

Chou Funds Retirement Savings Plan Application Form

REGISTRATION INFORMATION

New account Existing account # _____ Transfer from existing account # _____

1. **PLAN TYPE** Retirement Savings Plan(RSP) Locked-in Retirement Account(LIRA) Locked In Registered Savings Plan (LRSP)
 Individual Spousal **Pension jurisdiction for Locked-in:** _____

2. FINANCIAL ADVISOR INFORMATION

Financial advisor's full name _____ Advisor code/number _____ Telephone number _____ Fax number _____

Dealer name _____ Dealer code/number _____ Advisor email address _____

3. ANNUITANT INFORMATION

Language preference: English French

Mr. Mrs. Ms. Miss Dr.

First name _____ Last name _____ Initial(s) _____ Date of birth (DD/MM/YYYY) _____
 Address _____ Social insurance number _____
 Attention or C/O - if needed _____ City _____ Province _____ Postal code _____
 Residence or Cell phone number _____ Business phone number _____ Ext. _____

B. Spousal contributor information (only complete for spousal plan)

First name _____ Last name _____ Initial(s) _____ Date of birth (DD/MM/YYYY) _____
 Address _____ City _____ Social insurance number _____
 Province _____ Postal code _____

4. BENEFICIARY DESIGNATION

This section is not applicable for Quebec residents.

For residents of Quebec, beneficiary will be defaulted to the "Estate" until a Will is provided with Beneficiary information.

In certain provinces, a beneficiary designation or revocation thereof may be only by a Will. In addition, in some cases, the right of the Annuitant's spouse may override such beneficiary designation. As your designation may not automatically change as a result of your future marriage or marriage breakdown, you may need to complete a new designation for this purpose. You are solely responsible for ensuring that the beneficiary designation is effective and is changed when appropriate. I designate the person(s) named below as the beneficiary under my Plan provided this person is living on the date of the annuitant's death; otherwise, payment will be made to the estate of the annuitant if no contingent beneficiary has been designated.

Note: The beneficiary share allocation will be split equally, if not otherwise indicated. You are solely responsible for ensuring that the beneficiary designation is effective and is changed when appropriate

Beneficiary's full name	Date of birth (DD/MM/YYYY)	Social insurance number	Relationship to Annuitant	Share %
_____	_____	_____	_____	_____%
Beneficiary's full name	Date of birth (DD/MM/YYYY)	Social insurance number	Relationship to Annuitant	Share %
_____	_____	_____	_____	_____%
Beneficiary's full name	Date of birth (DD/MM/YYYY)	Social insurance number	Relationship to Annuitant	Share %
_____	_____	_____	_____	_____%

Check here if you have attached a separate sheet with additional beneficiary or contingent beneficiary designations.

5. INVESTMENT INSTRUCTIONS

Check here if you have attached a separate sheet with additional investment instructions.

Transfer from **another institution**
(please attach a copy of transfer form)

One-time PAC from a **bank account**
(please attach pre-printed banking information)
Amount: \$ _____

Specify date _____

I, the holder of the account, have read and acknowledge the pre-authorized contribution agreement at the end of this application. The payor authorization is required funder a new PAC agreement for or any subsequent one-time PAC requests

If no date is provided, one-time purchase will be processed on the next available trade date after reception of the request in good order.

Fund code and Name	Investment Amount <input type="checkbox"/> \$ or <input type="checkbox"/> %	Distribution option If no option is selected, your distributions will be reinvested.
		<input type="checkbox"/> Re-invest <input type="checkbox"/> Cash <input type="checkbox"/> Redirect to account # or Fund #
		<input type="checkbox"/> Re-invest <input type="checkbox"/> Cash <input type="checkbox"/> Redirect to account # or Fund #
		<input type="checkbox"/> Re-invest <input type="checkbox"/> Cash <input type="checkbox"/> Redirect to account # or Fund #
		<input type="checkbox"/> Re-invest <input type="checkbox"/> Cash <input type="checkbox"/> Redirect to account # or Fund #
		<input type="checkbox"/> Re-invest <input type="checkbox"/> Cash <input type="checkbox"/> Redirect to account # or Fund #

must = 100% of amount

6. PAC - PRE-AUTHORIZED CONTRIBUTION PLAN

VOID CHEQUE REQUIRED

Start Date [][]/[][]/[][][][]
(DD/MM/YYYY)

