

INSTRUCTIONS

1. The purpose of this Claim Form is to help eligible members claim and receive compensation from a class action settlement. Eligible Claimants are clients of investment advisor Brian Verbeek ("Verbeek") who transferred funds from Registered Retirement Plan to Canadian Western Trust Company ("CWT") to purchase shares in one or more of the following Canadian Controlled Private Corporations ("CCPCS"), which shares then were held in a CWT account, and who have not opted out of this lawsuit (the "CWT Subclass").

2. Review the form carefully and fill out all required information. Please review the checklist below:

- ☐ Identify yourself as a Claimant and use Part I of the Claim Form to explain (i) whether you held the shares in your own name or they were held in the name of your broker or other nominee, (ii) if you are filing this claim on behalf of the beneficial owner, or (iii) if you bought the shares jointly with someone else (e.g., as an administrator, executor, guardian, trustee, etc.). The Claim Form must be filed by the actual Beneficial Owner(s) or the legal representative of such owner(s).

- ☐ List all your purchases and loans, if applicable, during the class period separately and in chronological order, by date, beginning with the earliest.

Please reach out to the Claims Administrator for assistance if you do not have your purchases and loan totals readily available. The Claims Administrator has data from the Plaintiffs and the Defendants that provides this information; please note that this reflects Plaintiffs' and Defendants' records and has not been verified by the Claims Administrator.

- ☐ Attach supporting documentation, such as broker confirmations, trading slips or purchase receipts, which show all the above in respect of your share purchases.

Supporting documentation is required only if you are indicating purchase and loan payments that do not match the Plaintiffs' and Defendants' records. If you are relying on the information provided by the Plaintiffs and the Defendants, you do not need to provide supporting documentation.

- ☐ Indicate whether you wish to receive your compensation via cheque or through a direct deposit into an existing RRSP account. Additional information will be required for direct deposit into RRSP accounts.

- ☐ Submit your completed and signed Claim Form postmarked on or before Thursday, July 20, 2023 addressed to the Claims Administrator:

BCWQ Class Action Claims Administrator

P.O. Box 3355
London, ON N6A 4K3

3. Only those Claimants who submit properly completed Claim Forms with the required proof in a form that is satisfactory to the Claims Administrator are eligible to share in the Settlement Amount. Submission of this Claim Form alone does not guarantee that you will share in the Settlement Amount.





Official
Office
Use
Only

Ivany, et al. v. CWT Class Action

Ontario Superior Court of Justice
Court File No.: 01-B2684

CLAIM FORM

Please Type or Print in the Boxes Below

Do NOT use Red Ink, Pencil, or Staples

**Must Be Postmarked
No Later Than
July 20, 2023**

BCWQ

PART I: CLAIMANT IDENTIFICATION

Last Name

M.I.

First Name

Last Name (Co-Beneficial Owner)

M.I.

First Name (Co-Beneficial Owner)

Company Name (Beneficial Owner - If Claimant is not an Individual)

Filer Name, If Different from Beneficial Owner Listed Above

Capacity of the Filer, if Not Beneficial Owner (e.g., Executor, Administrator).

Bank Account#

Telephone Number (Work)

Telephone Number (Home)

Email Address

MAILING INFORMATION

Address

Address Continued

City

Province

Postal Code

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OB

CB

☐ ATP
☐ KE
☐ ICI

☐ BE
☐ DR
☐ EM

☐ FL
☐ ME
☐ ND

☐ OP
☐ RE
☐ SH

MM / DD / YYYY

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ONLY

PART II. SCHEDULE OF TRANSACTIONS

(You must provide proof to support all of the information where requested below)

- A. Did the Claimants invest for the purposes of purchasing shares through Brian Verbeek in one of the following CCPCs AND it was held in a CWT account:

Atlas McKenzie Inc., Data Safenet Inc., Distribution Perilandaise Inc., Eau-Necessaire Inc., Eurontario Inc., Flash VDO PC Inc., Generatrices 2000 Plus Inc., LMN Techno-Soft Inc., Logiciels St. Malo Inc., Mainmont, NAV et LOGI-CIEL Inc., Sylkon Securities Inc., Vilcorp, Edimax Technologie Inc., Inter Technologie Inc., Intermax Technologie Inc., Via Net Tech Inc. CL-B, or Vox Technologie Inc.

