

Date:

David J. Patriarche
Mainstay Insurance Brokerage Inc.
10 Linton Court
Thornhill, Ontario
L3T 5M9

Dear David:

This letter provides to you the exclusive authority to obtain quotations for group insurance coverage for our company. As well, I authorize any active quotations that have been released to other brokers or agents to be transferred to you immediately.

I further acknowledge that the data from both the company and those in our employ, has been obtained with informed consent and with the knowledge that it is to be used for the purpose of obtaining quotations, making application for and the administration of employee benefits. I understand that Mainstay Insurance Brokerage Inc. will supply said information to providers of benefit products and services for the purposes previously mentioned. Further a file will be established with both Mainstay Insurance Brokerage Inc. as well as each provider approached for that purpose.

This appointment supersedes any previous appointments and is to remain in effect unless revoked in writing by the undersigned.

Thank you for your co-operation.

Sincerely,

Authorized Signature:

(printed):

Title:

