

**INSIDER REPORT**

(See instructions on the back of this report)

**Notice – Collection and Use of Personal Information:** The personal information required under this form is collected on behalf of and used by the securities regulatory authorities set out below for purposes of the administration and enforcement of certain provisions of the securities legislation in British Columbia, Alberta, Saskatchewan, Manitoba, Ontario, Québec, Nova Scotia and Newfoundland. Some of the required information will be made public pursuant to the securities legislation in each of the jurisdictions indicated above. Other required information will remain confidential and will not be disclosed to any person or company except to any of the securities regulatory authorities or their authorized representatives. If you have any questions about the collection and use of this information, you may contact the securities regulatory authority in any jurisdiction(s) in which the required information is filed, at the address(es) or telephone number(s) set out on the back of this report.

**BOX 1. NAME OF THE REPORTING ISSUER (BLOCK LETTERS)**

\_\_\_\_\_

**BOX 3. NAME, ADDRESS AND TELEPHONE NUMBER OF THE INSIDER (BLOCK LETTERS)**

FAMILY NAME OR CORPORATE NAME \_\_\_\_\_  
 GIVEN NAMES \_\_\_\_\_  
 NO. \_\_\_\_\_ STREET \_\_\_\_\_ APT \_\_\_\_\_  
 CITY \_\_\_\_\_  
 PROV. \_\_\_\_\_ POSTAL CODE \_\_\_\_\_  
 BUSINESS TELEPHONE NUMBER \_\_\_\_\_  
 BUSINESS FAX NUMBER \_\_\_\_\_  
 CHANGE IN NAME, ADDRESS OR TELEPHONE NUMBER FROM LAST REPORT  YES  NO

**BOX 4. JURISDICTION(S) WHERE THE ISSUER IS A REPORTING ISSUER OR THE EQUIVALENT**

ALBERTA  ONTARIO  
 BRITISH COLUMBIA  QUÉBEC  
 MANITOBA  SASKATCHEWAN  
 NEWFOUNDLAND  
 NOVA SCOTIA

**BOX 2. INSIDER DATA**

RELATIONSHIP(S) TO REPORTING ISSUER \_\_\_\_\_ DATE OF LAST REPORT FILED \_\_\_\_\_ DAY / MONTH / YEAR  
 CHANGE IN RELATIONSHIP FROM LAST REPORT  YES  NO  
 OR  
 IF INITIAL REPORT, DATE ON WHICH YOU BECAME AN INSIDER \_\_\_\_\_ DAY / MONTH / YEAR

**BOX 5. INSIDER HOLDINGS AND CHANGES (IF INITIAL REPORT, COMPLETE SECTIONS A, D, E AND F ONLY. SEE ALSO INSTRUCTIONS TO BOX 5)**

A		C TRANSACTIONS						D	E	F
DESIGNATION OF CLASS OF SECURITIES	BALANCE OF CLASS OF SECURITIES ON LAST REPORT	DATE DAY / MONTH / YEAR	NATURE	NUMBER/VALUE ACQUIRED	NUMBER/VALUE DISPOSED OF	UNIT PRICE/ EXERCISE PRICE	\$ US	PRESENT BALANCE OF CLASS OF SECURITIES HELD	DIRECT/INDIRECT OWNERSHIP/ CONTROL OR DIRECTION	IDENTIFY THE REGISTERED HOLDER WHERE OWNERSHIP IS INDIRECT OR WHERE CONTROL OR DIRECTION IS EXERCISED

ATTACHMENT  YES  NO

This form is used as a uniform report for the insider reporting requirements under all provincial securities Acts. The terminology used is generic to accommodate the various Acts.

CORRESPONDENCE  ENGLISH  FRENCH

KEEP A COPY FOR YOUR FILE

**BOX 6. REMARKS**

\_\_\_\_\_

The undersigned certifies that the information given in this report is true and complete in every respect. It is an offence to submit information that, in a material respect and at the time and in the light of the circumstances in which it is submitted, is misleading or untrue.

**BOX 7. SIGNATURE**

NAME (BLOCK LETTERS) \_\_\_\_\_ SIGNATURE \_\_\_\_\_ DATE OF THE REPORT \_\_\_\_\_ DAY / MONTH / YEAR