telecasts through their TV Horizons division.

* * *

LBS
LIVE
EVENT
SPECIALS

'UFO COVER-UP?...LIVE'

SYNOPSIS

"UFO Cover-Up?...Live," a two-hour television event hosted by Mike Farrell and scheduled to air October 14 at 8:oo p.m. (EST), will explore the controversy surrounding the investigation of unidentified flying objects and allegations of the government's suppression of evidence supporting their existence. The special, produced by LBS Communications Inc. in association with Seligman Productions, will originate live from Washington, D.C.

"UFO Cover-Up?...Live" will examine numerous reports of UFO encounters from all over the world, combining on-site visits and interviews with previously classified documents, photographs, and film footage. Interviews with high-ranking Pentagon officials, members of Congress, scientific experts and eyewitnesses will explore the government's role in controlling the investigation of such reports.

Some of the more famous UFO incidents examined on the show include policeman Lonnie Zamora's sighting of an egg-shaped craft containing several small humanoids outside Socorro, New Mexico, in 1964; astronaut Gordon Cooper's sighting of a UFO during a space flight; and the Betty and

Barney Hill abduction case recounted in the CBS telefilm, "The UFO Incident."

Several additional segments will highlight various other aspects of the UFO phenomenon. An investigation of the government's Project Blue Book will attempt to chronicle the Ridicule Factor, an ongoing campaign to trivialize, ridicule, and/or sensationalize first-hand accounts of UFO encounters.

Photo analysis expert Dr. Bruce Maccabee will report on his examination of key photographs relating to the recent sighting of a UFO over the Pensacola Naval Air Station in Florida.

Budd Hopkins, investigator of alien abduction cases, will explain his theories about such incidents. Abduction victims will also undergo hypnotic regression on the show to explore similar aspects of their experiences.

An extensive examination of the famous Roswell incident, the crash-landing of a flying saucer on July 2, 1947, which allegedly sparked the government's UFO investigation program and decision to suppress all related evidence, will include eyewitnesses from the military units sent in from nearby Roswell Air Force base to recover the wreckage.

William Moore, co-author of The Roswell Incident, and television producer Jaime Shandera will describe their ongoing relationship with confidential government sources who periodically release information to them regarding the

government's secret study of such phenomena. Moore and Shandera will show a classified document signed by President Truman authorizing the formation of a 12-member panel appointed to oversee official inquiries into UFOs as a result of the incident at Roswell.

Finally, one of Moore and Shandera's government contacts will appear live to describe in detail the government's UFO cover-up spanning the last 41 years. Other government officials, from agencies ranging from NASA to the Jet Propulsion Lab, will comment on his revelations.

Throughout the program, special phone numbers will tally calls from viewers regarding their own experiences with UFOs.

SEE REVERSE FOR LIST OF SECURITY FEATURES ON THIS STOCK

LENORA CAMERON
445 HUDSON STREET
WINNIPEG MB R3T 0R1

51

Member Contact Centre-20220622

DATE D D M M Y Y Y Y

PAY TO THE ORDER OF _____ $

VOID

_____ 100 DOLLARS

SCU

Steinbach Credit Union
2100 McGillivray Blvd Winnipeg, MB R3Y 1X2
Phone (204)222-2100
Toll Free 1(800)728-6440

MEMO _____

⑈051⑈ ⑆056779879⑆ 100105155882⑈

Statement of your accounts

April 7, 2024 to May 6, 2024

SCU
STEINBACH CREDIT UNION

www.scu.mb.ca

LENORA CAMERON-ESTATE OF
445 HUDSON STREET
WINNIPEG MB R3T 0R1

Your Account Summary

Date	Account Description	Balance
May 6	Personal Golden Chequing - 100105155882	5,058.34
May 6	High Interest Savings 300 - 300205155882	0.00
May 6	TFSA Savings LENORA - 300305155882	0.00

Your Monthly Activity

Personal Golden Chequing - 100105155882

Unauth OD Int Rate: 21.000% (Nov 1/12)

Date	Transaction Details	Debits	Credits	Balance
Apr 7	Balance Forward			86,545.85
Apr 11	Transfer to 110476351868	40,000.00		46,545.85
Apr 11	Transfer to 110476351868	6,000.00		40,545.85
Apr 11	Transfer to 110476351868	40,000.00		545.85
Apr 30	Credit Interest		1.20	547.05
May 1	Property Taxes WPG-TIPP May/24	277.00		270.05
May 2	Deposit		4,938.23	5,208.28
May 2	Transfer to 110476351868 Liber	149.94		5,058.34
May 6	**Number of Debits/Credits**	**5**	**2**	
May 6	**Value of Debits/Credits**	**86,426.94**	**4,939.43**	
May 6	**Ending Balance**			**5,058.34**

High Interest Savings 300 - 300205155882

Interest Rate: 3.800% (Apr 1/24)

Date	Transaction Details	Debits	Credits	Balance
Apr 7	Balance Forward			0.00
May 6	**Ending Balance**			**0.00**

TFSA Savings LENORA - 300305155882

Interest Rate: 4.050% (Jul 14/23)

Date	Transaction Details	Debits	Credits	Balance
Apr 7	Balance Forward			91,055.47
Apr 19	Eff.APR18 ESTATE PAYOUT	30,657.94		60,397.53
Apr 19	Eff.APR18 ESTATE PAYOUT 11047	30,657.94		29,739.59
Apr 19	Eff.APR18 Closeout ESTATE PAYO	30,657.95		918.36 -
Apr 19	Eff.APR18 Credit Interest		918.36	0.00
May 6	**Number of Debits/Credits**	**3**	**1**	
May 6	**Value of Debits/Credits**	**91,973.83**	**918.36**	
May 6	**Ending Balance**			**0.00**

QTRADE

CORPORATE / NON-PERSONAL ACCOUNT APPLICATION FORM

700 - 1111 West Georgia Street
Vancouver, BC, Canada V6E 4T6
604.605.4199 Toll Free 1.877.787.2330

Internal Use Only: Account #

1. ACCOUNT DETAILS

Account Status: (X) New Account (if you are an existing client provide your online brokerage Client ID #) **OR** ( ) Update to your existing account #

Account Type: ( ) Cash (X) Margin

Features ONLY available with Margin Account *(Select all that apply)*

- [ ] Short Selling
- [ ] Options Trading: [ ] Long Calls and Puts [ ] Spreads [ ] Covered Writing [ ] Uncovered Writing

2. ENTITY INFORMATION

Entity Type: ( ) Corporation ( ) Partnership ( ) Sole Proprietorship (X) Estate ( ) Formal Trust ( ) Investment Club ( ) Association / Society / Lodge ( ) Charity / Not-for-Profit ( )

Legal (Registered) Name of Business or Organization ("Entity")			CRA Business / Trust Number
ESTATE of LENORA CAMERON			
Business Industry	**Business Type**	**Province of Incorp./Reg.**	**Incorp./Reg. Date (dd/mm/yyyy)**
Legal Business Address (PO Box & General Delivery not acceptable)	**City**	**Province**	**Postal Code**
445 HUDSON STREET	WINNIPEG	MANITOBA	R3TORI
Mailing Address (if different from above)	**City**	**Province**	**Postal Code**

The Entity is a tax resident of (select all that apply):

