

AGENT'S LICENCE NO:
94013403

Financial Services
Commission of Ontario



LIFE INSURANCE LEVEL II
INCLUDING ACCIDENT AND SICKNESS INSURANCE
MATT MACNAB

LEVEL II STATUS
until January 4, 2005
unless this licence is lawfully suspended or revoked before that date

Superintendent, Financial Services

January 5, 2003

PERMIS D'AGENT NO:
94013403

Commission des services
financiers de l'Ontario



ASSURANCE-VIE NIVEAU II
Y COMPRIS L'ASSURANCE ACCIDENT ET MALADIE
MATT MACNAB

NIVEAU II
jusqu'au 4 janvier 2005
sauf en cas de suspension ou d'annulation légale du permis avant cette date

Surintendant des services financiers

le 5 janvier 2003

IT IS MUTUALLY UNDERSTOOD AND AGREED, this insurance is hereby amended as indicated by [X]

- | | |
|--|--|
| 1. <input checked="" type="checkbox"/> Annual Premium to \$3,559 | 8. <input type="checkbox"/> Return Premium of \$ |
| 2. <input type="checkbox"/> Effective Date | 9. <input type="checkbox"/> Anniversary Date to |
| 3. <input type="checkbox"/> Limit of Liability to \$ | 10. <input type="checkbox"/> Retention to \$ |
| 4. <input type="checkbox"/> Named Assured Changed,
As Shown Below | 11. <input type="checkbox"/> Assured's Address Changed,
As Shown Below |
| 5. <input type="checkbox"/> Additional Assured(s) or Subject(s)
Of Coverage, Named Below, Added | 12. <input type="checkbox"/> Additional Assured(s) or Subjects(s)
Of Coverage, Named Below, Deleted |
| 6. <input type="checkbox"/> Exclusion(s), Added | 13. <input type="checkbox"/> Exclusion(s), Deleted |
| 7. <input type="checkbox"/> Additional Premium of \$ | 14. <input checked="" type="checkbox"/> Other |

14. Experience and Loss Control Credits have been applied to the premium.

In all other respects, this insurance remains unchanged.

Attached to and becoming part of No. CEO22020-14

Mail To:

The CG&B Group
120 South Town Centre Blvd
Markham, ON L6G 1C3

Issued To:

O.B. Villeneuve Insurance Brokers Ltd.
370 Churchill Avenue North
Ottawa, ON K1Z 5C2

Date Effective: August 31, 1998

EMPLOYERS REINSURANCE CORPORATION

Countersigned.

Mary Jo Kamorowski
.....
Authorized Representative

M.A.W.
.....
President

Chas. J. Connelly
.....
Secretary