Frequency

<input type="checkbox"/> Monthly* <input type="checkbox"/> Every other month <input type="checkbox"/> Quarterly <input type="checkbox"/> Semi-annually <input type="checkbox"/> Annually	<input type="checkbox"/> Twice monthly (Provide 2 dates)** 1st start date: _____ 2nd start date: _____ Please note that the default dates are the 1st and 15th of the month if no dates are provided.	<input type="checkbox"/> Weekly <input type="checkbox"/> Every other week Choose the day of the week: <input type="checkbox"/> Mon. <input type="checkbox"/> Thurs. <input type="checkbox"/> Tues. <input type="checkbox"/> Fri. <input type="checkbox"/> Wed.
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PAC allocation

Fund code	Amount Total: \$ _____ <input type="checkbox"/> % <input type="checkbox"/> \$

Must = 100% of amount

I, the holder of the account, have read and acknowledge the pre-authorized contribution agreement at the end of this application. *If monthly frequency is selected and no start date is provided, we will default your run date to the 15th of the month. **If twice monthly frequency is selected and the 2nd start date is not provided, we will default your 2nd run date to 15 days following the date provided.

7. SWP/AWD - SYSTEMATIC WITHDRAWAL PLAN/AUTOMATIC WITHDRAWAL PLAN

Start Date [][]/[][]/[][][][]
(DD/MM/YYYY)

Frequency

<input type="checkbox"/> Monthly* <input type="checkbox"/> Every other month <input type="checkbox"/> Quarterly <input type="checkbox"/> Semi-annually <input type="checkbox"/> Annually	<input type="checkbox"/> Twice monthly (Provide 2 dates)** 1st start date: _____ 2nd start date: _____ Please note that the default dates are the 1st and 15th of the month if no dates are provided.	<input type="checkbox"/> Weekly <input type="checkbox"/> Every other week Choose the day of the week: <input type="checkbox"/> Mon. <input type="checkbox"/> Thurs. <input type="checkbox"/> Tues. <input type="checkbox"/> Fri. <input type="checkbox"/> Wed.
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SWP instructions

Fund code	Amount: \$ _____ <input type="checkbox"/> Gross <input type="checkbox"/> Net <input type="checkbox"/> % <input type="checkbox"/> \$	Payment option – Choose one of the following options
		<input type="checkbox"/> EFT VOID CHEQUE REQUIRED
		<input type="checkbox"/> Cheque via mail
		<input type="checkbox"/> Deposit to another account #

Must = 100% of amount

*If monthly frequency is selected and no start date is provided, we will default your run date to the 15th of the month. **If twice monthly frequency is selected and the 2nd start date is not provided, we will default your 2nd run date to 15 days following the date provided.

8. BANKING INFORMATION

Please use banking information on file

I have attached a **pre-printed void cheque or direct deposit form***
*If the attached banking information does NOT contain the account holder's name, please complete Cheque Description Section.

Cheque Description:
 Individual Account
 Joint Account (issued under holder's name as a joint owner)
 Business Account (corporate resolution required)

X _____
Signature of bank account owner or Signature of Business Signing Officer(s) (if applicable)

_____ Date (DD/MM/YYYY)

PRE-AUTHORIZED CONTRIBUTION (PAC) AGREEMENT

The "Company" will refer solely to "Chou Funds" in the below agreement.

