

**SHARE PURCHASE REQUEST BY FONDATION  
 FOR A DECREASE OF 30% OR MORE IN THE PRE-TAX FAMILY INCOME FOR A MINIMUM PERIOD  
 OF TWO MONTHS CAUSED BY THE DISSOLUTION OF A UNION  
 SUBSEQUENT PAYMENT WITHIN 12 MONTHS AFTER THE DISSOLUTION OF THE UNION  
 (CLASS "A" SHARES SERIES 1 - REGISTERED ACCOUNT OR SERIES 2 - NON-REGISTERED ACCOUNT)**

**SECTION 1 : IDENTIFICATION**

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SHAREHOLDER	DATE OF DISSOLUTION OF THE UNION
LAST NAME AND FIRST NAME :	Y Y Y Y   M M   D D
DATE OF BIRTH : Y Y Y Y   M M   D D	
ADDRESS :	DATE OF DECREASE IN INCOME
	Y Y Y Y   M M   D D
TELEPHONE :	EX SHAREHOLDER SPOUSE
EMAIL :	LAST NAME AND FIRST NAME : _____
MEMBERSHIP NUMBER :	

**SECTION 2 : PURCHASE**

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<b>NUMBER OF SHARES</b>	<p><b>Following my initial request, I ask Fondation to buy (the total amount of this request and the initial request cannot exceed \$15,000 after tax retention) :</b></p> <p><input type="checkbox"/> All my shares held before the dissolution of the union , <b>OR</b></p> <p><input type="checkbox"/> A sufficient number of my shares held before the dissolution of the union for an amount of \$ _____ <b>BEFORE</b> tax retention, <b>OR</b></p> <p><input type="checkbox"/> A sufficient number of my shares held before the dissolution of the union for an amount of \$ _____ <b>AFTER</b> tax retention.</p>

**SECTION 3 : PAYMENT**

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<b>PAYMENT</b>	<p><b>I ask Fondation :</b></p> <p><input type="checkbox"/> Deposit the funds directly to my account at my financial institution  <i>(attach a personal cheque marked "VOID")</i></p> <p>Name of institution : _____</p> <p><input type="checkbox"/> Issue a cheque to my attention and send it to the above address</p>

**SECTION 5 : DECLARATION AND SIGNATURE**

*I solemnly declare that the decrease in my personal income has lasted for two consecutive (2) months and that all the information I have provided is accurate to the best of my knowledge. I also declare that all my investments, if any, including RRSPs and LIRAs, have been cashed or, alternatively, cannot be cashed.*

*I understand and agree that I will not be able to acquire any new shares for a period of one (1) year from the date of this request.*

**For registered accounts (Class A Shares - Series 1)**

*I acknowledge that the amounts payable in exchange for the purchase of my shares are to be added to my taxable income or to my spouse's taxable income, as applicable, and that Fondaction will also have to withhold any applicable taxes on these sums, as provided for by law.*

**For non-registered accounts (Class A Shares - Series 2)**

*I acknowledge that the amounts payable in consideration for the purchase of my shares may result in a capital gain or loss that must be taken into account and this may add to or reduce my taxable income.*

**SIGNATURE**

Sharholder's signature

Date

X \_\_\_\_\_

Y Y Y Y | M M | D D

Please print the form, sign it and either send it back to us by mail or scan it and send it to us by e-mail.