IDENTIFICATION VERIFICATION FORM

Full Name	_	Date of Birth	*****
Occupation			
Identification Viewed			
Туре	Number		Place of Issue
Туре	Number	- .	Place of Issue
****	**********	*****	
Full Name		Date of Birth	
Occupation			
Identification Viewed			
Туре	Number		Place of Issue
Туре	Number		Place of Issue
Address:			- Part of the State Stat
Phone:			
Email:			

CERTIFICATION

I, , a Notary	, a Notary Public in and for the Province of ***			
hereby certify that I have obtained the above informmeans of reviewing originals of the documents not Schedule "A" is a true copy of the original documents	and and have cons ed above. Attached to	firmed their identify by omy certificate as		
Certified in Kingston, Province of Ontario on this	of	, 2009.		
	A Notary Publi	ic in and for the Province		

(Please print name and affix seal of office)