

Worksheet

Leasing

Suite: 3805 Tower: PSV Date: Apr. 20/17 Completed by: Silvi

Michael Gouda + Riham Gouda

Please mark if completed:

- ✓ ● Copy of 'Lease Prior to Closing' Amendment
- ✓ ● Copy of Lease Agreement
- ✓ ● Certified Deposit Cheque for Top up Deposit to ^{20%}25% payable to Blaney McMurtry LLP in Trust Not required
- ✓ ● Certified Deposit Cheque for leasing fee as per the Leasing Amendment payable to Amacon City Centre Seven New Development Partnership. \$500 + HST
- ✓ ● Agreement must be in good standing. Funds in Trust: \$ 52,335.
- ✓ ● Copy of Tenant's ID
- ✓ ● Copy of Tenant's First and Last Month Rent
- ✓ ● Copy of Tenant's employment letter or paystub (Medical Resident)
- ✓ ● Copy of Credit Check
- ✓ ● Copy of the Purchasers Mortgage approval
- ✓ ● The elevator will not be allowed to be booked until all of the Above items have been completed and submitted



Administration Notes:

AMENDMENT TO AGREEMENT OF PURCHASE AND SALE

LEASE PRIOR TO CLOSING

Between: **AMACON DEVELOPMENT (CITY CENTRE) CORP.** (the "Vendor") and
MICHAEL N. GOUDA and RIHAM FIKRY GOUDA (the "Purchaser")

Suite **3805** Tower **ONE** Unit **5** Level **37** (the "Unit")

It is hereby understood and agreed between the Vendor and the Purchaser that the following changes shall be made to the Agreement of Purchase and Sale executed by the Purchaser and accepted by the Vendor (the "Agreement") and, except for such changes noted below, all other terms and conditions of the Agreement shall remain the same and time shall continue to be of the essence:

Insert:

Notwithstanding paragraph 22 of this Agreement, the Purchaser shall be entitled to seek the Vendor's approval to assign the occupancy licence set out in Schedule C to the Agreement to a third party, on the following terms and conditions:

- (a) the Purchaser pays to the Blaney McMurtry, in Trust the amount required to bring the deposits for the Residential Unit to an amount equal to twenty percent (20%) of the Purchase Price by the Occupancy Date;
- (b) the Purchaser is not in default at any time under the Agreement.
- (c) the Purchaser covenants and agrees to indemnify and hold harmless the Vendor, its successors and assigns (and their officers, shareholders and directors) from any and all costs, liabilities and/or expenses which it has or may incur as a result of the assignment of Occupancy Licence, any damage caused by the sublicensee to the Residential Unit or the balance of the Property by the sublicensee (including, but not limited to, any activities of the sublicensee which may lead to a delay in registration of the proposed condominium) inclusive of any and all costs and expenses (including legal costs on a substantial indemnity basis) that the Vendor may suffer or incur to terminate the Occupancy Licence and enforce the Vendor's rights under the Agreement;
- (d) the Vendor shall have the right in its sole discretion to pre approve the sublicensee including, but not limited to, a review of the sublicensee's personal credit history and the terms of any arrangement made between the Purchaser and the sublicensee;
- (e) the Purchaser shall deliver with the request for approval a certified cheque in the amount of Five Hundred Dollars (\$500.00) plus applicable taxes for the administrative costs of the Vendor in reviewing the application for consent, which sum shall be non refundable.

ALL other terms and conditions set out in the Agreement shall remain the same and time shall continue to be of the essence.

IN WITNESS WHEREOF the parties have executed this Agreement

DATED at Mississauga, Ontario this 12th day of April 2017.

Witness:

Purchaser: **MICHAEL N. GOUDA**

Witness:

Purchaser: **RIHAM FIKRY GOUDA**

THE UNDERSIGNED hereby accepts this offer.

DATED at Mississauga this 24 day of April 2017.

AMACON DEVELOPMENT (CITY CENTRE) CORP.

