

- As an Exempt Market Dealer, we are required to obtain, verify and record information that identifies each person and entity that opens an account. We may verify this information through public sources or ask to see other identifying documents.
- This form is only valid for a corporation, partnership or other entity. If the customer is not a corporation, partnership or other entity and is a Canadian resident of legal age, please use the Account Opening Application - Individual.
- To make a purchase, you must complete this form in full, on a one-time basis, and return it to Canada-Israel Securities, Limited (CISL) with any other supporting documentation that may be required.

INTERNAL USE ONLY  
Account No.:

## 1. Entity Information

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |            |             |                                       |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|------------|-------------|---------------------------------------|
| Entity name                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |            |             |                                       |
| Entity phone                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  | Entity fax |             | Business no. / Tax identification no. |
| Entity address (PO box not accepted)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |            | City        | Province                              |
| Mailing address (if different from above)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |  |            | City        | Province                              |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |            | Postal code |                                       |
| Select entity type:<br><input type="radio"/> Corporation (enclose corporate resolution and articles of incorporation and complete Parts A, B, and C)<br><input type="radio"/> Partnership (enclose partnership agreement and complete Parts A and B)<br><input type="radio"/> Estate (enclose Will and complete Part B)<br><input type="radio"/> Investment Club (enclose Investment Club Agreement and complete Parts B and C)<br><input type="radio"/> Trust (enclose Trust Agreement and complete Part B)<br><input type="radio"/> Other <input type="text"/> |  |            |             |                                       |
| Does the entity, singly, or as part of a group, own 10% or more in a public company? <input type="radio"/> Yes <input type="radio"/> No<br>If "Yes", name the company <input type="text"/>                                                                                                                                                                                                                                                                                                                                                                       |  |            |             |                                       |

## 2. Authorized Contact (Must provide at least one authorized contact.)

### Person 1 Enclose corporate resolution or alternative authority document.

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |               |                                                                                       |                                                          |                 |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|---------------------------------------------------------------------------------------|----------------------------------------------------------|-----------------|
| <input type="radio"/> Mr. <input type="radio"/> Mrs. <input type="radio"/> Ms. <input type="radio"/> Miss <input type="radio"/> Dr. <input type="radio"/> Rabbi                                                                                                                                                                                                                                                                                                                                                                                                                                                 |               |                                                                                       |                                                          |                 |
| First name – As shown on government issued identification                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |               | Middle name                                                                           | Last name – As shown on government issued identification |                 |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |               | Gender<br><input type="radio"/> M <input type="radio"/> F <input type="radio"/> Other |                                                          |                 |
| Citizenship                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Email address |                                                                                       |                                                          |                 |
| Business phone                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | Home phone    |                                                                                       | Mobile phone                                             |                 |
| Permanent home address (PO box not accepted)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |               | City                                                                                  | Province/State                                           | Postal Code/ZIP |
| Previous home address (If less than 6 months at current address) (PO box not accepted)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |               | City                                                                                  | Province/State                                           | Postal Code/ZIP |
| Is this person, or any one or more of the immediate family members or close associates of this person, or have you, or they ever been,<br><input type="radio"/> Yes <input type="radio"/> No (a) a domestic politically exposed person ( <b>Domestic PEP</b> ) in the past five years; (b) a foreign politically exposed person ( <b>Foreign PEP</b> );<br>and/or (c) the head of an international organization ( <b>HIO</b> )? For definitions of Domestic PEP, Foreign PEP and HIO, see page 6.<br>If you answered "Yes" to one of the questions above, please provide details below:<br><input type="text"/> |               |                                                                                       |                                                          |                 |

## 2. Authorized Contact

### Person 2

☐ Mr. ☐ Mrs. ☐ Ms. ☐ Miss ☐ Dr. ☐ Rabbi

First name — As shown on government issued identification

Middle name

Last name — As shown on government issued identification

Gender

☐ M ☐ F ☐ Other

Citizenship

Email address

Business phone

Home phone

Mobile phone

Permanent home address (PO box not accepted)

City

Province/State

Postal Code/ZIP

Country

Previous home address (If less than 6 months at current address) (PO box not accepted)

City

Province/State

Postal Code/ZIP

Country

☐ Yes ☐ No Is this person, or any one or more of the immediate family members or close associates of this person, or have you, or they ever been, (a) a domestic politically exposed person (**Domestic PEP**) in the past five years; (b) a foreign politically exposed person (**Foreign PEP**); and/or (c) the head of an international organization (**HIO**)? For definitions of Domestic PEP, Foreign PEP and HIO, see page 6.