(X) Canada [ ] U.S. Tax Identification Number (TIN) [ ] Other(s): Enter Country Names and Tax Identification Numbers

3. AUTHORIZED PERSON INFORMATION

(X) Mr ( ) Mrs ( ) Ms. ( ) Miss ( ) Dr. GRANT CAMERON — Authorized Person (First, Initial, Last) — Social Insurance Number: 621 548 441

Home Address (PO Box & General Delivery not acceptable)	City	Province	Postal Code	Home Phone
445 HUDSON STREET	WINNIPEG	MB	R3TORI	204-619-3008
Mailing Address (if different from above)	**City**	**Province**	**Postal Code**	**Business Phone**
445 HUDSON STREET	WINNIPEG	MB	R3TORI	204-619-3008
Citizenship (List all countries)	**Email Address**			**Cellular Phone**
CANADIAN	whitehouseuto@gmail.com			

4. INVESTMENT PROFILE

Estimated annual income of Entity from all sources: $ 0

Estimated net worth of Entity:

Net Liquid Assets $ 5000 ** (Cash + securities - loans against securities) + Net Fixed Assets $ 57,000 (Fixed assets less liabilities against fixed assets) = Total Net Worth $ 62,000

5. OTHER INTERESTS IN THE ACCOUNT

With respect to the account, will any other person(s):

Have a financial interest?	(X) No	( ) Yes	If yes, name of other person(s):
Guarantee the account?	(X) No	( ) Yes	If yes, complete a *Guarantee of Account Form*
Have Power of Attorney ("POA")?	(X) No	( ) Yes	If yes, attach the applicable Resolution / TA Form and notarized copy of the original POA
Provide directions to you other than a Trading Authority ("TA") or POA?	(X) No	( ) Yes	If yes, complete the following:

Third Party Name	Third Party Address	Third Party Phone Number	Principal Business or Occupation	Date of Birth (dd/mm/yyyy)	If Corporation: Incorporation #	Place of Incorporation

6. ELECTRONIC FUNDS TRANSFER

Does the Entity wish to enable banking account(s) for Electronic Funds Transfer ("EFT") to and from the Entity's online brokerage account(s)? ( ) No (X) Yes

If yes, please provide a void cheque from the Entity for each banking account you wish to enable. Please note that the banking account(s) information received will apply to all accounts held by the Entity under this registration now, or in the future, unless otherwise advised by you. Banking information can be changed by completing an ***Electronic Funds Transfer (EFT) Set-up Form.*** EFT to and from US$ accounts is not available.

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CORPORATE / NON-PERSONAL ACCOUNT APPLICATION FORM

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Vancouver, BC, Canada V6E 4T6
604.605.4199 Toll Free 1.877.787.2330

7. INFORMATION REQUIRED BY REGULATORS

A. Does the Entity, or if a sole proprietorship or partnership, do you or any partners own or have control or direction over, directly or indirectly, alone or as part of a group, 10% or more of the voting rights of an issuer or publicly traded company or other entity? (X) No ( ) Yes
If yes, please specify the name(s) of the company(ies).

B. The Entity's business relationship with QI is for? ( ) Investment Purposes (X) Other: SELLING STOCK IN ESTATE

C. What is the intended use for the account? ( ) Short-term investing ( ) Business operating expenses ( ) Business growth ( ) Capital preservation

D. Does the Entity trade or intend to trade with other investment firms? (X) No ( ) Yes
If yes, please specify the firm(s).

E. If the Entity is a charity or not-for-profit organization, complete the questions below.
Is the Entity a charity registered with Canada Revenue Agency (CRA) under the income tax act? (X) No ( ) Yes
If not a registered charity, does the Entity solicit charitable financial donations from the public? (X) No ( ) Yes

8. NATIONAL INSTRUMENT 54-101 COMMUNICATION WITH BENEFICIAL OWNERS OF SECURITIES

I have read and understand the Explanation to Clients provided to me in connection with this form and the choices indicated by me below on behalf of the Entity apply to all of the securities held in all accounts held by the Entity under this registration now, or in the future, unless I advise you otherwise in writing. The Explanation to Clients can be found in the *Customer Agreements & Disclosure Documents* booklet (the "Booklet").

Section 1 - Disclosure of Beneficial Ownership Information

Please select the appropriate button below to show whether you **do not object** or **object** to us disclosing your name, address, electronic mail address, securities holdings and preferred language of communication (English or French) to issuers of securities you hold with us and to other persons or companies in accordance with securities law.

(X) **I do not object** to you disclosing the information described above.
( ) **I object** to you disclosing the information described above.

Note: If you object, you will be responsible for any costs associated with delivering securityholder materials to you.

Section 2 - Receiving Securityholder Materials

Please select the appropriate button below to show what materials you want to receive. Securityholder materials sent to beneficial owners of securities consist of the following materials: (a) proxy-related materials for annual and special meetings; (b) annual reports and financial statements that are not part of proxy-related materials; and (c) materials sent to securityholders that are not required by corporate or securities law to be sent.

( ) **I want** to receive **all** securityholder materials sent to beneficial owners of securities.
( ) **I decline** to receive **all** securityholder materials sent to beneficial owners of securities. (Even if I decline to receive these types of materials, I understand that a reporting issuer or other person or company is entitled to send these materials to me at its expense.)
( ) **I want** to receive **only** proxy-related materials that are sent in connection with a special meeting.

Note: These instructions do not apply to any specific request you may give to a reporting issuer concerning the sending of interim financial statements of the reporting issuer. In addition, in some circumstances, the instructions you give in this form will not apply to annual reports or financial statements of an investment fund that are not part of proxy-related materials. An investment fund is also entitled to obtain specific instructions from you on whether you wish to receive its annual report or financial statements, and where you provide specific instructions, the instructions in this form with respect to financial statements will not apply.

Section 3 - Preferred Language of Communication

Please select the appropriate button below to show your preferred language of communication.

(X) **English** ( ) **French**

I understand that the materials I receive will be in my preferred language of communication if the materials are available in that language.

9. CONSENTS AND ACKNOWLEDGEMENTS

A. I acknowledge, understand and agree on behalf of the Entity that: (i) the Canadian securities regulators have granted Qtrade Direct Investing (hereafter referred to as "you") an exemption from the requirement to review trades for suitability, (ii) you will not provide me with any advice or recommendation regarding any security or investment or their purchase or sale nor any legal, tax or accounting advice or recommendation; (iii) you are not responsible for making a suitability determination of my trades and will neither determine my general investment needs and objectives nor review my trades for suitability; (iv) I am solely responsible for my own investment decisions and understand the implications of not having my trades reviewed for suitability; (v) you will not consider my financial situation, investment knowledge, investment objectives and risk tolerance when accepting orders from me; (vi) you and your employees and agents are not authorized to provide me with the aforementioned advice, recommendations or suitability determination, and I will neither solicit nor rely upon any such advice, recommendation or suitability determination from you or any of your employees and agents; and (vii) you and your officers, employees, agents and affiliates will have no liability whatsoever with respect to transactions in or for my account(s) or for my investment decisions.

(X) **I Acknowledge** Note: This account cannot be opened without this acknowledgment.

