

Company Information	
Company Name:	
Registered Office Address:	

Treasury Request	
Date:	

**New Horizon Transfer Inc.**  
**215-515 West Pender St**  
**Vancouver, BC V6B 6H5**

**RE: Treasury Request**

You are hereby authorized and directed to issue fully paid **COMMON** or **PREFERRED** Class “  
 Shares of the capital stock of: “  
 to the following person(s) for the number of shares set out.

We certify that these shares have been allotted to the persons named, that the Company has received the full consideration therefore, and that they are therefore fully paid and non-assessable. The issuance [assignment] of these shares complies with all applicable securities laws and regulations.

We also certify that the said allotment is not made consequent upon a direction given by an optionee or other party primarily entitled to ownership in said shares, but it constitutes the first transaction having the effect of creating ownership, control, or the right to receive such shares.

\_\_\_\_\_  
 Director's Name (please print)

\_\_\_\_\_  
 Director's Signature

Special Instructions and Guidelines
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**PLEASE NOTE:**

1. All rows/columns on attached form must be filled out in order for the Treasury Request to be processed. Please ensure you indicate your choices for both the **Certificate Type** (Electronic or Paper) and the **Filing Exemption** by selecting from the dropdown menu lists for each of these rows/columns.
2. You must keep copies of all subscription agreements and any related documents in your company's registered office and make these available to regulatory authority upon request.

Date:

Company Name:

**Shareholder Information**

Full Name:		Email Address:	
Complete Civic Address:			
Complete Mailing Address:			
Phone#		SIN#, SSN#, EIN#	
# of Shares:	Date of Issue:		Certificate Type:
Filing Exemption:			

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