PER:

Authorized Signing Officer
I have the authority to bind the Corporation

Agreement to Lease Residential

Form 400

for use in the Province of Ontario

This Agreement to Lease dated this 15th day of April, 2017

TENANT (Lessee), MICHAEL MATAR & MARLYN MATAR
(Full legal names of all Tenants)

LANDLORD (Lessor), MICHAEL GOUDA & RIHAM GOUDA
(Full legal name of Landlord)

ADDRESS OF LANDLORD 4612 ASHLAR CRES., BURLINGTON, ONTARIO
(Legal address for the purpose of receiving notices)

The Tenant hereby offers to lease from the Landlord the premises as described herein on the terms and subject to the conditions as set out in this Agreement.

1. **PREMISES:** Having inspected the premises and provided the present tenant vacates, I/we, the Tenant hereby offer to lease, premises known as:
4011 Brickstone Mews, Suite 3805, Mississauga, Ontario

2. **TERM OF LEASE:** The lease shall be for a term of 12 months (or as per Sch A) commencing May 1st, 2017

3. **RENT:** The Tenant will pay to the said Landlord monthly and every month during the said term of the lease the sum of TWO THOUSAND
Canadian Dollars (CDN\$ 2,000.00),
payable in advance on the first day of each and every month during the currency of the said term. First and last months' rent to be paid in advance upon completion or date of occupancy, whichever comes first.

4. **DEPOSIT AND PREPAID RENT:** The Tenant delivers upon acceptance
(Herewith/Upon acceptance/as otherwise described in this Agreement)

by negotiable cheque payable to "Deposit Holder"
in the amount of Four Thousand Dollars

Canadian Dollars (CDN\$ 4,000.00) as a deposit to be held in trust as security for the faithful performance by the Tenant of all terms, covenants and conditions of the Agreement and to be applied by the Landlord against the and month's rent. If the Agreement is not accepted, the deposit is to be returned to the Tenant without interest or deduction.

For the purposes of this Agreement, "Upon Acceptance" shall mean that the Tenant is required to deliver the deposit to the Deposit Holder within 24 hours of the acceptance of this Agreement. The parties to this Agreement hereby acknowledge that, unless otherwise provided for in this Agreement, the Deposit Holder shall place the deposit in trust in the Deposit Holder's non-interest bearing Real Estate Trust Account and no interest shall be earned, received or paid on the deposit.

5. **USE:** The Tenant and Landlord agree that unless otherwise agreed to herein, only the Tenant named above and any person named in a Rental Application completed prior to this Agreement will occupy the premises.

Premises to be used only for: Residential

6. **SERVICES AND COSTS:** The cost of the following services applicable to the premises shall be paid as follows:

	LANDLORD	TENANT		LANDLORD	TENANT
Gas	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Cable TV	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Oil	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Condominium/Cooperative fees	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Electricity	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Garbage Removal	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Hot water heater rental	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Other: <u>see Sched. A</u>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Water and Sewerage Charges	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Other:	<input type="checkbox"/>	<input type="checkbox"/>

The Landlord will pay the property taxes, but if the Tenant is assessed as a Separate School Supporter, Tenant will pay to the Landlord a sum sufficient to cover the excess of the Separate School Tax over the Public School Tax, if any, for a full calendar year, said sum to be estimated on the tax rate for the current year, and to be payable in equal monthly installments in addition to the above mentioned rental, provided however, that the full amount shall become due and be payable on demand on the Tenant.

