

AFFIDAVIT VERIFYING CORPORATE SIGNING AUTHORITY

CANADA _____) I, _____,
PROVINCE OF _____) of the _____, in the Province of
TO WIT: _____, MAKE OATH AND SAY THAT:

1. I am the _____ (title) for _____ (company) named in the attached Agreement.
2. I am authorized on behalf of _____ (company) to bind _____ (company) to the terms of this Agreement by affixing my signature thereto.

SWORN BEFORE ME at _____)
_____ in the Province)
of _____, this _____ day) _____
of _____, 20__)

**A Commissioner for Oaths in and for
the Province of _____**