If you answered "Yes" to one of the questions above, please provide details below:

## 3. Financial Information

Annual revenue:

- ☐ under \$500,000  
☐ \$500,000 - \$5,000,000  
☐ over \$5,000,000

Total value of securities owned and invested by entity:

- ☐ under \$5,000,000  
☐ \$5,000,000 - \$25,000,000  
☐ over \$25,000,000

## 4. Investment Experience and Objectives

The entity has experience investing in and knowledge of the following:

- ☐ mutual funds  
☐ ETFs  
☐ stocks  
☐ bonds  
☐ options  
☐ none  
☐ other:

The entity's investment objectives in Israel bonds will be for<sup>1</sup>:

- ☐ growth  
☐ income  
☐ capital preservation  
☐ n/a - gift purchase

Israel bonds in the entity's investment portfolio will be<sup>2</sup>:

- ☐ less than 10% of its financial portfolio  
☐ 10% - 30% of its financial portfolio  
☐ More than 30% of its financial portfolio, specify %:   
☐ n/a - gift purchase

The entity is investing in Israel bonds with the goal of achieving its investment objective(s) within:

- ☐ under 2 years  
☐ 2 - 5 years  
☐ 6 - 10 years  
☐ more than 10 years  
☐ n/a - gift purchase

The ability to quickly and easily convert to cash, all, or a portion, of the investment in Israel bonds is:

- ☐ very important  
☐ somewhat important  
☐ does not matter  
☐ n/a - gift purchase

Has the entity ever purchased an Israel bond before? ☐ Yes ☐ No

Name of CISL Sales Representative with whom the entity had contact (if applicable):

<sup>1</sup>Investment objectives defined:

Growth: Emphasis on generating capital appreciation rather than current income  
Income: Emphasis on generating current income rather than capital appreciation  
Capital preservation: Emphasis on preserving existing asset levels with preference for holding cash and/or cash equivalents

<sup>2</sup>Investment portfolio includes all the entity's investments (i.e., cash, stocks, bonds, mutual funds, options) independent of how they are managed.

**Part A – Identification of Entities that are Beneficiaries of 10% or More of Entity (Client)**  
(Required for all entities if any other entity owns or is a beneficiary of 10% or more of the entity.)

☐ Check here if no entity owns 10% or more of the Entity (client).

**Entity 1**

Name of entity

First name of entity's authorized representative

Middle name

Last name

Percentage ownership of client:

Direct %

Indirect %

Number of beneficial owners of 10% or more of Entity 1:

Entities

Individuals

☐ Yes ☐ No Does the entity, singly, or as part of a group, own 10% or more in a public company?

If "yes", name the company

**Entity 2**

Name of entity

First name of entity's authorized representative

Middle name

Last name

Percentage ownership of client:

Direct %

Indirect %

Number of beneficial owners of 10% or more of Entity 2:

Entities

Individuals

☐ Yes ☐ No Does the entity, singly, or as part of a group, own 10% or more in a public company?

If "yes", name the company

**Entity 3**

Name of entity

First name of entity's authorized representative

Middle name

Last name

Percentage ownership of client:

Direct %

Indirect %

Number of beneficial owners of 10% or more of Entity 3:

Entities

Individuals

☐ Yes ☐ No Does the entity, singly, or as part of a group, own 10% or more in a public company?

If "yes", name the company

If necessary, please attach additional copies of Part A.

**Part B – Identification of (1) All Trustees and All Known Beneficiaries and Settlers of a Trust, and (2) All Beneficial Owners of 25% or More of an Entity** (Required for all individuals who own or are beneficiaries of 25% or more of the entity. Required for all trustees. If necessary, please print and attach additional copies of Part B.)

**Person 1**

☐ Check here if Part B is not applicable to this client.

☐ Shareholder ☐ Associate ☐ Partner ☐ Member of an investment club ☐ Beneficiary of a trust ☐ Settlor of a trust ☐ Beneficial owner  
☐ Trustee ☐ Administrator/Executor of will

☐ Mr. ☐ Mrs. ☐ Ms. ☐ Miss ☐ Dr. ☐ Rabbi

First name Middle name Last name

Citizenship Gender  
☐ M ☐ F ☐ Other

Home phone Business phone Mobile phone

Occupation Name of employer

Permanent home address (PO box not accepted) City Province Postal code

Previous home address (If less than 6 months at current address) (PO box not accepted) City Province Postal code

☐ Yes ☐ No Is this person a reporting insider of a company whose shares are traded on an exchange? If yes: Company/stock symbol/market

☐ Yes ☐ No Is this person a significant shareholder, holding 10% or more of voting shares? If yes: Company/stock symbol/market

☐ Yes ☐ No Is this person, or any one or more of the immediate family members or close associates of this person, or have you, or they, ever been, (a) a domestic politically exposed person (**Domestic PEP**) in the past five years; (b) a foreign politically exposed person (**Foreign PEP**); and/or (c) the head of an international organization (**HIO**)? For definitions of Domestic PEP, Foreign PEP and HIO, see page 6.

