



Authorization

I, (Name of Owner as appears on Title), authorize Transform Number

To

Date (day, month, year)

Witness Signature

Title Owner Signature

Check if Witness is Lawyer in and for the Province of Saskatchewan

Lawyer Name

Affidavit of Execution (if witness is not a Saskatchewan lawyer)

I, Witness Name of Place in the Province of

make oath and say that:

1. I personally know who is (person whose signature was witnessed)

Or

I have satisfied myself that (person whose signature was witnessed) is

the individual named in this document and I was personally present when it was signed.



2. The individual whose signature I witnessed is in my belief the full age of eighteen years.

Sworn before me at

in the Province of

on

Date (day, month, year)

Witness Signature

A Commissioner for Oaths in and for Saskatchewan

OR Notary Public for the Province of

My commission/appointment expires

Date (day, month, year)

OR Being a Solicitor