Solium FINANCIAL
a division of Solium Capital, Inc.

(also referred to as the "Firm")

Account Agreement
Two Persons with Right of Survivorship

Client Identification Number

To: **The Firm**

We, the undersigned,

_____ and
First Name Initial Last Name

_____ both
First Name Initial Last Name

of the City of _____ , in the Province of _____ , hereby instruct and authorize the Firm to open an account in our two names, so that the same shall always be vested in us or the survivor thereof.

The Firm is also authorized and empowered to take all instructions for or in connection with the said account and for the placing, sale or other disposition of existing and future trades or transactions from either one or the other of us. The Firm is further authorized and empowered to issue cheques upon or in connection with the said account or to pay any monies out of the said account to either one or the both of us, and payment to either of us shall be good and sufficient discharge to the Firm in respect of such payment, and payment to the survivor of us shall be good and sufficient discharge to the Firm notwithstanding the fact that the executors or administrators of either of us may not have concurred therewith.

We agree to be and become both jointly and severally liable and responsible to the Firm for all debts and liabilities arising in connection with said account including existing and future trades and transactions put through or carried in the said account and to indemnify and to save the Firm harmless from all liability, loss, costs and expenses, including legal fees which the Firm may suffer in connection therewith, and to pay on demand any and all monies and/or deliver any securities at any time due in our accounts.

In case of death of either one of us, all monies then or thereafter in the hands of the Firm and all trades and transactions connected with the said account shall belong to the survivor of us with whom the Firm shall be entitled either to continue the account or at the option of the Firm, to close out the account and all trades and transactions at such time or times and at such price or prices and either with or without notice to the survivor of us as the Firm deems advisable. In case of death of either one of us, the survivor(s) of the undersigned shall immediately notify the Firm of the name of the deceased in writing, and the Firm shall thereupon take such action or require such waivers, consents, releases, or restrict transactions in the account as may be deemed advisable by the Firm to protect the account or the Firm against liability.

The provisions of this agreement shall be considered supplementary to the New Account Application Form which we have signed and do hereby ratify.

_____ _____
Signature of Witness Signature of Applicant

_____ _____
Name of Witness Name of Applicant

_____ _____
Name of Co-Applicant Signature of Co-Applicant

Dated at _____, in the Province of _____, this _____ day of _____, 20____