If you answered "Yes" to one of the questions above, please provide details below:

**Person 2**

☐ Shareholder ☐ Associate ☐ Partner ☐ Member of an investment club ☐ Beneficiary of a trust ☐ Settlor of a trust ☐ Beneficial owner  
☐ Trustee ☐ Administrator/Executor of will

☐ Mr. ☐ Mrs. ☐ Ms. ☐ Miss ☐ Dr. ☐ Rabbi

First name Middle name Last name

Citizenship Gender  
☐ M ☐ F ☐ Other

Home phone Business phone Mobile phone

Occupation Name of employer

Permanent home address (PO box not accepted) City Province Postal code

Previous home address (If less than 6 months at current address) (PO box not accepted) City Province Postal code

☐ Yes ☐ No Is this person a reporting insider of a company whose shares are traded on an exchange? If yes: Company/stock symbol/market

☐ Yes ☐ No Is this person a significant shareholder, holding 10% or more of voting shares? If yes: Company/stock symbol/market

☐ Yes ☐ No Is this person, or any one or more of the immediate family members or close associates of this person, or have you, or they, ever been, (a) a domestic politically exposed person (**Domestic PEP**) in the past five years; (b) a foreign politically exposed person (**Foreign PEP**); and/or (c) the head of an international organization (**HIO**)? For definitions of Domestic PEP, Foreign PEP and HIO, see page 6.

If you answered "Yes" to one of the questions above, please provide details below:

## Part C – Identification of Entity Directors (Required for all corporations.)

### Person 1

☐ Mr. ☐ Mrs. ☐ Ms. ☐ Miss ☐ Dr. ☐ Rabbi

|                                              |             |                  |                         |
|----------------------------------------------|-------------|------------------|-------------------------|
| First name                                   | Middle name | Last name        |                         |
| Occupation                                   |             | Name of employer |                         |
| Permanent home address (PO box not accepted) |             | City             | Province<br>Postal code |

☐ Yes ☐ No Is this person, or any one or more of the immediate family members or close associates of this person, or have you, or they, ever been, (a) a domestic politically exposed person (**Domestic PEP**) in the past five years; (b) a foreign politically exposed person (**Foreign PEP**); and/or (c) the head of an international organization (**HIO**)? For definitions of Domestic PEP, Foreign PEP and HIO, see page 6.

If you answered "Yes" to one of the questions above, please provide details below:

|  |
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### Person 2

☐ Mr. ☐ Mrs. ☐ Ms. ☐ Miss ☐ Dr. ☐ Rabbi

|                                              |             |                  |                         |
|----------------------------------------------|-------------|------------------|-------------------------|
| First name                                   | Middle name | Last name        |                         |
| Occupation                                   |             | Name of employer |                         |
| Permanent home address (PO box not accepted) |             | City             | Province<br>Postal code |

☐ Yes ☐ No Is this person, or any one or more of the immediate family members or close associates of this person, or have you, or they, ever been, (a) a domestic politically exposed person (**Domestic PEP**) in the past five years; (b) a foreign politically exposed person (**Foreign PEP**); and/or (c) the head of an international organization (**HIO**)? For definitions of Domestic PEP, Foreign PEP and HIO, see page 6.

If you answered "Yes" to one of the questions above, please provide details below:

|  |
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### Person 3

☐ Mr. ☐ Mrs. ☐ Ms. ☐ Miss ☐ Dr. ☐ Rabbi

|                                              |             |                  |                         |
|----------------------------------------------|-------------|------------------|-------------------------|
| First name                                   | Middle name | Last name        |                         |
| Occupation                                   |             | Name of employer |                         |
| Permanent home address (PO box not accepted) |             | City             | Province<br>Postal code |

☐ Yes ☐ No Is this person, or any one or more of the immediate family members or close associates of this person, or have you, or they, ever been, (a) a domestic politically exposed person (**Domestic PEP**) in the past five years; (b) a foreign politically exposed person (**Foreign PEP**); and/or (c) the head of an international organization (**HIO**)? For definitions of Domestic PEP, Foreign PEP and HIO, see page 6.