INITIALS OF TENANT(S): MM/MM

INITIALS OF LANDLORD(S): MG/RG



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7. **PARKING:** See Sched. A.
8. **ADDITIONAL TERMS:**
9. **SCHEDULES:** The schedules attached hereto shall form an integral part of this Agreement to Lease and consist of: Schedule(s) A
10. **IRREVOCABILITY:** This offer shall be irrevocable by until a.m./p.m. on the
(Landlord/Tenant)
day of 20..... after which time if not accepted, this Agreement shall be null and void and all monies paid thereon shall be returned to the Tenant without interest or deduction.
11. **NOTICES:** The Landlord hereby appoints the Listing Brokerage as agent for the Landlord for the purpose of giving and receiving notices pursuant to this Agreement. Where a Brokerage (Tenant's Brokerage) has entered into a representation agreement with the Tenant, the Tenant hereby appoints the Tenant's Brokerage as agent for the purpose of giving and receiving notices pursuant to this Agreement. Where a Brokerage represents both the Landlord and the Tenant (multiple representation), the Brokerage shall not be appointed or authorized to be agent for either the Tenant or the Landlord for the purpose of giving and receiving notices. Any notice relating hereto or provided for herein shall be in writing. In addition to any provision contained herein and in any Schedule hereto, this offer, any counter-offer, notice of acceptance thereof or any notice to be given or received pursuant to this Agreement or any Schedule hereto (any of them, "Document") shall be deemed given and received when delivered personally or hand delivered to the Address for Service provided in the Acknowledgement below, or where a facsimile number or email address is provided herein, when transmitted electronically to that facsimile number or email address, respectively, in which case, the signature(s) of the party (parties) shall be deemed to be original.
- FAX No.: FAX No.:
(For delivery of Documents to Landlord) (For delivery of Documents to Tenant)
- Email Address: Email Address:
(For delivery of Documents to Landlord) (For delivery of Documents to Tenant)
12. **EXECUTION OF LEASE:** Lease shall be drawn by the Landlord on the Landlord's standard form of lease, and shall include the provisions as contained herein and in any attached schedule, and shall be executed by both parties before possession of the premises is given. The Landlord shall provide the tenant with information relating to the rights and responsibilities of the Tenant and information on the role of the Landlord and Tenant Board and how to contact the Board. (Information For New Tenants as made available by the Landlord and Tenant Board and available at www.ltb.gov.on.ca)
13. **ACCESS:** The Landlord shall have the right, at reasonable times to enter and show the demised premises to prospective tenants, purchasers or others. The Landlord or anyone on the Landlord's behalf shall also have the right, at reasonable times, to enter and inspect the demised premises.
14. **INSURANCE:** The Tenant agrees to obtain and keep in full force and effect during the entire period of the tenancy and any renewal thereof, at the Tenant's sole cost and expense, fire and property damage and public liability insurance in an amount equal to that which a reasonably prudent Tenant would consider adequate. The Tenant agrees to provide the Landlord, upon demand at any time, proof that said insurance is in full force and effect and to notify the Landlord in writing in the event that such insurance is cancelled or otherwise terminated.
15. **RESIDENCY:** The Landlord shall forthwith notify the Tenant in writing in the event the Landlord is, at the time of entering into this Agreement, or, becomes during the term of the tenancy, a non-resident of Canada as defined under the Income Tax Act, RSC 1985, c.1 (ITA) as amended from time to time, and in such event the Landlord and Tenant agree to comply with the tax withholding provisions of the ITA.
16. **USE AND DISTRIBUTION OF PERSONAL INFORMATION:** The Tenant consents to the collection, use and disclosure of the Tenant's personal information by the Landlord and/or agent of the Landlord, from time to time, for the purpose of determining the creditworthiness of the Tenant for the leasing, selling or financing of the premises or the real property, or making such other use of the personal information as the Landlord and/or agent of the Landlord deems appropriate.
17. **CONFLICT OR DISCREPANCY:** If there is any conflict or discrepancy between any provision added to this Agreement (including any Schedule attached hereto) and any provision in the standard pre-set portion hereof, the added provision shall supersede the standard pre-set provision to the extent of such conflict or discrepancy. This Agreement, including any Schedule attached hereto, shall constitute the entire Agreement between Landlord and Tenant. There is no representation, warranty, collateral agreement or condition, which affects this Agreement other than as expressed herein. This Agreement shall be read with all changes of gender or number required by the context.
18. **FAMILY LAW ACT:** Landlord warrants that spousal consent is not necessary to this transaction under the provisions of the Family Law Act, R.S.O. 1990 unless the spouse of the Landlord has executed the consent hereinafter provided.
19. **CONSUMER REPORTS:** The Tenant is hereby notified that a consumer report containing credit and/or personal information may be referred to in connection with this transaction.

INITIALS OF TENANT(S):

INITIALS OF LANDLORD(S):



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20. BINDING AGREEMENT: This Agreement and acceptance thereof shall constitute a binding agreement by the parties to enter into the Lease of the Premises and to abide by the terms and conditions herein contained.