B. I consent to you sharing information about me and the Entity's account(s) with your affiliates and agents and my referring organization (if any) and its affiliates and agents, and acknowledge and agree that: (i) your affiliates and agents and my referring organization (if any) and its affiliates and agents may use any such shared information in order to better serve my current and future investment and financial services needs, develop and offer suitable products and services to me and better manage their overall relationship with me; (ii) I can revoke this consent such that information will no longer be shared, and (iii) my consent herein is not a condition of you dealing with me.

(X) **I Consent** ( ) **I Do Not Consent**

C. Are you applying for this account in the office of a Canadian Financial Institution?

(X) **No** ( ) **Yes** If yes, I have read the Disclosure in Respect of Securities Related Activities in a Canadian Financial Institution in the Booklet.

10. TREATY DECLARATION (for U.S. Source Income)

The Entity, a resident of Canada, meets all provisions of the Withholding Tax Treaty that are necessary to claim a reduced rate of withholding, including any limitation on benefits provisions, and derives the income within the meaning of section 894 of the Internal Revenue Service Income Tax Code and the regulations thereunder, as the beneficial owner. The Entity meets the requirements of the limitation on benefits provision based on one of the following categories (Select One):

( ) Government
( ) Tax exempt pension trust of pension fund
( ) Other tax exempt organization (Includes Not-for Profit)
( ) Publicly traded corporation
( ) Subsidiary of a publicly trade corporation
( ) Company that meets the ownership and base erosion test (Includes Trusts and Private Companies)
( ) Company that meets the derivative benefits test
( ) Company with an item of income that meets the active trade test or business test
( ) Favorable discretionary determination by the U.S. competent authority received
( ) Other (specify Article and paragraph):
(X) Estate

x _____ EXECUTOR May 20, 24
Authorized Person Signature | Title | Date (dd/mm/yyyy)

Note: For more information, refer to the Explanation of the Limitation on Benefits Treaty Statement in the Appendix

QTRADE

CORPORATE / NON-PERSONAL ACCOUNT APPLICATION FORM

700 - 1111 West Georgia Street
Vancouver, BC, Canada V6E 4T6
604.605.4199 Toll Free 1.877.787.2330

11. SELF-CERTIFICATION FOR CANADIAN ENTITIES

Note: Refer to the Entity Classification Information document in the Appendix for definitions of terms used in this section.

1. Is the Entity a financial institution?

- (●) No — If No, proceed to #3.
- ( ) Yes — If Yes, enter Global Intermediary Identification Number (GIIN) and proceed to #2

GIIN:

2. Does the financial institution meet all the following criteria?

( ) No ( ) Yes If Yes, enter U.S. TIN:

- It is a resident of a non-participating jurisdiction (see http://www.cra-arc.gc.ca/tx/nnrsdnts/nhncdrprtng/crs/jrsdctns-eng.html for the list of participating jurisdictions)
- At least 50% of its gross income is from investing or trading in financial assets
- It is managed by another financial institution

Proceed to Section #12 Agreement

3. Is the Entity a specified U.S. person?

(●) No ( ) Yes If Yes, enter U.S. TIN:

4. Select the option that best describes the Entity. The Entity is:

- ( ) a corporation with shares that regularly trade on an established securities market. It can also be a corporation related to that corporation.
- ( ) engaged in an active trade or business – less than 50% of its gross income is passive income and less than 50% of its assets produce passive income.
- ( ) a government, a central bank or an international organization (or an agency of one).
- ( ) an active non-financial entity other than one described in the previous three options (refer to paragraphs d) to i) of the active non-financial entity definition at the end of this application)
- (●) a passive non-financial entity.

12. AGREEMENT

I the undersigned on behalf of myself and the Entity: (i) certify that the information I have provided in this application is true, complete and accurate and you may rely thereon, and agree to notify you in writing within 30 days of any change that causes the information to be untrue, incomplete or inaccurate; (ii) consent to and authorize you to conduct a credit and/or financial institution reference check with regard to approving my application; (iii) consent to and authorize you to obtain credit or other information about me, to the extent permitted by law; and to give other credit grantors and credit bureaus information about the application and any credit experience with me; (iv) confirm that I have read and understand the Electronic Delivery of Documents Agreement in the Booklet and consent to the electronic delivery of all documents and communications pertaining to my account(s); (v) acknowledge and agree that you may share information you hold relating to my account(s) with your applicable regulators to fulfill your regulatory obligations; (vi) understand and agree that contributions or transferred funds and securities will be valued at current market value when you have received them; and (vii) acknowledge and understand that Qtrade Direct Investing is a division of Credential Qtrade Securities Inc. ("CQSI") an affiliate of Northwest & Ethical Investments L.P., the manager of the Ethical Funds, the NEI Funds and the Northwest Funds, and a related issuer to Fiera Capital Corporation, manager of the Fiera Capital Mutual Funds, and to Desjardins Group. By signing this form, I acknowledge receipt of this disclosure and consent to you effecting transactions for my account(s), as I instruct you from time to time, in mutual funds or other investment products issued, managed or administered by a related or connected issuer to you, including Northwest & Ethical Investments L.P., Fiera Capital Corporation or members of Desjardins Group.

By placing my first order in my account, I acknowledge, confirm and agree that: (i) I have reviewed, understand and agree with the "Privacy Policy", "Terms of Use" and "Security" terms, each of which is found as a footer at the bottom of every page on your securities trading platform website, as well as the terms, conditions and disclosures contained in the Booklet, which contains, among other things, the Account Holder Agreement, the National Instrument 54-101 Explanation to Clients regarding securityholder materials, the Joint Account Agreement, the Risk Disclosure Statement (including leverage risk disclosure), the Electronic Delivery of Documents Agreement, the CQSI Relationship Disclosure (including conflict of interest and related issuer disclosure) and client Complaint Handling Procedures, and is found on the Forms page of your securities trading platform website; (ii) neither you nor any of your affiliates, directors, officers, employees, agents or third party suppliers will be liable to me for, and I agree to indemnify each of you from any harm whatsoever that may arise from, any errors or omissions in connection with my reliance on or use of in any way whatsoever of: (A) market data, research or any other information whatsoever provided to me by you or your third party suppliers; (B) systems, platforms, tools or any other technology services of any kind whatsoever provided to me by you or your third party suppliers; or (C) the handling of, or orders relating to, the purchase, sale, execution or expiration of a security or any matter related thereto by you or any of your third party suppliers; and (iii) my referring organization (if any) has no liability whatsoever in connection with my use of your or your third party supplier's securities trading platform and that I will not undertake any action whatsoever against my referring organization (if any) in connection with my use of your or your third party supplier's securities trading platform.

