## Information Form Respecting Corporations/Other Entities

## If you act for a corporation

1.	Please	provide	the	following	inform	ation:
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ARRIVOLUMENTO PROGRAMMA DE CARRESTO DE	
(a) Name of corporation:	1877471 Ontano Inc
(b) Corporate address:	1385 Dunian Road, Oakville, ON LGT 2R2
(c) Nature of Principal Business:	Investments
(d) Names of Directors:	Amuradha Vi + Rin Sayal
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- 2. Please provide the following records:
  - (a) Copy of a corporate record showing authority to bind corporation regarding transaction<sup>1</sup>
  - (b) Copy of record confirming existence of corporation<sup>2</sup>:
  - (c) If the records are in paper format, please enclose a copy with this form. In the event that you provide an electronic version of a record which is publically accessible, please provide the following information:

i.	Registration number of corporation:	
ii.	Type of verification record:	
iii.	Source of verification record:	

 $<sup>^{1}</sup>$  For example, certificate of incumbency, articles of incorporation or by-laws setting out the officers duly authorized to sign on behalf of corporation.

<sup>&</sup>lt;sup>2</sup> For example, certificate of corporate status or other record confirming corporation's existence.

11 you act for	an entity oth	er than a corporation (e.g., partnership)
1. Please provid	e the following in	formation:
(a) Name o	of entity:	
(b) Entity a	ddress:	
(c) Nature of Principal Business:		
(a) Copy of  If the rec  you prov	cord is in paper fo	g existence of entity <sup>3</sup> : ormat, please enclose a copy with this form. In the event that version of a record which is publically accessible, please
i.	Registration number of entity:	
ii.	Type of verification record:	
iii.	Source of verification record:	
Please indicate respect to this r	whether or not the	poration or an entity other than a corporation ne corporation or entity is acting on behalf of a third party with ction.  Cting on behalf of a third party?  Reasonable suspicion

<sup>&</sup>lt;sup>3</sup> For example, partnership agreement, articles of association.

(b) Name of third party:	
(c) Address:	
(d) Date of Birth:	
(e) Telephone number:	
(f) Nature of Principal Business or Occupation:	
(g) Incorporation number and place of issue (if applicable):	
(h) Relationship between third party and corporation or entity:	

## Consent

I, [name of individual], as a duly authorized representative of [name of corporation], hereby authorize [lawyer] to release and communicate to [insert name] the corporation information set out in the attached Information Form Respecting Corporations/Other Entities for the sole purpose of enabling [insert name] to comply with his/her obligations under the *Proceeds of Crime (Money Laundering) and Terrorist Financing Act* and its associated Regulations.

Name in print:	Ritu Sayal	
Signature:	Don	771. 444.071 481.08
Date:		