☐ Yes

☐ No

- B. Amount in Canadian Dollars which the Claimant invested for the purposes of purchasing shares through Brian Verbeek in one of the CCPCs certified as a qualified investment held in a CWT account as listed in Section A above:

Please reach out to the Claims Administrator for assistance if you do not have your purchases and loan totals readily available. The Claims Administrator has data from the Plaintiffs and Defendants that provides this information.

PURCHASES

	Trade Date(s) of Shares (List Chronologically)	Number of Shares Purchased	Total Purchase Price (Canadian \$) Including Commissions <i>Please round off to the nearest whole dollar</i>	Proof of Purchase Enclosed?
	M M D D Y Y Y Y			
1.	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/>	C\$ <input type="text"/> . 00	<input type="radio"/> Y <input type="radio"/> N
2.	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/>	C\$ <input type="text"/> . 00	<input type="radio"/> Y <input type="radio"/> N
3.	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/>	C\$ <input type="text"/> . 00	<input type="radio"/> Y <input type="radio"/> N
4.	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/>	C\$ <input type="text"/> . 00	<input type="radio"/> Y <input type="radio"/> N
5.	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/>	C\$ <input type="text"/> . 00	<input type="radio"/> Y <input type="radio"/> N

- C. Complete the following section **ONLY** if the Claimant received a loan in exchange for their share purchases from one of the CCPCs:

1. Please indicate the total of all loans received in exchange for the share purchases held in a CWT account: C\$ Proof Enclosed? ☐ Y ☐ N

2. If the Claimant made payments on these loans, please indicate the total of all loans repaid: C\$ Proof Enclosed? ☐ Y ☐ N



Option 1 - Direct Payment by cheque, subject to an amount that will be withheld by the Claims Administrator on account of taxes that must be remitted to the Canada Revenue Agency (CRA).

Option 2 - Direct deposit into your RRSP Account.

The Claims Administrator will issue a cheque to your designated financial adviser to be deposited into your existing RRSP account. As an example, cheques would be issued to your financial adviser in the following convention, “*ABC Financial Inc. FBO <Your Name>*”. It is recommend that you notify your financial adviser ahead of time of this pending compensation.



PART IV. DECLARATION

I (we) declare under penalty of perjury that the information on this Claim Form is true, correct and complete to the best of my (our) knowledge, information and belief.

I (we) declare that I (we) have disclosed all purchase and loan transactions for the time periods identified in this Claim Form.

I (we) also declare that I (we) am (are) not an Excluded Person or Excluded Persons as defined in the Settlement Agreement.

I (we) acknowledge and agree that the Claims Administrator may disclose all information relating to my (our) claim to the Court and counsel to the parties in the Action.

Executed this _____ day of _____ in _____
(Month/Year) (City/Province/Country)

(Sign your name here)

(Sign your name here)

(Type or print your name here)

(Type or print your name here)

(Capacity of person(s) signing, e.g.,
Beneficial Purchaser, Executor or Administrator)

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Beneficial Purchaser, Executor or Administrator)

Proof of Authority to File Enclosed? (Only required if filing
on behalf of the beneficiary.) ☐ Y ☐ N

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on behalf of the beneficiary.) ☐ Y ☐ N

**ACCURATE CLAIMS PROCESSING TAKES A SIGNIFICANT AMOUNT OF TIME.
THANK YOU FOR YOUR PATIENCE.**

Reminder Checklist:

1. Please sign the above declaration.
2. Remember to attach supporting documentation, if available.
3. Do not send original stock certificates; we may not be able to send them back.
4. Keep a copy of your Claim Form and all supporting documentation for your records.
5. If you move, you are required to send the Claims Administrator your new address. Failure to notify the Claims Administrator of a new address may result in your settlement benefits not being paid to you.