I authorize the Company to debit the bank account indicated in my Pre-Authorized Contribution (PAC) instructions for the amount(s) and in the frequencies instructed. If this is for a one-time PAC request, I understand that only a single one-time PAC is permitted. My authority is to remain in effect until the one-time PAC is completed, at which time this PAC agreement for the one-time request will automatically terminate and any subsequent one time or sporadic PAC request requires you to authorize a new PAC agreement. If this is for a set interval PAC request, I understand that my authority is to remain in effect until the Company has received written notice from me of any change or termination. Such notice must be received at the address provided below at least three (3) business days before the next debit is scheduled. I understand that I have certain recourse rights if a debit does not comply with my PAC instructions. For example, I have the right to receive reimbursement for any debit that is not authorized or is not consistent with my PAC instructions. I confirm that all persons whose signatures are required to authorize transactions in the bank account provided have signed my Banking Information instructions. I can change these instructions or cancel this PAC agreement at any time, provided that the Company receives at least three (3) business days' notice by phone or mail. To obtain a copy of a cancellation form or for more information regarding my right to cancel a PAC agreement, I can visit the Canadian Payments Association website at www.payments.ca. I agree to release the financial institution of all liability if the revocation is not respected, except in the case of gross negligence by the financial institution. The Company is authorized to accept changes to my PAC instructions from my advisor or my registered dealer in accordance with the policies of that company. I hereby waive any pre-notification requirements as specified by section 17 of the Canadian Payments Association Rule H1 with regards to PACs. I understand that the information in my PAC instructions will be shared with my financial institution in order to process my purchases. I acknowledge and agree that I am fully liable for any charges incurred if the debits cannot be made due to insufficient funds or any other reason for which I may be held accountable.

Convention de Cotisation Préautorisée

Dans la convention ci-dessous, le terme « Société » désigne uniquement « Chou Fonds ».

J'autorise la Société à porter au débit du compte bancaire indiqué dans mes instructions relatives à la cotisation préautorisée le ou les montants indiqués selon les fréquences demandées. S'il s'agit d'une demande de cotisation préautorisée unique, je comprends que seule une cotisation préautorisée unique est permise. Mon autorisation demeure en vigueur jusqu'à ce que la cotisation préautorisée unique soit effectuée. À ce moment, la présente convention de cotisation préautorisée pour la demande unique prendra automatiquement fin et pour toute demande de cotisation préautorisée unique ou sporadique subséquente, vous devrez autoriser une nouvelle convention de cotisation préautorisée à cet effet. S'il s'agit d'une demande de cotisation préautorisée à intervalles fixes, je comprends que mon autorisation demeure en vigueur tant que je n'avise pas par écrit la Société de mon intention de la modifier ou d'y mettre un terme. Cet avis doit être reçu à l'adresse indiquée ci-dessous au moins trois (3) jours ouvrables avant le prochain débit prévu. Je comprends que j'ai certains droits de recours s'il arrive qu'un débit ne soit pas conforme à mes instructions relatives à la cotisation préautorisée. Par exemple, j'ai le droit de recevoir le remboursement de tout débit qui n'est pas autorisé ou qui n'est pas conforme à mes instructions relatives à la cotisation préautorisée. Je confirme que toutes les personnes dont la signature est nécessaire pour autoriser les opérations dans le compte bancaire fourni ont signé mes instructions relatives à mes renseignements bancaires. Je peux modifier ces instructions ou annuler la présente convention de cotisation préautorisée en tout temps, à condition que la Société reçoive un préavis par téléphone ou par la poste au moins trois (3) jours ouvrables avant. Pour obtenir un exemplaire d'un formulaire d'annulation ou pour en savoir plus sur mon droit d'annuler une convention de cotisation préautorisée, je peux consulter le site Web de l'Association canadienne des paiements à www.paiements.ca. Je dégage l'institution financière de toute responsabilité si la révocation n'était pas respectée, à moins qu'il ne s'agisse d'une négligence grave de sa part. La Société est autorisée à accepter que mon conseiller ou mon courtier inscrit apporte des modifications à mes instructions relatives à la cotisation préautorisée conformément aux politiques de cette Société. Je renonce par les présentes à toute exigence de préavis prévues par l'alinéa 17 de la Règle H1 de l'Association canadienne des paiements afférente aux cotisations préautorisées. Je comprends que les renseignements contenus dans mes instructions relatives à la cotisation préautorisée seront communiqués à mon institution financière afin de traiter mes achats. Je reconnais et accepte l'entière responsabilité des frais encourus si les débits ne peuvent être portés au compte en raison d'insuffisance de provisions ou de toute autre raison pour laquelle je peux être tenu responsable.

