

Last updated: March 2019

ADVISOR DISCLOSURE

**Independent agent/broker licenced in Ontario,
conflict of interest, ownership relationships disclosures
and Privacy Statement and Consent**

Licences & Jurisdictions

I Armand Bussiere, CEO of Benebreeze Inc., confirm being licensed as a life, health & accident insurance broker in the province of Ontario.

The following are Companies I represent

For insurance and investment products, I maintain access to over 20 insurers, however, I place the majority my business with: RBC Insurance, Canada Protection Plan/Forester Insurance, Manulife, Blue Cross, Industrial Alliance and La Capitale. This list is fluid and may change from time to time, please refer to my website www.benebreeze.ca for an updated list as time goes on.

Relationship with Companies I represent

No Insurer holds any interest in me or Benebreeze Inc. (my company). Nor do I or Benebreeze Inc. hold a significant interest in any insurance company.

Compensation

I am compensated by a sales commission on policies and funds. I sell, and I may also receive a renewal (or service) commission on policies and funds that remain active. Commissions are paid by the company that provides the product you purchased. Furthermore, you are not penalised for having purchased your insurance or investment product through me. If my sales reach a certain level, I may be eligible for additional compensation, such as bonuses, and other benefits, such as conferences.

Conflict of interest

I take the potential of a conflict of interest seriously. My position/profession as a business consultant may be perceived to be a potential conflict of interest with respect to my recommendations to you. However, I confirm that my recommendations will be based on my assessment of your needs.

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Client Privacy Statement and Consent

My/Our Privacy Policy and Commitment to Protecting Your Privacy

I/We value your business and thank you for your confidence in choosing my/our firm as your source for advice and products. As our client, you entrust us/me with your personal information. We/I respect that trust and want you to be aware of my/our commitment to protecting the information you share with me/us in the course of doing business with me/us.

Your Rights as they Pertain to Your Personal Information

- You have the right to know why an organization collects, uses or discloses your personal information.
- You have the right to expect an organization to handle your information reasonably and to not use it for any other purpose other than the one to which you consented.
- You have the right to know who in an organization is responsible for protecting your information.
- You have the right to expect an organization to protect your information from unauthorized disclosure.
- You have the right to inspect the information an organization holds about you and make sure it is accurate, complete and current.
- You have the right to expect an organization to destroy your information when requested or when no longer required for the intended purpose.
- You have the right to confidentially complain to an organization about how it handles your information and to the Privacy Commissioner if need be.

How I/We Collect, Use and Disclose Your Information

By signing below, you give your consent for me/us to obtain, verify, and share your personal information, including financial and medical information, so that I/we may provide you with financial strategies, products and services, which best meet your needs. This consent also allows for the sharing of information with any persons, financial institutions, businesses, or other parties with whom we deal. This may include service providers in jurisdictions outside of Canada and would therefore be subject to the laws of those jurisdictions.

By signing this document, you consent to allowing my/our firm to use and disclose this information in order to:

- Communicate with you in a timely and efficient manner;
- Communicate with you by mail, email, internet or other electronic means;
- Assess your application for investment, insurance and other services available to you by our firm;
- Evaluate claims and underwriting risks when required;

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- Detect and prevent fraud;
- Analyze performance results;
- Act as required or authorized by law;
- Provide printing, mailings, email and marketing information on products & services we offer.

What I/We Will Not Do with Your Information

I/We do not sell client information to anyone. Nor do I/we share your information with organizations outside of our relationship with you that would use it to contact you about their own products or services.

I/We Strive to Protect Your Personal Information

All employees, associated advisors and service provider who are granted access to your records understand the need to keep this information protected and confidential. I/They know I/they are to use the information only for the purposes intended and this expectation is clearly communicated and internalized. I/We've also established physical and systems safeguards, along with proper processes, to protect your information from unauthorized access or use.

Your Privacy Choices

You may withdraw your consent at any time (subject to legal or contractual obligations and on providing us reasonable notice) by contacting our Privacy Officer. Please be aware that withdrawing your consent may prevent us from providing you with requested products or services. We may occasionally use your personal information to advise you of products or services we believe may be of interest to you or fit your personal

circumstances. If you would rather not receive this type of communication, please advise our Privacy Officer listed herein below.

More information

If you need more information about my qualifications, my business relationships or my/our Privacy policy please contact me. It would be my pleasure to help.

The/Our Privacy Officer is

Armand Bussiere, by phone: 613-282-9571, by email: ab@benebreeze.ca, by mail at: 800-1730 St-Laurent Blvd, Ottawa, Ontario, K1G 5L1.

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Client Acknowledgement

I, _____ have received and reviewed this document. I understand any conflicts of interest or potential conflicts of interest outlined in this document. Furthermore, I give my consent to collect and maintain your personal information in your client file and I am willing to continue working with you as my advisor.

Client Signature: _____

Date: _____

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