By signing below, I acknowledge, agree and consent on behalf of the Entity to all of the foregoing under this Agreement section and that the information, acknowledgements, agreements and consents I have provided in this application will apply to all accounts held by the Entity under this registration now, or in the future, except to the extent I advise you otherwise in writing.

x _____ 20/05/2024
Authorized Person Signature — Date (dd/mm/yyyy)

For Margin Trading and/or Short Selling Only: By signing below, I certify and agree on behalf of the Entity that I have received, read, understand and agree to the margin terms and conditions in the Booklet.

x _____ 20/05/2024
Authorized Person Signature — Date (dd/mm/yyyy)

For Options Trading Privileges Only: By signing below, I certify and agree on behalf of the Entity that I have received, read, understand and agree to the options terms and conditions in the Booklet, and I am aware of the risks involved in options trading as outlined in the Booklet under Risk Disclosure Statement and am willing to take those risks.

x _____
Authorized Person Signature — Date (dd/mm/yyyy)

QTRADE

CORPORATE / NON-PERSONAL ACCOUNT APPLICATION FORM

700 - 1111 West Georgia Street
Vancouver, BC, Canada V6E 4T6
604.605.4199 Toll Free 1.877.787.2330

13. REFERRAL INFORMATION (IF APPLICABLE)

Financial Institution Name | Representative Name | Branch Name

Qtrade Direct Investing Partner employees: Work email address:

14. APPROVAL (FOR INTERNAL USE ONLY)

x
Authorized Officer or Branch Manager Signature | Date (dd/mm/yyyy)

x
Options Supervisor | Date (dd/mm/yyyy)

Comments:

15. APPLICATION CHECKLIST

Include the following with your Application Form

Account Funding Instructions (provide at least one):

- ☐ **Cheque**: Payable to "Credential Qtrade Securities Inc." (cheques must be drawn on an account in the name of the Entity)
- ☒ **Cash/Securities Transfer:**
  - ☒ *Authorization to Transfer Investments Form*
- ☐ **Electronic Funds Transfer ("EFT") / Bill Payment**

Corporate Accounts

- ☐ *Certified Resolution for Corporate Accounts Form*
- ☐ Certificate/Articles of Incorporation
- ☐ A copy of documentation from the provincial (or federal) government dated within the last 12 months which contains Corporate Name, Corporate Address, and the name(s) of the Corporation's Director(s). Acceptable documentation may include a Proof of Filing, Transition Application, Articles of Incorporation, or Notice of Articles that contains the above information
- ☐ *Guarantee of Account Form* (margin accounts only).

Unincorporated Company, Association or Organization Accounts (Sole Proprietorships, Partnerships and Associations)

- ☐ *Trading Authorization for Unincorporated Groups Form*
- ☐ Certificate of Registration.

Estates

- ☒ *Estate Supplementary Form*

Investment Clubs

- ☐ *Investment Club Agreement*
- ☐ Confirmation of existence, i.e. club rules, bylaws, meeting minutes, CRA filing, etc.
- ☐ *Guarantee of Account Form* (margin accounts only).

Formal Trusts

- ☐ *Resolution (Formal Trusts) Form*
- ☐ Formal Trust Agreement

Identification (**Note:** ID is not required if you have an existing account with us)

To comply with the Proceeds of Crime (Money Laundering) and Terrorist Financing Act, we are required to verify the identity of all persons involved with an account. Identification is captured on the supplementary forms based on the Entity type.

A photocopy of ID **and** a verified ID method are required for each person (applicant, beneficial owner, trading authority and/or power of attorney).

1. Photocopy of valid (not expired) Federal, Provincial or Territorial Government photo ID:

○ Passport ⊗ Driver's License (front and back) ○ Other ID Type (Acceptable ID must have a unique identifier, photo and legal name)

2. Verified Identification Method (select either Single Process Credit File or Dual Method)

○ Single Process Credit File (must be derived from more than 1 source and in existence for at least 3 years) – we will obtain the credit file report

○ Dual Method (In addition to the photocopy of Photo ID provided in item 1 above, select one of the following options):

- ☐ Credit File (must be derived from more than 1 source and in existence for at least 6 months but less than 3 years) – we will obtain the credit file report
- ☒ Bank/Credit account statement (must be current and show legal name and account number) **or** Personal Cheque (counter cheques, bank drafts or money orders are not acceptable for identity verification) – we will verify each person's identity by clearing a personal cheque payable to Credential Qtrade Securities Inc., for a minimum of $10, for deposit to your account.
- ☐ Document from a reliable and independent source – Provide a recent, and un-altered paper or electronic file of a document, received directly from the issuer, showing each person's name and address from a:
  - Canadian government (e.g. CRA Notice of Assessment)
  - Canadian utility (e.g. a utility bill for electricity, gas, water or telecommunications)

US Citizens and Residents:

- ☐ Form W9 and *Waiver of Client Confidentiality* (both available on our online brokerage website). Include Social Security Number or Employee Identification Number.

Mail or deliver the original copy of the application with all necessary additional forms and documents (i.e. supplementary forms, trading authorizations, valid photo ID and verified identification method) to:

Qtrade Direct Investing
700 - 1111 West Georgia Street
Vancouver, BC, Canada V6E 4T6
604.605.4199 Toll Free 1.877.787.2330

Note: We are unable to accept faxed copies.
Once your account is open, you will receive a Welcome Package containing all the necessary information to manage your account via either: (1) email (where email address was provided); or (2) mail.
Cleared funds must be in your account to fully cover your first purchase.

FOR FURTHER INFORMATION VISIT US ONLINE OR EMAIL INFO@QTRADE.CA OR CALL 1.877.787.2330

QTRADE

ESTATE SUPPLEMENTARY FORM

(To be completed by each Executor of the Estate)

700 - 1111 West Georgia Street
Vancouver, BC, Canada V6E 4T6
604.605.4199 Toll Free 1.877.787.2330

4.1 INFORMATION ON EXECUTOR (REQUIRED BY REGULATORS)

(X) Mr. ( ) Mrs. ( ) Ms. ( ) Miss ( ) Dr.

Social Insurance Number: 621 545 441

Name (First, Initial, Last): GRANT R. CAMERON

Contact Number: 204-619-3008

Email Address: whitehouseute@gmail.com

Home Address: 445 HUDSON STREET

City: WINNIPEG

Province: MB

Postal Code: R3TOR1

Citizenship (List all countries): CANADIAN

Country of Residence: CANADA

Occupation: RETIRED

Employer:

Date of Birth (dd/mm/yyyy): 01/01/1954

A. Are you or any member of your immediate family a Politically Exposed Person (PEP) or Head of International Organization (HIO), or a close associate of a PEP or HIO, as defined on the PEP and HIO form? (X) No ( ) Yes — If yes, complete a PEP and HIO form.

B. Do you own, or have control or direction over, directly or indirectly, alone or as part of a group, 10% or more of the voting rights of an issuer or publicly traded company or other entity? (X) No ( ) Yes — If yes, specify name(s) of company(ies) and % owned. %

C. Are you a Director or Senior Officer, or an individual performing similar functions, of an issuer or publicly traded company or other entity whose shares trade on a marketplace? (X) No ( ) Yes — If yes, specify name(s) of company(ies).

D. Are you, your spouse, or any member of your household an employee, Director, Partner or Officer of a securities dealer? (X) No ( ) Yes — If yes, specify name(s) of security dealer(s).

E. In which of the following do you have investment experience?

[ ] None [ ] Mutual Funds [X] Stocks [ ] Bonds **Options:** [ ] Long Calls or Puts [ ] Covered Writing [ ] Spreads [ ] Uncovered Writing

F **Identification:** Required for each Executor. Include a legible photocopy of valid government issued photo ID and select from the Verified Identification Methods below.