If you answered "Yes" to one of the questions above, please provide details below:

|  |
|--|
|  |
|--|

If necessary, please attach additional copies of Part C.

## Additional Definitions (As used in Parts B & C.)

**Domestic PEP (Politically Exposed Person):** A domestic PEP is a person who holds — or has held within the last five years — a specific office or position in or on behalf of the Canadian federal government, a Canadian provincial government, or a Canadian municipal government:

- Governor General, Lieutenant Governor or head of government;
- Member of the Senate or House of Commons or Member of a legislature;
- Deputy Minister or equivalent rank;
- Ambassador, or Attaché or Counsellor of an Ambassador;
- Military Officer with a rank of General or above;
- President of a corporation that is wholly owned directly by His Majesty in right of Canada or a province;
- Head of a government agency;
- Judge of an Appellate Court in a province, the Federal Court of Appeal or the Supreme Court of Canada;
- Leader or President of a political party represented in a legislature; or
- Mayor.

A person ceases to be a domestic PEP five years after they have left office.

**Foreign PEP (Politically Exposed Person):** A foreign PEP is a person who holds or has held one of the following offices or positions in or on behalf of a foreign state:

- Head of state or Head of government;
- Member of the Executive Council of Government or Member of a legislature;
- Deputy Minister or equivalent rank;
- Ambassador, or Attaché or Counsellor of an Ambassador;
- Military Officer with a rank of General or above;
- President of a state-owned company or a state-owned bank;
- Head of a government agency;
- Judge of a Supreme Court, Constitutional Court or other court of last resort; or
- Leader or President of a political party represented in a legislature.

These persons are foreign PEPs regardless of citizenship, residence status or birth place. A person determined to be a foreign PEP, is forever a foreign PEP.

**The Head of International Organization:** The head of an international organization is a person, for example a president or CEO, who is either:

- The head of an international organization established by the governments or states; or
- The head of an institution established by an international organization.

Once a person is no longer the head of the international organization, or the head of the institution established by an international organization, that person is no longer a head of an international organization.

**"Immediate family member"** means a mother or father, child, spouse or common-law partner, spouse's or common-law partner's mother or father, brother, sister, half-brother or half-sister.

**"Close associate"** of the Client means an individual in a close personal or business relationship with the Client, for example: the business partner or romantic partner of the Client, an individual who is involved in financial transactions with the Client, is a prominent member of the same political party as the Client, serves on the same board as the Client or closely carries out charitable works with the Client.

## 5. Acknowledgement and Consent (Please read and initial.)

Initial

☐

I/We understand that there is no secondary market for Israel bonds, that Israel bonds are not traded, and that in all circumstances, other than those specifically set forth in the prospectus or the offering memorandum or in certain other very limited circumstances as determined by the State of Israel, I must hold my Israel bond(s) until maturity to receive the principal.

Initial

☐

I/We certify that all the information I/we have supplied to CISL on this form or otherwise is accurate, complete and truthful. I/We agree to notify CISL in writing within 30 days of any material changes to the information supplied by me on this form or otherwise. I/We further acknowledge that CISL shall not be responsible for any changes to such information unless CISL has received written notice of such changes from me/us. I/We understand that CISL does not give legal or tax advice.

Initial

☐

I/We acknowledge that the Proceeds of Crime (Money Laundering) and Terrorist Financing Act and Regulations, as they may be amended from time-to-time, apply to the operation of me/our account and that CISL will, from time-to-time, adopt policies and procedures to address the reporting, client identification and recordkeeping requirements of this legislation.

Initial

☐

I/We acknowledge receipt of notice that from time-to-time, reports about me/us may be obtained by CISL from credit reporting agencies.

It is the express wish of the parties that this document and all agreements, notices and other communications relating to the operation of the account be drawn up in English only. Il est de la volonté expresse des parties que ce contrat et tous les documents avis et autres communications qui concernent l'opération des comptes conjoints soient rédigés en langue anglaise seulement.

### COLLECTION AND USE OF A CUSTOMER'S PERSONAL INFORMATION

The collection and use of personal information by CISL is subject to its Policy on protection of personal information (the "Policy"), which complies with applicable laws. You can obtain information on this Policy, and obtain a copy of it, from your Representative or from our website — [www.israelbonds.ca](http://www.israelbonds.ca)

CISL does not disclose personal information about its customers or former customers to anyone, except as permitted by law. A customer's personal information is used for services such as data processing and the preparation or sending of statements. CISL restricts access to personal information to employees, consultants, service providers, companies affiliated by common ownership or control, the State of Israel and the State of Israel's fiscal agent who need to know the information to provide products and services and to process transactions on behalf of its customers. The customer's and the named individuals' personal information may be disclosed to securities regulatory authorities that require access to personal information of current and former customers, employees, agents, directors, officers, partners and others that has been collected or used by regulated persons. Securities regulatory authorities may share information with other regulatory and law enforcement agencies.

