Solium FINANCIAL
a division of Solium Capital, Inc.

Guarantor Attestation
(For use in Canada only)

(also referred to as the "Firm")

Client Identification Number

To: **The Firm**

I, _____(the "Guarantor"), confirm that I am an individual engaged in one of the following professions in Canada:

(Check applicable)

- ❑ a commissioner of oaths;
- ❑ a dentist, medical doctor or chiropractor;
- ❑ a judge, magistrate or lawyer;
- ❑ a notary (in Quebec) or a notary public;
- ❑ an optometrist or pharmacist;
- ❑ an accredited public accountant (APA), chartered accountant (CA), certified general accountant (CGA), certified management accountant (CMA), or a registered public accountant (RPA);
- ❑ a professional engineer (P.Eng. in a province other than Quebec) or engineer (Eng. in Quebec), or
- ❑ a veterinarian

As the Guarantor, I solemnly declare that I have met the person identified below as the "Client" and have examined a government issued passport or driver's licence presented by them, a copy of which is attached. I certify that the photo contained within this identification is a true likeness of the individual who has presented himself / herself to me. I have also examined the signature affixed by the Client below in my presence and certify that it is a true likeness of the signature contained within the identification I have verified.

I further declare that I am not acting on behalf of the person whose identity I am verifying.

Guarantor Address

(Street No. & Name / Physical address required) Suite

City Province Postal Code Telephone ( )

Client Address

(Street No. & Name / Physical address required) Suite

City Province Postal Code Telephone ( )

Dated on _____, 20 _____.

X _____
Signature of Guarantor

X _____
Signature of Client

_____
Name of Guarantor

_____
Name of Client