

**DECLARATION OF OWNERSHIP OF SECURITIES HELD AT DESJARDINS ONLINE BROKERAGE
IN HIS/HER CAPACITY AS A TUTOR TO A MINOR CHILD**

I hereby confirm that the account mentioned below is an account held by me, in my capacity as a tutor, and that _____
_____ will take full possession thereof upon attaining the age of majority.
(Name of the minor)

The child is the sole owner of the securities held in this account, and no other document exists that would indicate otherwise.

I understand that, as a tutor, I can only make investments that are presumed to be sound. Otherwise, I may be held liable for any losses incurred by the minor.

I also understand that I must respect the current tax rules, including the attribution rules that apply to the income and capital gains generated by the investments, and that this liability will in no way fall on Desjardins Securities Inc.

I acknowledge that, as a tutor, I handle the administration of the minor's property until the child becomes a major. I understand that the child reaching the age of majority will then become the only person entitled to make decisions regarding his or her assets and that, starting at that time, Desjardins Securities Inc. will be required to cease accepting my instructions regarding the "in trust" account.

Tutor's name (block letters)

Tutor's signature

Date (YYYY-MM-DD)

Account number

Identity verification of the minor child must be done on the following page

IDENTITY VERIFICATION OF THE MINOR CHILD

IDENTITY VERIFICATION is required under the Proceeds of Crime (Money Laundering), the Terrorist Financing Act (PCMLTFA).

Client Resident of Canada

Identity verification by (Reserved for Caisse Desjardins Advisor/Desjardins Online Brokerage Representative):

Desjardins Online Brokerage Caisse Desjardins (Please complete method 1: Identity verification done in person)

Name of Caisse: _____ Transit No.: _____ Institution No.: _____

Name of Advisor: _____ Verification Date (YYYY-MM-DD): _____

Legible copies must be attached at all times:

- Document(s) collected to verify the identity of the client (PCMLTFA requirement)

Complete one [1] of the two sections below, according to the method of identification used

Method 1: Identity verification done in person

Original passport¹ (issuing country: _____)

Document No.: _____ Expiry Date (YYYY-MM-DD): _____ Verification Date (YYYY-MM-DD): _____

¹ A certified translation may be required.

Method 2: Identity verification done in person or not

Verification by **one [1] item in each of the two [2] categories below:**

1) **Original** document from parent or tutor indicating the same address as the one declare for the minor child:

Bank account statement, credit card statement or loan statement

OR Utility account statement (ex: electricity, telecommunications, etc.)

OR Document from the Canada Revenue Agency (ex: T4)

Document No.: _____ Document Date (YYYY-MM-DD): _____ Verification Date (YYYY-MM-DD): _____

AND

2) **Original** document that mentions the name and birth date of the minor child:

Birth certificate

OR Health insurance card²⁻³

Document No.: _____ Document Date (YYYY-MM-DD): _____ Verification Date (YYYY-MM-DD): _____

² Indicate the issuing **Canadian** province or territory: _____

³ Not valid in Ontario, New Brunswick, Nova Scotia, Manitoba or Prince Edward Island.

Note: the original version corresponds to the document that the person has downloaded or received from the issuer, either by mail or electronically.

Signature (reserved for Desjardins Online Brokerage)

Date of identity verification of the minor child from the information provided by Caisse Desjardins (if applicable): _____

Name of the representative (in block letters)

Signature of the representative

Date (YYYY-MM-DD)

Name of Branch Manager (in block letters)

Signature of Branch Manager

Date (YYYY-MM-DD)