

Exhibit B**Affidavit of Loss and Agreement of Indemnity**

Blanket Lost Instrument Bond No. 10030217 in favour of TSX Trust Company and the Issuing Corporation "Obligees"

Coverage Required:

☐ Open Penalty☐ Fixed Penalty

Current Market Value of Security:

as of

Surety bond premium:

(Only valid for 90 days)

Date of Stop Transfer:

Complete Description of Lost Security (the "Original" whether one or more):

Certificate/Account No.	No. of shares/Bond value \$	Class of shares	Issued by the "Issuing Corporation"	Registered in the name of

NOTE: Form must be completed by at least ONE legal representative, or appointed Administrator signed in personal capacity.**1. DEPONENT INFORMATION:**

I/We, _____

(Print name/s)

(the "Deponent" which term includes every signatory hereto and any person listed in Section 5) of legal age, being duly sworn, depose and state that:

Deponent Address: _____

City/Town: _____

Province/State: _____

Postal/Zip Code: _____

Country: _____

Date of Birth: _____

Phone No. _____

Email Address: _____

Bond payment option: ☐ Cheque ☐ Credit Card

If credit card is selected, you will receive an email with instructions for payment if the submission is in good order.

The Deponent is the owner of or is acting in a representative or fiduciary capacity with respect to the above lost Original.

2. CIRCUMSTANCE OF LOSS:

The Original has been lost, stolen, destroyed, or misplaced under the following circumstances:

Where kept: _____

How lost: _____

When misplaced/ date of loss (dd/mm/yyyy): _____

If stolen, provide details+ copy of police report: _____

Was the Original endorsed for transfer?

☐ Yes☐ No☐ UnknownIf **YES**, describe the form of endorsement and state whether your signature was guaranteed:

3. The Deponent has made or caused to be made a search for the Original and has been unable to recover the Original.

4. If the Deponent should find or recover the Original, the Deponent will immediately surrender the Original to the Issuing Corporation, its transfer agents or the Surety for cancellation without receiving any consideration therefor.

5. LEGAL REPRESENTATIVE OR FIDUCIARY CAPACITY (Complete ONLY if applicable)

- i. the Deponent was the unconditional owner of the Original at the time of loss and is entitled to the full and exclusive possession thereof; and
- ii. neither the Original nor the rights of the Deponent therein have, in whole or in part, been assigned, transferred, hypothecated, pledged or otherwise disposed of, in any manner whatsoever; and
- iii. no person, firm or corporation other than Deponent has any right, title claim, equity or interest in, to, or respecting the Original or the proceeds thereof; OR
- iv. the Deponent's interest in the Original is in a representative or fiduciary capacity, as follows:

Deponent is _____ for _____
(Ex. – Estate Trustee, Administrator, Guardian, Power of Attorney, etc.)

The following person(s) have an interest in the Original as indicated below:

Name & Address**	Interest: (ex. Heir, Legatee, Beneficial Owner)	Percentage (%) of Interest

Note: Person(s) named above having an interest in the Original must also execute this Affidavit of Loss and Agreement of Indemnity. **Attach supporting notarized copies of documentation of Deponent's representative or fiduciary capacity**.**

6. INDEMNITY

The Deponent makes this affidavit for the purpose of requesting and inducing the Issuing Corporation and its agents to issue new securities in substitution for the Original and Travelers Insurance Company of Canada (the "Surety" which term includes all of its subsidiaries, affiliates, successors and assigns) to assume liability in respect thereof under its **Blanket Lost Instrument Bond No. 10030217 (the "Bond")**

NOW, THEREFORE, in consideration of the Surety assuming liability or liability attaching under its Bond in favour of the Oblige, the Issuing Corporation and its agents, the Deponent (jointly and severally, if more than one) hereby agrees at all times to indemnify and save harmless the Surety from and against any and all liabilities, losses, damages, judgments, costs, charges, counsel fees and expenses of every nature and character, which the Surety may sustain or incur by reason or on account of assuming liability or liability attaching under its Bond.