SIGNED, SEALED AND DELIVERED in the presence of:

(Witness)

(Witness)

(Witness)

IN WITNESS whereof I have hereunto set my hand and seal:

(Tenant or Authorized Representative)

(Tenant or Authorized Representative)

(Guarantor)



DATE Apr. 16, 2017



DATE Apr. 16, 2017



DATE

We/I the Landlord hereby accept the above offer, and agree that the commission together with applicable HST (and any other tax as may hereafter be applicable) may be deducted from the deposit and further agree to pay any remaining balance of commission forthwith.

SIGNED, SEALED AND DELIVERED in the presence of:

(Witness)

(Witness)

IN WITNESS whereof I have hereunto set my hand and seal:

(Landlord or Authorized Representative)

(Landlord or Authorized Representative)



DATE Apr. 15, 2017



DATE Apr. 15, 2017

SPOUSAL CONSENT: The undersigned spouse of the Landlord hereby consents to the disposition evidenced herein pursuant to the provisions of the Family Law Act, R.S.O. 1990, and hereby agrees to execute all necessary or incidental documents to give full force and effect to the sale evidenced herein.

(Witness)

(Spouse)



DATE

CONFIRMATION OF ACCEPTANCE: Notwithstanding anything contained herein to the contrary, I confirm this Agreement with all changes both typed and written was finally acceptance by all parties at a.m./p.m. this day of, 20.....

(Signature of Landlord or Tenant)

INFORMATION ON BROKERAGE(S)

Listing Brokerage Tel.No.(.....)

(Salesperson / Broker Name)

Co-op/Tenant Brokerage Tel.No.(.....)

(Salesperson / Broker Name)

ACKNOWLEDGEMENT

I acknowledge receipt of my signed copy of this accepted Agreement of Lease and I authorize the Brokerage to forward a copy to my lawyer.

..... DATE

(Landlord)

..... DATE

Address for Service 4612 ASHLAR CRES., BURLINGTON, ONTARIO

..... Tel.No.(.....)

Landlord's Lawyer

Address

Email

(.....)

Tel.No.

FAX No.

I acknowledge receipt of my signed copy of this accepted Agreement of Lease and I authorize the Brokerage to forward a copy to my lawyer.

..... DATE

(Tenant)

..... DATE

Address for Service 4011 Brickstone Mews, Suite 3805, Mississauga, ON

..... Tel.No.(.....)

Tenant's Lawyer

Address

Email

(.....)

Tel.No.

FAX No.

FOR OFFICE USE ONLY

COMMISSION TRUST AGREEMENT

To: Co-operating Brokerage shown on the foregoing Agreement to Lease:

In consideration for the Co-operating Brokerage procuring the foregoing Agreement to Lease, I hereby declare that all moneys received or receivable by me in connection with the Transaction as contemplated in the MLS Rules and Regulations of my Real Estate Board shall be receivable and held in trust. This agreement shall constitute a Commission Trust Agreement as defined in the MLS Rules and shall be subject to and governed by the MLS Rules pertaining to Commission Trust.

DATED as of the date and time of the acceptance of the foregoing Agreement to Lease.

Acknowledged by:

(Authorized to bind the Listing Brokerage)

(Authorized to bind the Co-operating Brokerage)



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Schedule A
Agreement to Lease - Residential

This Schedule is attached to and forms part of the Agreement to Lease between:

TENANT (Lessee), MICHAEL MATAR & MARLYN MATAR, and

LANDLORD (Lessor), MICHAEL GOUDA & RIHAM GOUDA

for the lease of 4011 Brickstone Mews #3805, Mississauga, ON
Mississauga dated the 16th day of April, 2017

The Lease is a care free net lease to the Landlord for the term of the lease and options.

The Tenant may not assign or sublet the property without the prior written consent of the Landlord, such consent may be unreasonably withheld.

The Parties hereby agree that the term of this lease shall be for twelve (12) months, or as mutually agreed to by the Parties.

The Parties hereby further agree that upon the final closing of the property, wherein title is transferred into the Landlords' names (the "Final Closing Date"), then this lease hereunder shall be extended for a further twelve (12) months from the Final Closing Date, or as mutually agreed to by the parties.

