



Welcome to BMO InvestorLine Par

Partnership Resolution

Α	SIGNATURES
	BMO InvestorLine Account Number:
	To: BMO InvestorLine Inc.
	In consideration of your carrying a partnership account in the name of: Name of
	Partnership
	Address (number, street) Suite No.
	City or Postal Prov. Code Code
	a duly organized partnership of which each of the undersigned is a general partner, the undersigned jointly and severally agree that each of the following named person(s), to wit (either one or maximum two persons):
	Named Person (1)
	Named Person (2)
	shall have the authority on behalf of the partnership account to buy, sell and otherwise deal in securities through you as brokers, on margin or otherwise; to receive on behalf of the partnership account demands, notices, confirmations, reports, statements of account, and communications of every kind; to receive on behalf of the partnership money, securities and property of every kind, and to dispose of same; to make on behalf of the partnership account agreements relating to any of the foregoing matters and to terminate or modify same or waive any of the provisions thereof; and generally to deal with you on behalf of the partnership account as fully and completely as if he/they alone were interested in said account, all without notice to the other or others interested in said account. The authority hereby conferred shall remain in force until written notice of its revocation addressed to you and delivered at your office at:
	The undersigned hereby certify that the members of said partnership are as follows:
	Partner (1)
	Title Name Name Int.
	Home Address (number, street) Suite No.
	City or Town Prov. Postal Code Date of Birth (YY/MM/DD) Y Y M M D D D
	Occupation Type of Business Business
	Employer Job Name Description Description
	% of Financial Interest in the Club Email Date (YY/MM/DD) Y Y M M D D
	Residency for Tax purposes (Check all that apply)
	Canada (You must be a resident of Canada to open a BMO InversorLine account) Social Insurance Number (required by Canada Revenue Agency) If you are using a SIN starting with a a photocopy of your SIN card showing a valid expiry date.
	□ U.S. Tax Identification Number (please provide a reason if Tax Identification Number is missing)
	Other (please specify) Tax Identification Number
	□ Other (please specify) Tax Identification Number (please provide a reason if Tax Identification Number is missing)
	Reasons for missing Tax Identification Number (TIN):
	□ 1. I have applied for a TIN but have not yet received one.
	☐ 2. My jurisdiction of tax residence does not issue TINs to its residents.
	□ 3. Other (please provide details)
	Certification
	I certify that the information given above is correct and complete. I will give BMO InvestorLine a new form within 30 days of any change in circumstances that causes the information
	on this form to become incomplete or inaccurate.
	Signature

A S	IGNATURES (continued)
Pa	rtner (2)
Titl	e Last
	me Address
Cit	Imber, street) No. Date of Birth (YY/MM/DD) Y M M D D
	rupation
Na	me Description
	of Financial Interest Email Date the Club Address (YY/MM/DD) Y Y M M D D
Re	sidency for Tax purposes (Check all that apply)
	Canada (You must be a resident of Canada to open a BMO InversorLine account) Social Insurance Number
	U.S. Tax Identification Number (please provide a reason if Tax Identification Number is missing)
	Other (please specify) Tax Identification Number (please provide a reason if Tax Identification Number is missing)
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	1. I have applied for a TIN but have not yet received one.
	2. My jurisdiction of tax residence does not issue TINs to its residents.
	3. Other (please provide details)
Ce	tification
	ertify that the information given above is correct and complete. I will give BMO InvestorLine a new form within 30 days of any change in circumstances that causes the information this form to become incomplete or inaccurate.
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Pa	rtner (3)
Titl	e Name Name IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII
	me Address Sqite No.
Cit To	y or Postal Date of Birth (YY/MM/DD) Y M M D D
00	cupation Type of Business Business
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0/0	of Financial Interest Email Date (YY/MM/DD) Y Y M M D D
	sidency for Tax purposes (Check all that apply)
	Canada (You must be a resident of Canada to open a BMO InversorLine account) Social Insurance Number (required by Canada Revenue Agency) If you are using a SIN starting with ga 9 please submit a a photocopy of your SIN card showing a valid expiry date.
	U.S. Tax Identification Number (please provide a reason if Tax Identification Number is missing)
	Other (please specify) Tax Identification Number (please provide a reason if Tax Identification Number is missing)
	Other (please specify) Tax Identification Number (please provide a reason if Tax Identification Number is missing)
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	2. My jurisdiction of tax residence does not issue TINs to its residents.
	3. Other (please provide details)
	tification
	ertify that the information given above is correct and complete. I will give BMO InvestorLine a new form within 30 days of any change in circumstances that causes the information this form to become incomplete or inaccurate.
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Pa	rtner (4)
Titl	e Last
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