7. PRIVACY CONSENT:

The Deponent acknowledges that the evaluation of any application for products of the Surety will involve the collection, use and disclosure of personal information, including the information contained in this application and other sources gathered through legal means. The Deponent hereby consents to the following:

The collection, use and disclosure of personal information is for the purpose of underwriting bonds and policies, bond or policy management, all extensions, renewals, substitutions and modifications of the bonds or policies and claims administration. Each such activity which may include conducting initial and on-going credit investigations.

In the ordinary course of the Surety's business, personal information may be disclosed to reinsurers, legal advisors, credit bureaus, other financial institutions, regulatory bodies and any third party deemed necessary by the Surety.

In the event information about other individuals (e.g., family members, employees, shareholders) is provided or collected from other sources, the Deponent represents and warrants that those persons have consented, to the extent required by law, to the collection, use and disclosure of their personal information for the aforementioned purposes.

For further information, the Surety's Privacy Policy is available for review online at www.travelerscanada.ca

NOTE: THE SURETY RESERVES THE RIGHT TO REQUEST ADDITIONAL INFORMATION

8. The present agreement shall be construed in accordance with the laws of the Province of Ontario and the laws of Canada applicable therein and shall be treated in all respects as a contract of the Province of Ontario. Each of the parties hereto hereby irrevocably attorns to the jurisdiction of the courts of the Province of Ontario.
9. Declaration: The undersigned hereby declare(s) that:
 - a) All the information provided herein is to the best of my/our knowledge true, complete and correct.

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- b) The Surety may complete any blanks left or correct any errors in completing any blanks herein and such insertions or corrections shall be prima facie correct.

SIGNATURES:

Signed sealed and dated, this _____ day of _____ 20 _____

DEPONENT SIGNATURE:

<u>Signature of Deponent</u>	
x	Signature
Print Name	
Print Title if signing in representative or fiduciary capacity	
Address	

<u>Notary/Commissioner Attestation</u>	
A Deponent has subscribed and sworn before me:	
x	Notary Signature
Print Name: _____	
Date: _____ (Affix Seal/ Stamp)	
Commission Expiry: _____	

<u>Signature of Deponent</u>	
x	Signature
Print Name	
Print Title if signing in representative or fiduciary capacity	
Address	

<u>Notary/Commissioner Attestation</u>	
A Deponent has subscribed and sworn before me:	
x	Notary Signature
Print Name: _____	
Date: _____ (Affix Seal/ Stamp)	
Commission Expiry: _____	

CORPORATE SIGNATURE:

Print Name of Corporation
Signature of authorized director, officer, manager or official
Print Name
Signature of authorized director, officer, manager or official
Print Name
I HAVE AUTHORITY TO BIND THE CORPORATION
Head Office Address

Affirmation:

I hereby make oath and say (or affirm) as follows:

1. I am a duly authorized director, officer, manager or official of the above-noted Corporation that entered into the present agreement as an Indemnitor. In such capacity I am familiar with all of the documents which set forth and establish the rights which govern the affairs, power and authority of such Corporation including, to the extent applicable, the certificate or articles of incorporation, bylaws and corporate resolutions of such Corporation. Having reviewed all such applicable documents and instruments and such other facts as I deemed appropriate, I hereby confirm that the Corporation has the power and authority to enter into the present agreement and that the individuals executing the present agreement on behalf of the Corporation are duly authorized to do so;
2. the present agreement is the free and voluntary act and deed of the Corporation for the uses and purposes therein mentioned; and the seal affixed is the seal of the Corporation;
3. I depose and say that the statements therein contained are true

Commissioner/ Notary Attestation:

Sworn before me in the city of: _____
In the Municipality of: _____
In the Province/ State of: _____
Dated (dd/mm/yyyy): _____
Print Name: _____

(Affix seal/ stamp)

Commissioner/ Notary Public