This lease agreement shall be construed in accordance with the laws of the Province of Ontario.

The Parties acknowledge that they have been afforded the opportunity to obtain independent legal advice in regard to their respective rights and obligations under this lease agreement. The Parties further acknowledge having read this lease agreement in its entirety and has executed the same, voluntarily, without duress, coercion or undue influence.

This lease agreement shall enure and be binding upon the respective and permitted successors, heirs and assigns of the Parties.

This lease agreement can be signed in counterpart and the parts together shall constitute the entire document.

This form must be initialed by all parties to the Agreement to Lease.

INITIALS OF TENANT(S):

MM

INITIALS OF LANDLORD(S):

MR/RG



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MISS MARLYN GOUDA
2971 CASTLEBRIDGE DR
MISSISSAUGA ON L5M 5T4

109

DATE 2017-05-01
Y Y Y Y M M D D

PAY TO THE
ORDER OF

Michael & Riham Gouda

\$2,000.00

Only Two Thousand.

/100 DOLLARS

Security features
included
Details on back

BMO Bank of Montreal

55 BLOOR ST. WEST, MANULIFE CTR.
TEL: (416) 927-5915
TORONTO, ONT. M4W 1A8

MEMO



[Signature]

MP

⑈ 109⑈ ⑆03892⑈001⑈

3420⑈451⑈

MISS MARLYN GOUDA
2971 CASTLEBRIDGE DR
MISSISSAUGA ON L5M 5T4

110

DATE 2018-05-01
Y Y Y Y M M D D

PAY TO THE
ORDER OF

Michael & Riham Gouda

\$2,000.00

Only Two Thousand.

/100 DOLLARS

Security features
included
Details on back

BMO Bank of Montreal

55 BLOOR ST. WEST, MANULIFE CTR.
TEL: (416) 927-5915
TORONTO, ONT. M4W 1A8

MEMO



[Signature]

MP

⑈ 110⑈ ⑆03892⑈001⑈

3420⑈451⑈

PSV # 3805

First + last

month rent

04/10/2017 10:11 AM

10:11 AM

Your credit profile


Account closed 10/10/2017 Credit score 682 (Good) 10/10/2017



Account


HELP ?


Marlyn N Gouda




Your email address

marlyn.gouda@gmail.com


Got a new email? 






Your current address

2971 castlebridge drive
Mississauga , ON - L5M 5T4

Got a new address? 





**MEDICAL RESIDENT EMPLOYMENT AGREEMENT
UNIVERSITY MEDICAL RESIDENT SERVICES, P.C.**

Offer Date: 1/22/2016

Start Date: 07/01/2016

1. **Offer of Employment.** University Medical Resident Services, P.C. ("Employer") hereby offers to employ **MICHAEL MATAR** ("Employee") who has received an offer to be a PGY 3 Resident ("Resident") in the University at Buffalo ("UB"), The State University of New York ("SUNY") sponsored **Family Medicine** resident training program ("Program") directed by the UB Program Director ("Program Director"), subject to the terms and conditions of this Agreement. Employee will devote his/her full professional time and best efforts to provide medical services that are directly related to Employee's participation as a Resident in the Program and shall perform those duties in a professional, competent and cooperative manner consistent with his/her training and experience.

2. **Pre-Employment and Employment Conditions.**

(a) Within the specified time frames set forth below, Employee must comply with the following pre-employment conditions:

- (i) sign, date, and return this Agreement to the Program Director within thirty (30) days of the Offer Date set forth above;
- (ii) complete and return to the Program Director within thirty (30) days of the Offer Date a signed Application for Employment, together with all applicable credentialing information;
- (iii) complete and return to the Program Director within thirty (30) days of the Offer Date all required employment paperwork requested by Employer including, but not limited to, New York State and Federal tax and federal guidelines for employment eligibility (e.g. Form I-9 Employment Eligibility Verification);
- (iv) participate in mandatory Employer and UB Graduate Medical Education ("GME") orientation programs including a complete medical history and comprehensive physical examination performed by a physician selected by the Employer prior to commencement of any medical duties; and
- (v) to the extent applicable, provide all necessary documentation and obtain proper immigration status and work authorization (either H-1B or J-1 status) to perform as an Employee who is a Resident, no later than the Anticipated Start Date set forth above.

