



Authorization

We, \_\_\_\_\_, and \_\_\_\_\_,
(Name of Interest Holder as appears on Title Print) (Name of Interest Holder as appears on Title Print)
authorize:

[ ] Assignment to \_\_\_\_\_ of Interest Register Number \_\_\_\_\_
Interest Number(s)/Share Number(s)
\_\_\_\_\_

[ ] Amendment of Interest Register Number \_\_\_\_\_

[ ] Full Discharge of Interest Register Number \_\_\_\_\_

[ ] Partial Discharge of Interest Register Number \_\_\_\_\_
Interest Number(s)
\_\_\_\_\_

\_\_\_\_\_
Date (day, month, year) Witness Signature Interest Holder Signature

\_\_\_\_\_
Date (day, month, year) Witness Signature Interest Holder Signature

[ ] Check if Witness is Lawyer for the Province of Saskatchewan \_\_\_\_\_
Lawyer Name

Affidavit of Execution (if witness is not a Saskatchewan lawyer)

I, \_\_\_\_\_ of \_\_\_\_\_ in the Province of \_\_\_\_\_
Witness Name Place

make oath and say that:

1. I personally know \_\_\_\_\_ and \_\_\_\_\_ who are
(person whose signature was witnessed) (person whose signature was witnessed)

Or

I have satisfied myself that \_\_\_\_\_ and \_\_\_\_\_ are
(person whose signature was witnessed) (person whose signature was witnessed)

the Individuals named in this document and whose names are subscribed to it and I was personally present when it was signed.



2. The individuals whose signatures I witnessed are in my belief the full age of eighteen years.

Sworn before me at \_\_\_\_\_

in the Province of \_\_\_\_\_

on \_\_\_\_\_

Date (day, month, year)

\_\_\_\_\_  
Witness Signature

\_\_\_\_\_  
\_ A Commissioner for Oaths for Saskatchewan **OR**  
Notary Public for the Province of

\_\_\_\_\_  
My commission/appointment expires

\_\_\_\_\_ **OR** Being a Solicitor

Date (day, month, year)