9. ACKNOWLEDGEMENT & AUTHORIZATION

I am fully aware of the terms under which transfers may be made to my Plan and that under the Income Tax Act (Canada) and, if applicable, the Taxation Act (Quebec), under which my Plan is constituted and registered, tax may be payable on any eventual benefits from my Plan or on any holdings of non-qualified investments in my Plan. I authorize CIBC Mellon Trust Company to sell assets out of my Plan to pay any penalty taxes assessed.

I request CIBC Mellon Trust Company to apply for registration of my Chou Funds retirement savings plan (the "Plan") as a registered Retirement Savings Plan under section 146 of the Income Tax Act (Canada), under any other applicable tax Act in Canada and including any applicable pension legislation in Canada. I understand that my Plan will be subject to the provisions of the said Acts and that all payments made out of my Plan will be subject to tax under the provisions of said Acts. I acknowledge that my Plan is subject to the terms and conditions set out above, in the Declaration of Trust and in any relevant locking-in addendum to the Declaration of Trust and have read and agree to be bound by such terms and conditions.

I have requested this document to be drawn in the English language. J'ai exigé que ce document soit rédigé en anglais.

1. I have read and agree to comply with the "Declaration of Trust" governing the plan set forth on the reverse and forming a part of this application
2. I am aware that benefits paid out under the plan may be included in my income under the Income Tax Act (Canada) and under any applicable provincial tax legislation.
3. The assets of the plan are not insured under the Canada Deposit Insurance Corporation Act.
4. The Information contained in this plan application is complete and true in all respects.

X Signature of annuitant	Date (DD/MM/YYYY)	X Signature of spousal holder (if applicable)	Date (DD/MM/YYYY)
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This Application is accepted by the undersigned in accordance with the Declaration of Trust attached to this Application

Mal Cullen, Chief Executive Officer CIBC Mellon Trust Company	Date (DD/MM/YYYY)
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Confidential
CIBC Mellon is a licensed user of the CIBC trade-mark and certain BNY Mellon trade-marks, is the corporate brand of CIBC Mellon Global Securities Services Company and CIBC Mellon Trust Company, and may be used as a generic term to refer to either or both companies.

CHOU FUNDS RETIREMENT SAVINGS PLAN DECLARATION OF TRUST

We, CIBC Mellon Trust Company, are a trust company incorporated under the laws of Canada, with our head office located at Toronto, Ontario. You are the annuitant in accordance with the Income Tax Act (Canada) named in the Application (your "Application") on the other side of this Declaration of Trust (the "Declaration"). We agree to act as trustee of your **Chou Funds Retirement Savings Plan** (your "Plan") on the following terms and conditions.

1. Registration and Compliance: We will apply for registration of your Plan under the *Income Tax Act* (Canada) (the "Tax Act") as a registered retirement savings plan ("RRSP"). It is intended that, at all times, your Plan will comply with all relevant provisions of the Tax Act and, if applicable, the *Taxation Act* (Quebec) with respect to an RRSP. You will be bound by the terms and conditions imposed on your Plan by all applicable legislation.

2. Contributions to your Plan: You or, where applicable, your spouse may make cash contributions to your Plan. We will also accept transfers of cash to your Plan from any source permitted by the Tax Act. In addition to cash, in our sole discretion, we may accept securities and other investments acceptable to us, if accompanied by properly executed transfer documents. Contributions may not be made after December 31 of the year in which you reach age 71 (or another age specified by the Tax Act). We will hold contributions and transfers made to your Plan, investments made with those contributions and any income or capital gains realized in respect of those investments in trust for the purpose of providing you with a retirement income in subsection 146(1) of the Tax Act.