Employee shall deliver all requested documents to the attention of the Program Director via electronic mail attachment in Adobe Reader format or via facsimile/telecopier, with the original received by the Program Director within the above specified time frames. Failure to do so may result in withdrawal of this Offer of Employment, in which case the Offer will be of no further effect.

(b) In accordance with the UB Graduate Medical Education Resident Occupational Health Policy, Employee must submit to an annual health screening by a physician selected by the Employer during each Contract or Renewal Year; and

(c) Employee agrees to comply with all applicable Employer, UB GME and affiliated teaching hospital ("Hospital") policies throughout the term of employment, including without limitation, the UB GME and/or Employer Moonlighting Policy, Impaired Physician Policy, Academic and Misconduct Review Policy, Duty Hours Policy, Accommodation for Disabilities Policy and Harassment Policy, which policies are set forth on the UB GME website (<http://www.buffalo.edu/smb/GME/policies.php>); and to provide medical services in accordance with all applicable statutes, regulations, rules, orders and directives of all applicable governmental and regulatory bodies. The Employee specifically understands and agrees that he/she may be required to undergo a medical examination (including, but not limited to, blood test(s) and/or urinalysis) or other clinical evaluation if reasonably suspected of impairment or potential impairment to determine compliance with UB GME and/or Employer's Impaired Physician Policy. Failure to comply with any of the UB GME, Program, Hospital, and/or Employer policies may be grounds for immediate disciplinary action including, but not limited to, suspension or termination of employment.

3. **Term and Renewal.** The employment term is effective from 07/01/2016 through 06/30/2017 ("Contract Year") unless terminated sooner pursuant to this Agreement.

4. **Compensation.** Employer shall pay Employee a salary in the amount of \$50,460.00 per year, payable bi-weekly and subject to appropriate withholding and other payroll deductions.

5. **Benefits.** Employee shall be eligible to participate in the Employer provided benefit programs as may now or hereafter be established by the Employer. Detailed information regarding these benefits, such as hospital and health insurance, vacation, professional liability, disability, life insurance, medical and dental insurance, leave of absence (including its effect on

satisfactory completion of the Program), Family Medical Leave Act leave (which includes parental leave), and sick leave can be found on the UB GME website. Mental health care is provided through the health insurance coverage. The Employer reserves the right to amend, substitute and/or terminate any benefit or benefit program during the Contract or Renewal Year.

6. **Professional Qualifications.** The information (written or otherwise) provided in connection with Employee's Application for Employment and all other employment related documents, including without limitation information relating to professional qualifications and competence, must be true and correct as of the Anticipated Start Date. All graduates of a foreign medical school must deliver to the Program Director a valid Educational Commission for Foreign Medical Graduates certificate, or demonstrate satisfactory completion of a Fifth Pathway Program. The Employee shall notify the Employer and his/her Program Director in writing, within five (5) business days in the event any information, representation, duty or covenant set forth herein becomes untrue or inaccurate in any material respect. The failure to adequately complete and/or update the Application for Employment and all other employment related documents, or the failure to notify and disclose the fact of changed circumstances to the Program Director shall in and of itself constitute a basis for denial or revocation of an offer of employment, or termination of employment.

7. **Duties and Responsibilities.**

(a) Employee. The Employee shall at all times:

- (i) act in a manner consistent with generally accepted standards of medical care in the Western New York community and the UB Resident Code of Professional Conduct; and
- (ii) comply with all applicable laws and regulations for health care workers; adhere to the ethical and professional standards of the medical profession and all professional and governmental agencies which set standards for the practice of medicine generally; and
- (iii) be bound by the by laws and applicable rules, regulations and procedures at each Hospital in which Employee practices medicine pursuant to this Agreement and such policies, procedures and guidelines as are now or may hereafter be established by the Employer, UB GME or the Program; and
- (iv) accept all duty assignments and attend all UB GME and Program required courses, seminars, and classes; and
- (v) promptly report to Employer and the Program Director any and all employment-related accidents and illnesses and promptly pursue appropriate treatment for such accidents and/or illnesses.

