

ScotiaMcLeod	
ScotiaMcLeod Direct Investing	
TradeFreedom	

## NOTICE OF INTENT TO EXERCISE EMPLOYEE STOCK OPTIONS

Fax Completed Form to: 416-214-3778 All Provinces Except Quebec 514-281-5299 Quebec

TO: ScotiaMcLeod Direct Inv	esting (SMDI)				
ISSUER NAME		CONTACT NAME			PHONE NUMBER
EMPLOYEE NAME		PHONE NUMBER			SDI ACCOUNT NUMBER
I elect to exercise my option to	ourchase the commo	n shares of	the above issuer a	s follows:	
Date of Grant	No. of shares exercised		Exercise price/share		Purchase Price
//		Χ		=	\$
//		X		=	\$
I instruct SMDI to sell I request that SMDI loan me the			·		·
as directed by the Issuer. I authorize SMDI to disclose my					
STOCK OPTION AGREEMENT					
I will advise SMDI at the time of	sale if I am deemed	by securitie	s regulations to be	an insider	of the Issuer.
I confirm that the stock certificate Capital in Trust for (employee not the SMDI Head Office in Toront settlement date I agree to execute the settlement date I agree I	ame), unless otherwi	ise arranged ettlement da	I with the SMDI Invate of the sale. If I	vestment R	Representative and delivered to
I acknowledge that if my certific current market value at my exp		y SMDI on o	or before settleme	nt date the	shares may be repurchased at
I acknowledge that interest on	the loan will be charg	ged to me a	t a rate of prime +	1%.	
I acknowledge that proceeds ov administration fee.	wing to me on settler	ment date o	f the sale will be n	et of comr	mission, loan interest, and a \$50
I agree that I am liable for any o	charges or losses incu	ırred from la	ate or failed settlen	nent.	
CLIENT SIGNATURE			DATE		