3. Investments: Contributions and transfers to your Plan will be invested and reinvested from time to time according to your investment instructions in securities of the investment funds of the fund manager (the "Manager") listed on the Application or such other investments as we may permit from time to time. However, your Plan may not hold a mortgage. We will not be limited to investments authorized by law governing the investment of property held in trust. Before we will act on your investment instructions, the instructions must be in a form acceptable to us and be accompanied by related documentation as we may require in our sole discretion. We may accept and act on any investment instructions which we believe in good faith to be given by you. Cash distributions received and capital gains realized on investments held in your Plan will be invested in additional investments of the same type from which the distribution or gain was made unless you instruct otherwise. We may retain any cash balances in your Plan and may, but need not, hold the same in our deposit department or in the deposit department of one of our Affiliates; but we and our Affiliates shall not be liable to account for any profit to any person other than at a rate, if any, established from time to time by us or our Affiliates. For the purposes of this paragraph 3, "Affiliate" means affiliated companies within the meaning of the *Business Corporations Act* (Ontario)

("OBCCA"); and includes Canadian Imperial Bank of Commerce, CIBC Mellon Global Securities Services Company and The Bank of New York Mellon and each of their affiliates within the meaning of the OBCCA.

We shall have no responsibility or obligation with respect to the performance of any investment or reinvestment of the property held in your Plan. Our obligation relating to the investment of the property held in your Plan shall be to (i) register the investments of your Plan in our own name, in the name of our nominee, in bearer form or in such other name as we may determine; (ii) exercise all powers or rights of an owner with respect to all securities held by us for your Plan, including the right to vote or give proxies to vote in respect thereof, and to pay any assessment, taxes or charges in connection therewith or the income or gains derived therefrom; and (iii) exercise, or caused to be exercised, the care, diligence and skill of a reasonably prudent person to minimize the possibility that your Plan holds a non-qualified investment.

4. Your Responsibility: You are responsible for: (a) ensuring that contributions to your Plan do not exceed the maximum limits permitted by the Tax Act; (b) ensuring that any transfers to your Plan are permitted by the Tax Act; and (c) ensuring that the investments held in your Plan are qualified investments for your Plan under the Tax Act. If your Plan becomes liable for tax, interest or penalties under the Tax Act (other than those imposed on the trustee under the Tax Act) or similar provincial legislation, we may realize sufficient investments of your Plan, selected in our sole discretion, to pay the liability and we will not be liable for any resulting loss.

5. Delegation to Manager by Trustee: You expressly authorize us to delegate to the Manager the performance of certain of our administrative and custodial duties and obligations under your Plan as the Manager is prepared to accept and acknowledges that, to the extent we delegate any of such duties or obligations, we shall thereby be absolutely released and discharged from performing such duties and obligations. Such duties and obligations which may be delegated include but are not limited to the following:

- (a) receiving and processing contributions under your Plan from you and/or your spouse, as the case may be;
- (b) receiving and forwarding your investment instructions to us; and
- (c) receiving and forwarding your instructions relating to payments out of your Plan to us pursuant to the provisions provided herein.

6. Withdrawals and Refunds: Following the receipt of your written instructions in a form acceptable to us, (1) we will make payments to you from your Plan; or (2) we will make a payment from your Plan in the amount specified by you in such instructions where such amount is required to be paid to the taxpayer to reduce the taxes otherwise payable by the taxpayer under Part X.1 of the Tax Act. We may realize investments of your Plan selected by us in our sole discretion for the purposes of making the payment and will not be liable for any resulting loss. Payments will be made net of all proper charges including tax required to be withheld.