(b) University at Buffalo (UB). UB is the sponsoring institution responsible for providing over all management and control of accredited graduate medical education programs in the Buffalo Niagara Region, and shall be generally responsible for complying with the requirements of the Accreditation Council on Graduate Medical Education, American Osteopathic Association, and/or Commission on Dental Accreditation and other bodies having jurisdiction.

(c) Hospitals. Each Hospital is responsible for the provision of (i) professional medical services by Employee to patients at the Hospital and (ii) the Employee's professional liability coverage at all times in which the Employee is providing professional medical services as part of his/her Program duties for the Hospital. Each Hospital retains the right to administer disciplinary proceedings in accordance with its applicable by laws, rules and regulations.

(d) Program. The sole purpose of the Program Director's signature on this Agreement is to certify to Employer that the Employee has received an offer to be a Resident in the Program named in this Agreement. The Program is responsible for the provision of (i) the educational curriculum, content and experience in accordance with the guidelines, policies and procedures set forth by the relevant accrediting body and/or UB, (ii) information on the effect of leaves of absence on satisfying the educational criteria for completion of the Program, and (iii) information relating to access to and eligibility for certification by the relevant certifying board.

8. **Termination of Employment.** The employment and professional relationship provided for in this Agreement may be terminated at any time by (i) the Program Director with the written concurrence of the Employer, or (ii) by the Employer with the written concurrence of the Program Director, each of which is subject to the UB GME Academic and Misconduct Review Policy.

9. **Non-Renewal of Agreement.** This Agreement may not be renewed upon the recommendation of the Program Director, subject to the UB GME Academic and Misconduct Review Policy, provided that, whenever possible, Employee will be given not less than four (4) months notice of nonrenewal.

10. **Entire Agreement.** This Agreement constitutes the entire agreement between the parties relative to the subject matter hereof and may not be changed orally but only by an agreement in writing signed by Employer and Employee. This Agreement supersedes, rescinds, and replaces any other oral or written agreement, contract or memorandum of understanding between the parties related to the Contract Year.

11. **Further Assurance.** Employee shall execute and deliver all documents, papers and instruments presented by the Program Director and/or Employer necessary or appropriate to carry out the Program and the terms of this Agreement.

12. **Notices.** All notices and communications required or permitted under this Agreement shall be in writing and personally delivered, or sent by first class United States mail, postage prepaid and addressed to the party at the addresses set forth in this Section. All mailed notices shall be deemed given when personally delivered or on the date deposited in the United States mail.

If to Employer: University Medical Resident Services, P.C.
117 Cary Hall
3435 Main Street
Buffalo, NY 14214
Attention: President

If to Employee, to the address provided by Employee to the UB Office of Graduate Medical Education.

13. **Non-Competition.** Neither UBGME nor any of its ACGME-accredited programs requires a resident/fellow to sign a non-competition guarantee or restrictive covenant.

14. **Waiver.** The waiver by either party of any breach or violation of any provision of this Agreement shall not operate as, or be construed to be, a waiver of any subsequent breach or violation.

15. **Governing Law.** This Agreement shall be construed, interpreted and enforced under and in accordance with the laws of the State of New York without regard to conflict of law.

IN WITNESS WHEREOF, the parties hereto have duly executed this Agreement as of the 8 day of February, 2016.

Dated: 2/8/16

Dated: 1/27/16

University Medical Resident Services, P.C.

By: Timothy F. Gabryel, M.D.

