

**SASKATCHEWAN LOCAL INSTRUMENT 11-501
CONFLICTS OF INTEREST**

**FORM 11-501F2
ANNUAL CERTIFICATE OF COMPLIANCE**

To: Chairperson/Director
Saskatchewan Financial Services Commission

I understand the provisions of Saskatchewan Local Instrument 11-501 Conflicts of Interest and confirm that I have observed them.

Check applicable box(es):

- ☐ I do not beneficially own, directly or indirectly, or exercise control or have direction over any securities.
- ☐ I have attached a portfolio statement containing a complete list of all securities that I beneficially own, directly or indirectly, or over which I exercise control or have direction.

If my spouse is a registrant or employed by a registrant pursuant to *The Securities Act, 1988*, I have disclosed below the names of my spouse and the registrant. If I am employed by a registrant pursuant to *The Securities Act, 1988*, I have disclosed below the name of the registrant.

Name of spouse: _____

Name of Registrant/Employer: _____

Dated: _____ Signed: _____

Print name: _____