7. Transfers from your Plan: Following the receipt of your written instructions in a form acceptable to us, we will transfer all or part of the assets of your Plan (net of all proper charges) to the issuer of an RRSP or a registered retirement income fund ("RRIF") or to a registered pension plan, as instructed by you in the notice. Upon request, we will provide the issuer of the recipient plan with all relevant information in our possession. We will sell or transfer specific investments of your Plan to effect the transfer if instructed by you in writing. In the absence of satisfactory written instructions, we may sell or transfer any investments of your Plan selected by us in our sole discretion to effect the transfer and will not be liable for any resulting loss. The transfer of assets will be made subject to any restrictions under the Tax Act or the terms and conditions of the investments in your Plan.

8. Maturity: On or before December 31 of the year in which you reach age 71 (or another age specified by the Tax Act), the assets of your Plan must be transferred to a Registered Retirement Income Fund or liquidated and the proceeds (net of any applicable costs and charges) used to acquire an annuity that conforms with the Tax Act. If you do not provide us with satisfactory written instructions by November 30 of that year, you will be deemed to have instructed us to transfer the assets of your Plan on or before December 31 of that year to a Retirement Income Fund established by the Manager or another RIF selected by us in our sole discretion. We will act as your attorney to execute documents and make elections necessary to establish a Retirement Income Fund (RIF).

9. Annuity: An annuity purchased with the assets of your Plan must conform to the requirements under the Tax Act which, among other things, requires the annuity to provide equal annual or more frequent periodic payments to you, or to you until your death and then to your spouse, until there is a payment in full or partial commutation of the annuity and where the commutation is partial, equal annual or more frequent periodic payments afterwards except for adjustments permitted by the Tax Act. Payments may not exceed a term of years equal to 90 minus either your age (in whole years) or, if your spouse is younger than you, your spouse's age (in whole years) at the time the annuity is purchased. Payments to your spouse in any year after your death may not be greater than payments made in a year before your death. If the annuity becomes payable to a person other than you or your spouse, the value of payments must be commuted.

10. Beneficiary Designation: If you are domiciled in a jurisdiction which by law permits you to validly designate a beneficiary other than by Will, you may designate a beneficiary to receive the proceeds of your Plan in the event of your death before the maturity of your Plan. You may make, change or revoke your designation by written notice signed by you in a form acceptable to us. Any designation, amended designation or revoked designation will be valid on the day following its receipt by us. If we receive more than one beneficiary designation from you, the latest designation shall revoke all previous designations.

11. Death: Upon receipt of satisfactory evidence of your death and any other documents as we may require, we will hold the assets of your Plan for payment in a lump sum to your designated beneficiary if that person was living at the date of your death. If you have not designated a beneficiary or if the designated beneficiary predeceases you, the assets of your Plan will be paid to your legal representatives. The lump sum payment will be paid subject to the deduction of all proper charges after we receive the releases and other documents that we require in our sole discretion.

12. Prohibition: The retirement income under your Plan may not be assigned in whole or in part. We will not make any payments from your Plan except those specifically permitted under the provisions of this Declaration or the Tax Act.

13. Date of Birth and Social Insurance Number: The statement of your birth date and social insurance number in your Application is deemed to be a certification of its truth and your undertaking to provide proof, satisfactory to us in our sole discretion, if we request.

14. Accounting and Reporting: We will maintain an account of your Plan containing such information with respect to the Plan as required for purposes of the Tax Act. We will send you at least annually a statement of your account. Before April of each year, we will provide any applicable tax reporting required to be filed with your or your spouse's personal income tax return relating to contributions to or withdrawals from your Plan for the previous year.

15. Notice: Any notice required or permitted to be given to you by us will be sufficiently given if mailed, postage prepaid, to you at your address as indicated on your Application or any subsequent address that you have provided to us in writing for that purpose. Notice will be deemed to have been received by you on the day of mailing. Any notice required or permitted to be given to us by you will be sufficiently given if mailed, postage prepaid, to us at our head office in Toronto. Notice will be deemed to have been given on the actual date received by us.