Timothy F. Gabryel, M.D., President

Michael Matar
MICHAEL MATAR

I hereby certify to University Medical Resident Services, P.C. that the Employee in this Agreement received an offer to be a Resident in the Program named in this Agreement

Dated: 2/3/16

Diana Wilkins, MD

Diana Wilkins, MD
UB Program Director

NOT VALID WITHOUT ALL 3 SIGNATURES

Pay Statement

M&T Bank myHR

M&T Bank (001)
One M&T Plaza
Buffalo, NY 14203
877-473-4732

Pay Statement

Period Start Date 03/11/2017
Period End Date 03/24/2017
Pay Date 03/31/2017
Document 3141222
Net Pay \$1,785.57

Pay Details						
Marlyn Gouda 1285 Main Street Unit 303 Buffalo, NY 14209 USA	Employee Number	79427	Pay Group	One Week Lag	Federal Income Tax	M 0
	SSN	XXX-XX-XXXX	Location	Larkin Building	NY State Income Tax (Residence)	M 0
	Job	Sr Risk Analyst	Cost Center	6279 - 6279	NY State Income Tax (Work)	M 0
	Pay Rate	\$29.42	Department	CONTR - Controller		
	Pay Frequency	Biweekly	Division	803000 - Finance		
			SBU	FNCEDI - FINANCE SBU		

Earnings						
Pay Type	Period Start	Period End	Hours	Pay Rate	Current	YTD
Prev Yr FI Hol			0.0000	\$0.0000	\$0.00	\$230.77
Life Flex Cr					\$0.48	\$3.36
LTD Flex Cr					\$2.08	\$14.56
Holiday			0.0000	\$0.0000	\$0.00	\$932.30
Incentive D A			0.0000	\$0.0000	\$0.00	\$1,500.00
Other Hours			0.0000	\$0.0000	\$0.00	\$14.42
Regular Pay	03/11/2017	03/17/2017	36.0000	\$29.4231	\$1,059.23	
Regular Pay	03/18/2017	03/24/2017	40.0000	\$29.4231	\$1,176.92	\$13,940.76
Sporadic			0.0000	\$0.0000	\$0.00	\$461.54
Vacation	03/11/2017	03/17/2017	4.0000	\$29.4231	\$117.69	\$588.46
Prev Yr Vac			0.0000	\$0.0000	\$0.00	\$216.35
Total Hours 80.0000						

Deductions					
Deduction	Pre-Tax	Employee		Employer	
		Current	YTD	Current	YTD
EE Life FT	Yes	\$0.48	\$3.36	\$0.00	\$0.00
Long Term Dbl	No	\$2.08	\$14.56	\$0.00	\$0.00
90 Hour Plan	No	\$0.00	\$0.00	\$90.00	\$630.00
Benefit Alloca	No	\$0.00	\$0.00	\$541.38	\$3,768.44

Taxes		
Tax	Current	YTD
Federal Income Tax	\$267.62	\$2,234.48
Employee Medicare	\$34.16	\$259.54
Social Security Employee Tax	\$146.07	\$1,109.75
NY State Income Tax	\$119.22	\$972.90
NY Disability Employee	\$1.20	\$8.40

Paid Time Off	Net Pay Distribution		
	Account Number	Account Type	Amount

		xxxxxxx4984	Checking	\$1,785.57	
		Total		\$1,785.57	
Pay Summary					
	Gross	FIT Taxable Wages	Taxes	Deductions	Net Pay
Current	\$2,356.40	\$2,355.92	\$568.27	\$2.56	\$1,785.57
YTD	\$17,902.52	\$17,899.16	\$4,585.07	\$17.92	\$13,299.53



RBC
Royal Bank

Mike Mattiacci Office: (905) 333-9419, Cell: (905) 466-8208, Fax (905) 333-6852

April 7, 2017

To: **Amacon Developments**
465 Burnhamthorpe Rd. W
Mississauga, Ontario

Re: **Michael & Riham Gouda**
4612 Ashlar Cres
Burlington, Ontario, L7M 0J1

Subject - Purchase @ Unit 3805, 4011 Brickstone Mews, Mississauga, Ontario

Project Name – Park Side Village, Mississauga.

Please accept this letter as confirmation **Michael & Riham Gouda** have been approved for a mortgage of **\$ 279,120** based on purchase price @ **\$ 348,900** for new property purchased as profiled above @ **Park Side Village – Mississauga, Ontario**

Expected occupancy – **Thursday April 13, 2017**. Registration expected in next 5-8 months

Please call if you have any questions. Thank you.

A handwritten signature in black ink, appearing to be 'Mike Mattiacci', with a long horizontal line extending to the right.

Mike Mattiacci
RBC Mobile Mortgage Specialists
Phone 905-333-9419