Photo ID: ( ) Passport (X) Driver's License (front & back) ( ) Other ID Type & Number (Acceptable ID must have Unique Identifier, Signature and Expiry Date)

Verified Identification Methods (select either Credit File* or Dual Method):

(X) Credit File* (must be in existence for at least 3 years) *Note – Qtrade will obtain the credit file report

( ) Dual Method (select 2 of the following): [ ] Credit File* (at least 6 months to 3 years old) [ ] Personal Cheque (minimum $10, payable to Credential Qtrade Securities Inc.) [ ] Reliable document (CRA Assessment, Utility bill)

I represent and warrant that the information provided herein is accurate and complete and that I have read and understand the terms and conditions of Qtrade's agreements governing the Estate's account(s) and acknowledge that Qtrade will not review any orders for suitability. Without this consent Qtrade will not open this account.

(X) I Consent ( ) I Do Not Consent

x [signature] Signature

Date (dd/mm/yyyy): May 20, 2024

4.2 INFORMATION ON EXECUTOR (REQUIRED BY REGULATORS)

( ) Mr. ( ) Mrs. ( ) Ms. ( ) Miss ( ) Dr.

Social Insurance Number

Name (First, Initial, Last) Contact Number Email Address

Home Address City Province Postal Code

Citizenship (List all countries) Country of Residence Occupation Employer Date of Birth (dd/mm/yyyy)

A. Are you or any member of your immediate family a Politically Exposed Person (PEP) or Head of International Organization (HIO), or a close associate of a PEP or HIO, as defined on the PEP and HIO form? ( ) No ( ) Yes — If yes, complete a PEP and HIO form.

B. Do you own, or have control or direction over, directly or indirectly, alone or as part of a group, 10% or more of the voting rights of an issuer or publicly traded company or other entity? ( ) No ( ) Yes — If yes, specify name(s) of company(ies) and % owned. %

C. Are you a Director or Senior Officer, or an individual performing similar functions, of an issuer or publicly traded company or other entity whose shares trade on a marketplace? ( ) No ( ) Yes — If yes, specify name(s) of company(ies).

D. Are you, your spouse, or any member of your household an employee, Director, Partner or Officer of a securities dealer? ( ) No ( ) Yes — If yes, specify name(s) of security dealer(s).

E. In which of the following do you have investment experience?

[ ] None [ ] Mutual Funds [ ] Stocks [ ] Bonds **Options:** [ ] Long Calls or Puts [ ] Covered Writing [ ] Spreads [ ] Uncovered Writing

F **Identification:** Required for each Executor. Include a legible photocopy of valid government issued photo ID and select from the Verified Identification Methods below.

Photo ID: ( ) Passport ( ) Driver's License (front & back) ( ) Other ID Type & Number (Acceptable ID must have Unique Identifier, Signature and Expiry Date)

Verified Identification Methods (select either Credit File* or Dual Method):

( ) Credit File* (must be in existence for at least 3 years) *Note – Qtrade will obtain the credit file report

( ) Dual Method (select 2 of the following): [ ] Credit File* (at least 6 months to 3 years old) [ ] Personal Cheque (minimum $10, payable to Credential Qtrade Securities Inc.) [ ] Reliable document (CRA Assessment, Utility bill)

I represent and warrant that the information provided herein is accurate and complete and that I have read and understand the terms and conditions of Qtrade's agreements governing the Estate's account(s) and acknowledge that Qtrade will not review any orders for suitability. Without this consent Qtrade will not open this account.

( ) I Consent ( ) I Do Not Consent

x Signature

Date (dd/mm/yyyy)

QTRADE

ESTATE SUPPLEMENTARY FORM

700 - 1111 West Georgia Street
Vancouver, BC, Canada V6E 4T6
604.605.4199 Toll Free 1.877.787.2330

1. TRADING AUTHORITY INFORMATION

LENORA CAMERON ESTATE

Estate Account Name

Please be advised that the Estate has appointed GRANT R. CAMERON

Executor 1 (First, Initial, Last) Executor 2 (First, Initial, Last)

(hereafter referred to as "Attorney" or, collectively "Attorneys") to act on behalf of the Estate as Attorney with respect to transactions in the Qtrade Direct Investing ("Qtrade") account(s), in accordance with the conditions set out in this document as follows:

1. The Estate's appointment of an Attorney and any actions taken by such Attorney are governed by the *Customer Agreements & Disclosure Documents* which both the Attorney and the undersigned Executor have read and agree to be bound by. The Estate's appointment of an Attorney will not, unless specifically directed otherwise, revoke any existing power of Attorney and;

2. Qtrade is hereby authorized to accept and act upon the instructions of such Attorney to:

   A. purchase securities of whatsoever nature or kind, including options and foreign exchange contracts (hereinafter collectively called "securities"), on margin or otherwise;

   B. sell (including short sales), assign, pledge, transfer, hypothecate or otherwise dispose of any securities held by Qtrade for the Estate whether or not registered in the name of the Estate;

   C. make, execute and deliver all necessary agreements (including any account operating or trading agreements), documents, instruments, acts of assignment, pledges, transfers and hypothecations as may relate to any securities transactions or any borrowings or advances or any obligations heretofore, now or hereafter incurred by the Estate, as may be required by Qtrade;

   D. borrow money on the credit of the Estate by obtaining loans or advances or as overdrafts whether by deed of loan or acknowledgement of debt or by any other means whatsoever;

   E. assign, transfer, convey, hypothecate, mortgage, pledge, charge or give security in any manner upon all or any real or personal property or other assets, movable or immovable, present or future, of the Estate to secure any such obligations of the Estate;

   F. receive any securities or property held on behalf of the Estate by Qtrade and to execute and deliver drafts or receipts for money or securities or other property and to verify and settle all books and accounts between the Estate and Qtrade, to secure any such obligations of the Estate;

   G. receive payment or sign, make, execute, deliver, issue, accept, endorse, negotiate or discount any cheque, promissory note, bill of exchange or other negotiable instrument (including orders for the payment of money payable to the individual order of any signing officer(s) of the Estate); and

   H. receive, sign and approve any withdrawal, document, voucher, bill of exchange, account statement and any documents or papers relating thereto and to reconcile any amounts pertaining to the operation of any such accounts.

3. Any and all transactions for the Estate's account(s) and any documents in connection therewith heretofore or hereafter executed by an Attorney on behalf of the Estate are hereby ratified and confirmed.

4. All acts and things done and instruments of payment, agreements or other documents signed or purporting to be signed on behalf of the Estate in the manner set forth in this resolution shall be valid and binding upon the Estate.

5. The Executor(s) hereby delegate any and all authority to the Attorney(s) named herein.

6. The Estate agrees that the foregoing instruction shall remain in full force and effect until notification to the contrary has been received in writing by Qtrade and until such notification, all that the Attorney shall do or purport to do by virtue hereof is fully ratified and confirmed.

7. The Estate expressly agrees that all such transactions handled by Qtrade are at the Estate's risk and the Estate undertakes to hold Qtrade harmless and indemnify Qtrade against all costs, damages and losses, including legal costs arising out of any such transactions; and

8. Qtrade will not notify the Estate if its Attorney(s) performs any of the above transactions since they have the same effect as if undertaken by the Estate. Please ensure the Executor(s) is aware of the permissions granted of any financial institution account that has been set up for electronic funds transfer.

