Canada)	
Province of Ontario)	S.S.
City of Ottawa)	

SPECIAL POWER OF ATTORNEY

							, citizen o			of
			,		years	of	age,	resid	ling	at
							Canad	la, d	lo	hereby
appoint ar	nd constitut	e							, (of legal
age and a	resident o	f							, to	be my
true and l	awful attori	ney-in-fac	t, for me	and in r	ny name,	place and	l stead, to	o do a	nd p	erform
the followi	ng acts and	things to	wit:							
1										
										;
2										
									;	
3										
	REBY GIVI whatsoever									
to all inte	nts and pu	rposes as	I might	or could	lawfully d	o if perso	nally pre	sent, a	and	hereby
ratifying a	and confirm eof.	ing all th	at my sa	aid attorr	ney shall l	awfully d	o or caus	se to t	be do	one by
Th	is authority	shall be v	alid unti	l revoked	•					
INI	WITNESS	WHEDE	OE IL	1		1	مناط المما		_	da
IIN	WITNESS				eumo sei o, Canada.	=	na tins		_ (uay oi
					_		Affiant		_	
							Timane			