form PLUS

571 Curé-Boivin Boulevard
Boisbriand QC
J7G 2A8

Collection of Signature

2020/06/01

N:\Procédures\Formplus_cueillette_de_signature.ai

Telephone: 450 819-9393 • Toll-free: 1 844 818-9393 • **E-mail: manon.rivest@formplus.ca**

1. Introduction

The signature of the authorized people are required for us to incorporate them into the variable content document.

You may send us the signature(s) following one of the options below:

Option 1 - By mail

1. Complete the form.

2. Return it by mail.

3. We will send you an update by e-mail or following the usual procedure.

4. No changes need to be made in your application.

Option 2 - By E-mail

1. Complete the form.

2. Scan the page at 300 dpi (possible formats: bmp, jpg, tif or pdf).

   Use the flatbed to scan, <u>not the charger</u>, to make sure the sheet is not askew.

3. Send me the scanned file.

4. We will send you an update by e-mail or following the usual procedure.

5. No changes need to be made in your application.

At your request, we can also send you back the signature in .jpeg format for your internal office use.

You can use a standard window envelope to send us back this document by including the page and folding the page on the marks situated in the left margin.

FOLD HERE

FOLD HERE

Imprimés administratifs Formplus inc.
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2. Procedure

Please have each new signatory sign on a separate form according to the following instructions:

1. Use a **black medium tip pen** (important for best results).

2. Provide 3 specimens by signing inside the rectangles.
   Check the one you prefer.

3. Indicate the signatory's title.

4. If necessary, determine the parameters applicable to the signature.

FOLD HERE

3. Example

Signature

SIGNATORY'S TITLE:

FINANCE DIRECTOR

4. Signature Specimen

☐

☐

☐

SIGNATORY'S TITLE

FOLD HERE

5. Forms Concerned

This signature is applicable to the following forms:

☐ Supplier cheque   ☐ Purchase Order

☐ Pay cheque   ☐ Contract

☐ Order   ☐ Quotation

☐ Other, specify: _____

6. Signature File for Your Use

☐ Send us a .jpeg file of the signature for our internal office use.

7. Conditional Signature

A signature can be automatically appended on all your cheques or can be conditional. Please indicate what are the condition's parameters:

☐ Always sign the cheques.

☐ Append this signature for all amounts between the following limits:

Inferior limit: | | | | | | | | . | | $

Superior limit: | | | | | | | | . | | $

Condition: _____

8. Identification

Client's name

Client's new name (if applicable)

Signatory's name in block letters

☐ This signature replaces the one of:
Former signatory's name in block letters

☐ This person has left our organization.

Position of signature: ☐ Line 1   ☐ Line 2

9. Effective Date of Change

Change requested by

Date of request
Year Month Day

Effective as of
Year Month Day