2. AUTHORIZATION

I the undersigned, certify that:

The authorized Attorney(s) of the Estate for the purpose of operating the Estate account(s) with Qtrade are listed above. The names and information pertaining to each Attorney along with the specimen signature(s), of such persons are attached.

GRANT R. CAMERON — x [signature] — Executor Signature — 21/OCT/2024 — Date (dd/mm/yyyy)

Executor Name (First, Initial, Last)

Executor Name (First, Initial, Last) — x — Executor Signature — Date (dd/mm/yyyy)

Executor Name (First, Initial, Last) — x — Executor Signature — Date (dd/mm/yyyy)

3. INFORMATION ON BENEFICIARIES (REQUIRED BY REGULATORS)

Please list the names and addresses for all Beneficiaries of the Estate (if more than 5 beneficiaries, attach an additional page).

Beneficiary Name (First, Initial, Last)	Address
GRANT R. CAMERON	445 HUDSON STREET, WINNIPEG, MB, R3T0E1
SANDRA L. CAMERON	2 VERRIER PLACE, WINNIPEG, MB, R3T 1T5
PATRICIA A OSADCHUK	91 EAGLEMONT CRES, WINNIPEG, MB R3P 1V3

Credential Securities

Estate Letter of Direction and Indemnity - Non-Registered Account

To: Credential Qtrade Securities Inc. ("Credential Securities")

This Estate Letter of Direction and Indemnity is provided by the undersigned in respect of the estate of LENORA CAMERON (the "Deceased") and the account listed below, held in the name of the Deceased at Credential Securities.

Account Number _____ (the "Account")

1. The undersigned hereby represent(s) and warrant(s) that:
   (a.) the Deceased was the owner of the Account;
   (b.) the undersigned is/are the executor(s) of the Deceased's estate pursuant to the valid last will and testament of the Deceased, order of probate, administration or equivalent of a court of competent jurisdiction;
   (c.) the undersigned is entitled and authorized to give instructions in respect of and to settle the Deceased's estate pursuant to (***select ONE and attach applicable documents***):
   - ☑ the attached notarized copy of an order of a court of competent jurisdiction granting probate, administration or equivalent;
   - ☐ the attached notarized copy of the valid last will and testament of the Deceased, for which no grant of probate, administration or equivalent has been obtained and the undersigned have not sought, have no intention to seek and are not aware of any other person having sought or intending to seek; or
   - ☐ applicable laws governing intestate succession; which entitlement and authority has not been revoked or altered; and

2. The undersigned hereby direct(s) Credential Securities to *(complete ONE option)*:
   (a.) Redeem the assets in the Account and pay the proceeds to the Deceased's estate in cash as follows
   - ☒ by cheque sent to: 445 HUDSON STREET WINNIPEG MB R3T0R1 (mailing address)
   - ☒ by electronic funds transfer to an estate bank account *(attach a VOID cheque or other valid banking confirmation)*; or

   (b.) transfer the assets in the Account to a corresponding Estate of Trading account as follows *(for probated estates only)*:
   - ☐ to Credential Securities Account: _____
     - ☐ in cash (redeem) ☐ in kind (as is) ☐ mix *(attach a separate letter with instructions)*
   - ☒ to an account at an external institution *(attach a transfer form completed by the receiving institution)*.
     - ☐ in cash (redeem) ☒ in kind (as is) ☐ mix *(attach a separate letter with instructions)*

3. The undersigned hereby acknowledge(s) and agree(s) that:
   (a.) Credential Securities may charge and deduct from the assets of the Account an estate fee in the amount of $ 250.00 (per applicable fee schedule) plus applicable taxes and commissions and any disbursements that may be incurred in the course of redeeming or transferring the assets in the Account as directed by the undersigned;
   (b.) the undersigned hereby covenant(s) and agree(s), in consideration of the redemption and payment or transfer of the assets in the Account as directed by the undersigned, at all times hereafter, to hold harmless, indemnify and keep indemnified Credential Securities from and against all actions, suits, claims, demands, costs (including any legal costs), charges, expenses and other liabilities that are now or may at any time hereafter be made, brought or claimed against Credential Securities, in respect of the investing, redemption and payment or transfer of the assets in the Account by Credential Securities as directed by the undersigned, and
   (c.) this Letter of Direction and Indemnity shall enure to the benefit of the successors and assigns of Credential Securities, and shall bind the estate of the Deceased and the heirs, executors, administrators, successors and assigns of the undersigned.

Dated this 20 day of May, 2024.

Name (please print)	Signature	Mailing Address
GRANT CAMERON	X [signature]	445 HUDSON ST. WINNIPEG MB R3T0R1
	X	
	X	
	X	

Credential Securities is a division of Credential Qtrade Securities Inc., Member of the Canadian Investor Protection Fund

TEL: 1.855.714.3900 FAX: 604.714.3901
EMAIL: service@credential.com

Credential Securities

Entity Stakeholder Information

To be completed by all Trading Authorities, Trustees, Settlors, Partners, Members, Executors, Beneficiaries of more than 10% of a Trust and Beneficial Owners of 25% or more of a Corporation or similar Entity

Are you a (select all that apply): ☐ Trading Authority ☐ Trustee ☐ Settlor ☐ Partner/Member ☒ Executor
☐ Beneficial Owner ☐ Beneficiary If a Beneficiary or Beneficial Owner, specify percentage _____%

First Name	Middle Name	Last Name	Contact Number	Email Address
GRANT	ROBERT	CAMERON	204-619-3008	Whitehousedto@gmail.com

Address	City	Province	Postal Code
445 HUDSON STREET	WINNIPEG	MB	R3T0R1

Employer Name	Type of Business / Industry	Occupation / Job Title
-	-	RETIRED

Citizenship	Country of Residence	Social Insurance Number (required if not meeting in person)	Date of Birth (mm/dd/yyyy)
1. CANADIAN 2.	CANADA	621 545 441	01/01/1954

A. Are you a tax resident of: ☒ Canada ☐ U.S.: _____ ☐ Other: _____
(select all that apply)
Tax Identification Number (TIN) List all Country Names and Tax Identification Numbers
Note: You are considered a US tax resident if you are a US resident or citizen. US tax residents must include an IRS Form W9.

B. Are you or any member of your immediate family a Politically Exposed Person (PEP) or Head of International Organization (HIO), or a close associate of a PEP or HIO, as defined on the *PEP and HIO form*? ☒ No ☐ Yes If yes, complete a *PEP and HIO form*.

C. Are you an "insider," "reporting insider," or Affiliate of any publicly traded company for purposes of applicable securities regulations? You are responsible for knowing the securities rules that apply to you, but you may be a "reporting insider" if you are a CEO, CFO, or COO of the reporting issuer or major subsidiary of the reporting issuer, a significant shareholder, director of the board of the reporting issuer, or have responsibility for a principal business unit, or division of the reporting issuer whose shares trade on any Canadian exchange. If yes, specify the security symbol.

☒ No ☐ Yes Security Symbol: _____

D. Do you either individually or as part of a group, own 10% or more of the voting rights of a publicly traded company? If yes, specify the security symbol.

☒ No ☐ Yes Security Symbol: _____

E. Do you either individually or as part of a group, own 20% or more of the voting rights of a publicly traded company? If yes, specify the security symbol.

