

Finance and Treasury Board Small Business Investor Tax Credit Program Marysville Place, P.O. Box 3000 Fredericton, N.B. E3B 5G5

APPLICANT CORPORATION

POTENTIAL INVESTOR STATEMENT	
APPLICANT CORPORATION NAME:	
LEGAL NAME OF INVESTOR: DATE OF BIRTH: SOCIAL INSURANCE NUMBER/BUSINESS NUMBER/ACCOUNT NUMBER: ADDRESS *:	
NUMBER OF SHARES: AMOUNT TO BE PAID FOR THE SHARES:	
plan of a corporation applying for registration u	ess Investor Tax Credit Act (SBITCA), an investment under section 5 of the Act shall contain a statement ng that the information provided above is accurate.
Disclaimer	
registered under the Small Business Investor Ta	ntee the value of any shares issued by a corporation ax Credit Act and does not express any opinions as to or the merits of investing in the shares of such
Brunswick Small Business Investor Tax Credit	respecting application under the Province of New Act and should not be regarded as a replacement of ents to which it refers. Where there is a conflict tion shall prevail.
and will be used for necessary administration of this Progra	nder the authority of the Small Business Investor Tax Credit Act, am. If you have any questions regarding the collection and use of strator, Finance and Treasury Board, 200 Champlain St., Suite 350, wwwfin@gnb.ca.
I have read and understand the disclaimer ab	ove.
I hereby certify that the information provided	is true and accurate.
Name (please print)	Title
Signature	Date
- 3	
*For individual investors, place provide residential a	ddress for corporate and trust investors please provide

For individual investors, please provide residential address, for corporate and trust investors, please provide the head office address.

http://www.gnb.ca/Finance Phone: (800)669-7070

E-mail: wwwfin@gnb.ca

Fax: (506) 444-5086 Ce formulaire est aussi disponible en français.