AFFIDAVIT OF AUTHORITY (Government Signatory(ies))

TO THE REGISTRAR:	
NAME:	
(print full name of officer or director)	
I SWEAR / AFFIRM THAT:	
1. I am the o	f (name of government)
(position)	(name of government)
2. I have authority to execute the annexed instrume using a seal.	ent on behalf of the above named government, without
3. The above facts are true to the best of my knowl	edge, information and belief.
SWORN / AFFIRMED BEFORE ME in)	
at in	
(Signature of Notary or Commissioner)	(Signature)
) (print full name)	(print full name)
Notary Public in and for Yukon; or Notary Public or Commissioner for Oaths in and for	
(wiy commission expires))	

^{*} All Notaries and Commissioners outside of Yukon must affix seal