☒ No ☐ Yes Security Symbol: _____

F. Are you, your spouse or any member of your household an employee, Director, Partner or Officer of a securities dealer? If yes, specify the security dealer.

☒ No ☐ Yes Securities Dealer: _____

Household Member: Name _____ Securities Dealer _____

G. a. How would you rate your investment knowledge?

☐ Sophisticated ☐ Average ☒ Limited ☐ None

b. In which of the following do you have investment experience?

☒ Stocks ☐ Bonds ☐ Mutual Funds ☐ None

H. **Identification:** Required for each Trading Authority, Trustee, Settlor, Partner/Member, Executor, Beneficiary of more than 10% of a Trust and Beneficial Owner of 25% or more of a Corporation or similar Entity.
If you are meeting with the Advisor in person, provide them with an original, valid, government issued photo ID.
If you are not meeting with the Advisor in person, provide a legible copy of valid, government issued photo ID. Your identity will be verified by referring to a Canadian credit file. If your identity cannot be verified, the Advisor will provide you with alternative identity verification options.

ID Type	ID Number	Jurisdiction	Expiry Date (mm/dd/yyyy)

Authorization

By signing below, you hereby declare that the information provided above is full, true and complete. You also acknowledge that you have reviewed a copy of the Credential Securities *Account Agreement and Disclosure Document* booklet and agree to the terms therein. Credential Securities may rely on the information you have provided until you send us written notice of any changes.

X _____ May 20, 2024
Signature Date (mm/dd/yyyy)

Investment Advisor Authorization

_____ _____ X _____ _____
Investment Advisor Name IA Code Investment Advisor Signature Date (mm/dd/yyyy)

I confirm I have met with the individual in person to view their original photo ID document in order to verify their identity:

_____ _____
Advisor/CQSI Registrant Name Date (mm/dd/yyyy)

Manitoba CANADA

CERTIFICATE OF DEATH
CERTIFICAT DE DÉCÈS

D403162

Name of Deceased/Nom du défunt
CAMERON, LENORA BEOVOLINE

Date of Death/Date du décès
AUGUST 8, 2023

Age/Âge
94 YEARS

Sex/Sexe
F

Place of Death/Lieu de décès
WINNIPEG

Registration No./N° d'enregistrement
2023-06-006708

Date of Registration/Date d'enregistrement
AUGUST 11, 2023

ISSUED/DÉLIVRÉ
SEPTEMBER 15, 2023

CERTIFIED EXTRACT FROM THE REGISTRATION OF DEATH
ISSUED AT WINNIPEG

EXTRAIT OFFICIEL DU BULLETIN D'ENREGISTREMENT DE DÉCÈS
DÉLIVRÉ À WINNIPEG

P Lorentz

Pam Lorentz
Director / Directrice

To All to Whom These Presents May Come, Be Seen or Known

I, KYLA KAVANAGH, A NOTARY PUBLIC IN AND FOR THE PROVINCE OF MANITOBA, BY ROYAL AUTHORITY DULY APPOINTED, residing at the City of Winnipeg, in the said Province, DO CERTIFY AND ATTEST that the paper writing hereunto annexed is a TRUE COPY of a document produced to me and purporting to be:

GRANT OF PROBATE regarding the Estate of LENORA BEVOLINE CAMERON, also known as LENORA BEOVOLINE CAMERON, Issued by the Order of the Honourable Justice S. Lanchberry, Justice of the Court of King's Bench, Winnipeg, Manitoba as File No. PR23-01-31923 and dated the 16th day of January, 2024.

THE ATTACHED COPY conforms to the original document which has not been altered in any way, shape or form.

THE ATTACHED COPY having been compared by me with the original document, an act whereof being requested, I HAVE GRANTED the same under my notarial form and seal of office to serve and avail as occasion shall or may require.

IN TESTIMONY WHEREOF I have hereto subscribed my name and affixed my seal of office at the City of Winnipeg, in Manitoba, this 23rd day of January, 2024.

KYLA KAVANAGH
A Notary Public in and for the Province of Manitoba

WOLSELEY LAW LLP
120 Sherbrook Street
Winnipeg, Manitoba
R3C 2B4

TELEPHONE: 204.977.1706

To All to Whom These Presents May Come, Be Seen or Known

I, KYLA KAVANAGH, A NOTARY PUBLIC IN AND FOR THE PROVINCE OF MANITOBA, BY ROYAL AUTHORITY DULY APPOINTED, residing at the City of Winnipeg, in the said Province, DO CERTIFY AND ATTEST that the paper writing hereunto annexed is a TRUE COPY of a document produced to me and purporting to be:

GRANT OF PROBATE regarding the Estate of LENORA BEVOLINE CAMERON, also known as LENORA BEOVOLINE CAMERON, Issued by the Order of the Honourable Justice S. Lanchberry, Justice of the Court of King's Bench, Winnipeg, Manitoba as File No. PR23-01-31923 and dated the 16th day of January, 2024.

THE ATTACHED COPY conforms to the original document which has not been altered in any way, shape or form.

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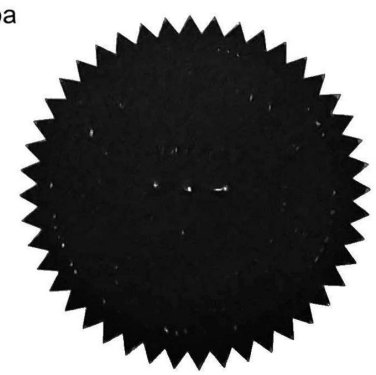
IN TESTIMONY WHEREOF I have hereto subscribed my name and affixed my seal of office at the City of Winnipeg, in Manitoba, this 23rd day of January, 2024.

KYLA KAVANAGH
A Notary Public in and for the Province of Manitoba

WOLSELEY LAW LLP
120 Sherbrook Street
Winnipeg, Manitoba
R3C 2B4

TELEPHONE: 204.977.1706



THE KING'S BENCH

Winnipeg Centre

IN THE ESTATE OF:

LENORA BEVOLINE CAMERON,
also known as LENORA BEOVOLINE CAMERON

deceased

GRANT OF PROBATE

WOLSELEY LAW LLP
120 Sherbrook Street
Winnipeg, Manitoba, R3C 2B4

Attention: Kyla Kavanagh

Telephone No. 204-977-1706
Facsimile No. 866-880-8506

THE KING'S BENCH
Winnipeg Centre

GRANT OF PROBATE

By order of the Honourable Justice S. LANCHBERY,
of the Court of King's Bench, dated January 16, 2024, probate is hereby granted to Grant Robert Cameron of Winnipeg, Manitoba, the alternate executor (or as the case may be) named in the last will and testament (a copy of which is attached), of LENORA BEVOLINE CAMERON, also known as LENORA BEOVOLINE CAMERON of Winnipeg, Manitoba, who died on or about August 8th, 2023 and the administration of all the property of the deceased is hereby granted to the alternate executor, the named executor having predeceased.

DATED at Winnipeg, Manitoba, this 16 day of January, 2024.

By the Court

Deputy Registrar

THIS IS THE LAST WILL AND TESTAMENT of me, **LENORA BEVOLINE CAMERON** of the City of Winnipeg, in Manitoba, Retired.

