ISC	

Authorization

(Corporatio	n Nama)	, authorizes by the si	gnature of its prope	r signing officers:	
Corporatio	n name)				
Assignment to		of Interest F	Register Number		
Interest Number(s))/Share Number(s)				
Amendment of Int	erest Register Number				
Full Discharge of	Interest Register Number				
Partial Discharge	of Interest Register Numb	per			
Interest Number(s)					
Date (day, month, year)	Witness Signature		Corporate Officer Sign	ature	
Date (day, month, year)	Witness Signature		Corporate Officer Sign	ature	
Check if Witness is	s Lawyer for the Province	of Saskatchewan	Lawy	/er Name	
Affidavit Verifying Corpo	rate Signing Authority (if	f no corporate seal)			
We,	and		of		in the
(Corporate Office	er)	(Corporate Officer)		(Place)	
Province of	sever	ally make oath and s	ay that:		
1. We are authorized	signing officers as		and		
		(position)		(position)	
of		named in this	document.		
(0	Corporation Name)				



2.	We are authorized by	the corporation	to execute the documer	nt without affixing a corporate seal.
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Severally sworn before me at		
in the Province of	-	
ON Date (day, month, year)	Corporate Officer Signature	_
A Commissioner for Oaths for Saskatchewan OR Notary Public for the Province of	Corporate Officer Signature	_
My commission/appointment expires	-	
OR Being a Solicitor Date (day, month, year)	r	
Affidavit of Execution (if witness other than lawyer)		
I, of	in the Province of	
Witness Name make oath and say that:	Place	
1. I personally know	andare	
	nessed) (person whose signature was witnessed)	
Or	and	aro
(person whose signa	ture was witnessed) and (person whose signature was witnessed)	
the individuals who signed this document on b personally present when it was signed.	behalf of the Corporation Named in this document and I was	
2. The two individuals whose signatures I witness	ed are 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 for Saskatchewan OR Notary Public for the Province of		
My commission/appointment expires	-	
OR Being a Solicitor Date (day, month, year)	r	
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