

**CHOU FUNDS**  
**RETIREMENT SAVINGS PLAN APPLICATION**

<b>PURCHASE INFORMATION</b>	
<b>Investment Fund</b>	<b>Investment Amount</b>
<input type="checkbox"/> Chou Associates Fund	\$
<input type="checkbox"/> Chou Asia Fund	\$
<input type="checkbox"/> Chou Bond Fund	\$
<input type="checkbox"/> Chou Europe Fund	\$
<input type="checkbox"/> Chou RRSP Fund	\$
<b>ANNUITANT INFORMATION</b>	
Last Name, First Name, Initial, Title <input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms <input type="checkbox"/> Dr.	Account Number
Street Number                      Street Name                      Apt.	Date of Birth (dd/mm/yyyy)
City                                      Province	Social Insurance Number
<b>CONTRIBUTION OR TRANSFER INFORMATION</b>	
Contribution Amount <input type="checkbox"/> Annuitant <input type="checkbox"/> Spouse	Date
Transferring Financial Institution	Account Number at Transferring Financial Institution
<b>CONTRIBUTOR INFORMATION (for Spousal Plans Only)</b>	
Last Name, First Name, Initial, Title <input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms <input type="checkbox"/> Dr.	Date of Birth (dd/mm/yyyy)
Contributor Address <input type="checkbox"/> Same as Annuitant. <input type="checkbox"/> As Below	Social Insurance Number
Street Number                      Street Name                      Apt.	City                                      Province                                      Postal Code
<b>LOCKED-IN INFORMATION (for Locked-In RSPs Only)</b>	
Check here if application is for a Locked-In <input type="checkbox"/> RSP    or <input type="checkbox"/> LIRA	Provincial jurisdiction governing funds: _____. Note: Provisions contained in the Locked-In Addendum will take precedence over the Declaration of Trust for this Plan

## DESIGNATION OF BENEFICIARY

Last Name, First Name, Initial, Title <input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms <input type="checkbox"/> Dr.			Relationship to RSP Annuitant
Street Number	Street Name	Apt.	Date of Birth (dd/mm/yyyy)
City	Province	Country	Postal Code

**NOTE:**

- Beneficiary designation is subject to applicable law.
- Quebec residents must designate a beneficiary by Will or marriage contract.
- Designated beneficiaries of Manitoba residents will not change as a result of marriage or divorce. Manitoba residents who wish to change their designated beneficiary due to marriage or divorce must do so by means of completing a new designation form.
- By signing below you acknowledge your sole responsibility to ensure that the beneficiary designation for this Retirement Savings Plan is correct at all times and changed when appropriate.

Signature of Holder	Date of Birth (dd/mm/yyyy)
Signature of Witness	Name of Witness

## RETIREMENT SAVINGS PLAN AGREEMENT

To Citi Trust Company Canada (the "Trustee"):

I am applying to open a Chou Fund Retirement Savings Plan ("the Plan"), and request the Trustee to apply for registration of the Plan under the *Income Tax Act* (Canada) and any applicable provincial income tax legislation. I acknowledge and agree to be bound by the terms and conditions of this Plan as set out in the application, the Declaration of Trust, and any relevant addendum to the Plan.

I am solely responsible for determining the amount of contribution to the Plan which I may claim as a deduction under applicable tax legislation.

I confirm that the information provided to the Trustee is complete and accurate and hereby agree and consent to the Trustee, its agents or affiliates obtaining and retaining my personal information in order to ascertain my identity as required by the *Proceeds of Crime (Money Laundering) and Terrorist Financing Act* and as required by law.

It is my wish that all documents relating to the Plan have been and shall be drawn up in the English language only. C'est mon désir que tout document de rapportant au régime (Plan) soient rédigés en anglais seulement.

Signed on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ in the province of \_\_\_\_\_.

Signature of Holder	<b>Accepted by Chou Associates Management Inc. as Agent for Citi Trust Company Canada</b>
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