1. I HEREBY REVOKE all Wills and testamentary dispositions of every nature and kind whatsoever by me heretofore made.

2. I NOMINATE, CONSTITUTE AND APPOINT my husband, **ROBERT FREDERICK CAMERON** of the City of Winnipeg, sole Executor and Trustee of this my Will, but if my said husband should predecease me, or die within a period of thirty days following my decease, or without having proved this my Will, or if he should relinquish his right to act as my Executor then, I NOMINATE, CONSTITUTE AND APPOINT my son, **GRANT ROBERT CAMERON** to be the Executor and Trustee of this my Will in the place and stead of my said husband. I hereinafter refer to my Executor and Trustee for the time being as my "Trustee".

3. I GIVE, DEVISE AND BEQUEATH all my property of every nature and kind and wheresoever situate, including any property over which I have a general power of appointment, to my said Trustee upon the following trusts, with the following powers, namely:

a) To use his or her discretion in the realization of my estate, with power to my Trustee to sell, call in and convert into money any part of my estate not consisting of money at such time or times, and either for cash or credit or for part cash and part credit as my said Trustee may in his or her uncontrolled discretion decide upon, or to postpone such conversion of my estate

K. SANDISON
DEPUTY REGISTRAR
COURT OF KING'S BENCH
FOR MANITOBA

or any part or parts thereof for such length of time as he or she may think best, and I hereby declare that my Trustee may retain any portion of my estate in the form in which it may be at my death (notwithstanding that it may not be in the form of an investment in which trustees are authorized to invest trust funds, and whether or not there is a liability attached to any such portion of my estate) for such length of time as my said Trustee may in his or her discretion deem advisable and my Trustee shall not be held responsible for any loss that may happen to my estate by reason of so doing.

b) To pay my just debts, funeral and testamentary expenses, and to pay or transfer the residue of my estate to my said husband if he survives me for a period of thirty days, for his own use absolutely.

c) If my said husband should predecease me or should survive me but die within a period of thirty days after my death, I direct my Trustee:

(i) To pay out of and charge to the capital of my general estate my just debts, funeral and testamentary expenses and all estate and inheritance and succession duties or taxes whether imposed by or pursuant to the law of this or any other jurisdiction whatsoever that may be payable in connection with any property passing (or deemed so to pass by any governing law) on my death or in connection with any insurance on my life or any gift or benefit given or conferred by me either during my lifetime or by survivorship or by this my Will or any Codicil thereto and whether such duties or taxes be payable in respect to estates or interests which fall into possession at my death or at any subsequent time; and I hereby authorize my Trustee to commute or prepay any such taxes or duties. This direction shall not extend to or include any such taxes that may be payable by a purchaser or transferee in connection with any property transferred to or acquired by such purchaser or transferee upon or after my death pursuant to any agreement with respect to such property.

(ii) To dispose of my personal effects in accordance with a memorandum in writing attached to this my Last Will and Testament, prior to disposing of the residue of my

K. SANDISON
DEPUTY REGISTRAR
COURT OF KING'S BENCH
FOR MANITOBA

estate as hereinbefore set forth.

(iii) To pay and transfer the residue of my estate to my children, in equal shares, or to their issue should any child predecease me, per stirpes.

4. IN CASE my beneficiaries shall all die before the whole of the remaining residue to be distributed shall have become vested in possession in my beneficiaries, upon the death of the survivor of my said beneficiaries as hereinbefore provided or upon my death, whichever shall last occur, then that part of my estate which does not go or devolve on any living person or persons under the preceding conditions of this my Will, shall go and devolve according to the laws of the Province of Manitoba as such relate to intestate successions, and I GIVE, DEVISE AND BEQUEATH accordingly.

5. I DIRECT that my right and interest in any Registered Retirement Savings Plan, Registered Deferred Profit Sharing Plan, or Income Averaging Annuity Contract in which I am a participant at the time of my death, including all rights to receive any refund or premiums, be transferred and paid to my said spouse if he is then alive, for his own use absolutely, and I DECLARE that the terms Registered Retirement Savings Plan, Deferred Profit Sharing Plan, Income Averaging Annuity Contract and Refund or premiums shall have the same meaning as in "The Income Tax Act".

IF ANY PERSON should become entitled to any share

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DEPUTY REGISTRAR
COURT OF KING'S BENCH
FOR MANITOBA

in my estate before attaining the age of 18 years, the share of such person shall be held and kept invested by my Trustee and the income and capital or so much thereof as my Trustee in his or her absolute discretion considers necessary or advisable shall be used for the benefit of such person until he or she attains the age of 18 years.

7. I AUTHORIZE my Trustee to make any payments for any person under the age of 18 years to a parent or guardian of such person whose receipt shall be a sufficient discharge to my said Trustee.

8. I HEREBY DECLARE that my Trustee when making investments for my estate shall not be limited to investments authorized by law for trustees but may make any investments which in his or her uncontrolled discretion he or she considers

K. SANDISON
DEPUTY REGISTRAR
COURT OF KING'S BENCH
FOR MANITOBA

advisable and my said Trustee shall not be liable for any loss that may happen to my estate in connection with any such investment made him or her in good faith.

IN TESTIMONY WHEREOF I have, to this my Last Will and Testament, hereunder subscribed my name this 18 day of February, 1988.

SIGNED, PUBLISHED AND DECLARED by the said Testatrix, **LENORA BEVOLINE CAMERON**, as and for her Last Will and Testament, in the presence of us, both present at the same time, who at her request and in her presence and in the presence of each other, have hereunto subscribed our names as witnesses.

Lenora Cameron

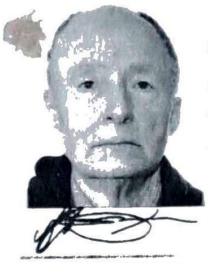
K. SANDISON
DEPUTY REGISTRAR
COURT OF KING'S BENCH
FOR MANITOBA

Manitoba

DRIVER'S LICENCE
PERMIS DE CONDUIRE
M.P.I. INSURANCE CERTIFICATE
CERTIFICAT D'ASSURANCE DE LA S.A.P.M.

MB
CAN

1,2 CAMERON
GRANT R



8 445 HUDSON STREET
WINNIPEG MB R3T 0R1

4d LICENCE/PERMIS CA-ME-RG-R463BA

4a ISS/DÉL 2024/04/30
4b EXP 2029/04/30
DATE CODES/CODES DES DATES

5 DD/RÉF 317426868
9 CLASS STAGE/CLASSE ÉTAPE 5F
9a END/ENDOSS N

18 EYES/YEUX GRN/VRT
12 RESTRICTIONS 1
15 GENDER/GENRE M
16 HGT/HAUT 180 cm

CA-ME-RG-R463BA
1954/01/01

3 DOB/DDN 1954/01/01

I HEREBY CERTIFY THIS TO BE A TRUE
AND CORRECT COPY OF THE ORIGINAL

DATE: 2024-05-17

SIGNED:
FUNMILAYO E. TAIWO

Funmilayo E.Taiwo
A Notary Public in and for
the Province of Manitoba
My commission doesn't expire.

9 F: Full Stage / Étape finale
9A N: Air Brake Not Auth / Non autorisé - Freins à air
12 1: Corrective lenses / Verres correcteurs

465897661

1	+2,3,4,5
2	+3,4,5
3	+4,5
4	+5
5	
6	