Subject to requirements set out in applicable laws, CISL collects, uses and conveys personal information on customers for the following purposes: (a) provide the customer with the products purchased; (b) determine if the products purchased by a customer meet the customer's needs; (c) understand a customer's needs; (d) take security measures, if required; (e) comply with laws and regulations in general and tax laws in particular, the latter requiring that a customer's Social Insurance Number be indicated on the tax slips prepared for the purposes of complying with these laws and with the Proceeds of Crime (Money Laundering) and Terrorist Financing Act; (f) comply with foreign laws, if required; (g) detect and prevent fraud; and (h) engage in marketing products and services to customers by telephone, fax, and automatic dialing-announcing device, at the numbers they have provided us, or by internet, mail, email or other methods.

Initial

☐

I/we acknowledge having read the foregoing and authorize the collection, use and disclosure of the personal information in the manner set forth in this consent and in CISL's policy on protection of personal information, such information to be kept as long as CISL requires it for the purposes set out above, even if I/we no longer do business with CISL or are no longer affiliated with the customer.

### CONSENT TO THE ELECTRONIC DELIVERY OF DOCUMENTS

Do you consent to receive marketing material by electronic delivery?

- ☐ SUBSCRIBE TO ALL
- ☐ Rates and new offerings
- ☐ Events
- ☐ Israel Bonds news, updates, or corporate information about us or Israel
- ☐ UNSUBSCRIBE TO ALL

## CONSENT TO THE ELECTRONIC DELIVERY OF DOCUMENTS

- ☐ Do you consent to receive all trade confirmations, account statements, prospectuses and other CISL disclosures (documents) by electronic delivery, if and when the system for electronic delivery becomes available?

If I checked yes to any question above, I certify that I have the capacity and the technical equipment (computer, telephone or other necessary equipment) enabling me to receive from CISL the documents mentioned above by electronic means, particularly but not exclusively via the Internet, to access the said documents and to read them. I agree that all documents received by electronic means have the same legal validity and shall be binding toward CISL and the customer in the same manner as if they were received in a paper form. The paper versions of the aforementioned documents are available at the request of the customer, either verbal or written. A paper version of the document will also be sent automatically to the customer every time the electronic delivery is impossible for any reason. It is understood that CISL shall not be liable for losses, directly or indirectly incurred by the customer, with respect to any electronic delivery of documents. Without limiting the generality of the previous, CISL shall not be liable in the event of a breakdown of the customer's equipment nor for the interruption of any electronic delivery of documents. CISL has taken all reasonable measures at its disposal to ensure the confidentiality of all electronic delivery of documents and the customer's personal information. However, CISL shall not be liable for losses directly or indirectly incurred by the customer if an unauthorized third party succeeds in penetrating the security systems adopted by CISL or the security system protecting the customer's own equipment. The customer accepts the risks inherent in the communication and delivery of documents by electronic means, notably via the Internet. The customer undertakes to inform CISL of any change with respect to their electronic mail address.

## 6. Client Signature (Please read and sign.)

|                                   |   |                                  |       |
|-----------------------------------|---|----------------------------------|-------|
| _____                             | X | _____                            | _____ |
| Authorized Signatory 1 Print Name |   | Authorized Signatory 1 Signature | Date  |
| _____                             | X | _____                            | _____ |
| Authorized Signatory 2 Print Name |   | Authorized Signatory 2 Signature | Date  |

## 7. Where to Send This Form

**Completed forms can be sent to:**

**Residents of all provinces/territories except Quebec:**

Canada-Israel Securities, Limited / Israel Bonds  
PO Box 434, North York RPO Steeles West, Toronto, ON, M3J 0J3

**Residents of Quebec:**

Canada-Israel Securities, Limited / Israel Bonds  
PO Box 56033, Montreal CP Alexis Nihon, Montreal, QC, H3Z 3G3  
Fax : 514.482.9640

**For registered mail, courier or in-person appointments please call our offices.**

**For a Canadian office directory, visit [israelbonds.ca](http://israelbonds.ca)**

**Thank you for taking the time to complete and submit the Account Opening Application.  
We value your loyal and trusted business.**