16. Fees and Expenses: We may charge you or your Plan fees for our services under this Declaration. We will give you at least 30 days' notice of any increase, from time to time, in our fees. We are entitled to reimbursement from your Plan for all disbursements and expenses (including taxes, interest and penalties, other than those imposed on the trustee under the Tax Act) reasonably incurred by us in connection with your Plan. We are entitled to deduct our unpaid fees, disbursements and expenses from the assets of your Plan and for this purpose you authorize us to realize sufficient assets of your Plan selected in our sole discretion. We will not be responsible for any resulting loss.

17. Delegation of Duties: In addition to paragraph 5 herein, we may appoint agents and may delegate to our agents the performance of clerical, administrative and other duties under this Declaration. We may employ or engage accountants, brokers, lawyers or others and may rely on their advice and services. We will not be liable for the acts or omissions of any of our advisors or agents. We may pay to any advisor or agent all or part of the fees received by us under the provisions of this Declaration.

18. Our Responsibility: We acknowledge that we are ultimately responsible for the administration of your Plan. We, our officers, employees and agents are indemnified by you and your Plan from and against all expenses (including reasonable counsel fees and expenses) liabilities, claims and demands that may arise from holding the assets of your Plan; dealing with the assets of your Plan in accordance with investment instructions which we, our officers, employees or agents believe in good faith to be given by you or your properly authorized agent; delivering or releasing assets of your Plan in accordance with this Declaration; and performing our obligations hereunder; except to the extent that such expenses, liabilities, claims and demands are caused by our gross negligence, wilful misconduct, fraud or bad faith. Notwithstanding any other provision of this Declaration, we will not be liable for any loss or penalty suffered as a result of any act done by us in reasonable reliance of your authority or the authority of your properly authorized agent or legal representatives, except for penalties that the issuer is liable for under the Tax Act. This indemnification shall survive the termination of this Declaration of trust and your Plan.

19. Successor Trustee: We may resign and be discharged from all duties and liabilities under this Declaration by giving you at least 90 days' written notice. The Manager is nominated to appoint a successor trustee. Upon acceptance of the office of trustee of your Plan, the successor trustee will be trustee of your Plan as if it had been the original declarant of your Plan. Notwithstanding any other provision herein, any corporation which may result from our merger or amalgamation with one or more other corporations or any trust company that succeeds to or acquires all or substantially all of our trust business shall thereupon become the successor trustee for all purposes hereunder without any further act or formality provided that your Plan remains registered in accordance with paragraph 1 hereof.

20. Discharge of Trustee: Upon the final payment or transfer out of all the assets in your Plan in accordance with the terms hereof, we shall be fully and finally discharged of all obligations hereunder, and the trusts created hereby shall cease and be of no further force or effect.

21. Amendments: From time to time, we may amend this Declaration with the approval of Canada Revenue Agency provided that the amendment does not disqualify your Plan as an RRSP under the Tax Act. Any amendment to ensure that your Plan continues to comply with the Tax Act will be effective without notice. Any other amendment will be effective not less than 30 days' after written notice has been provided to you.

22. Entire Agreement: The Application, this Declaration of Trust and, if applicable, the Addendum shall constitute the entire agreement between you and us with respect to the Plan.

23. Language: You have requested that your Application, this Declaration and all ancillary documents be provided to you in English. Vous avez exigé que votre demande, la présente déclaration et tous les documents accessoires vous soient fournis en anglais.

24. Privacy and Complaints: We will collect, use and disclose personal information to establish and service your Plan, as required or permitted by law and as disclosed in our Privacy Policy. We may, from time to time, disclose or transfer personal information given to us by you to the agents and/or the Manager. By applying for your Plan, you are consenting to these collections, uses and disclosures. Our Privacy Policy is available on request from any of our offices.

If you have a concern or complaint, please refer to the Contact Us section of our website (which is www.cibcmellon.com) for a list of departments that can assist you.

25. Governing Laws: This Declaration will be governed, construed and enforced in accordance with the laws of Ontario (or, if applicable, Quebec) and Canada except that the word "spouse" as used in this Declaration and your Application will have the same meaning as for the purposes of the Tax Act and shall include common-law partner as defined in the Tax Act.