

CONSENT TO TRANSMIT PERSONAL INFORMATION HELD BY LA FINANCIÈRE AGRICOLE

		Reserved FADQ			
		N° client			
1 Client Identification					
Name of client or company name					
failing address		Cell phone			
	Postal code	Phone			
2 Protection of Personal Information					
1 Total of the control of the contro					
This form seeks to obtain your consent to authorize	La Financière a	agricole du Québec to			
, in the second					
communicate your mailing address and phone numbers,	along with the	documents identified in			
Annex I, to the person you identify.					
This consent may be cancelled at any time by sending a	written notice to	o vour service centre of			
	writterr flotice to	your service certile or			
La Financière agricole.					
3 Consent					
I, the undersigned,	ir	n my own name or as a			
respondent duly authorized by the above-mentioned fa	arm business, a	uthorize La Financière			
agricole du Québec to communicate my mailing addres	s and phone n	umbers along with the			
	-	umbers, along with the			
information dentified in Annex I, to					
(Name of the person	to whom the information	on will be transmitted)			
This consent is valid only for the communication of the at	ove-mentioned	information			
This consent is valid only for the confindingation of the at	/OVC-ITICITIIOTICU	inionnation.			
Client's signature	!	Date			

1055-A (2010-11)

DOCUMENTS TO BE TRANSMITTED

Document name	Information in the document		Agree or not to disclose the document		
Summary page 1	Farm's mailing address and phone numbers and those of the		Yes		No
- · · · -	members of management (along with age, education, shares held) Type of production (number and units) for up to four years		Yes		No
	Results, repayment capacity, statements and ratios, for up to four		Yes	-	No
	years	J	res	J	NO
5-year summary	Type of production (number and units) for up to five years		Yes		No
	Results, repayment capacity, statements and ratios, adjustments		Yes		No
Statement of debts	and comments, if any, for up to five years Most recent list of debts		Yes		No
Statement of debts	Wost recent list of debts		165		NO
1012	Most recent description and replacement cost of buildings		Yes		No
1013	Most recent property assessment		Yes		No
1014	Most recent valuation of animals, quota and crops		Yes		No
1015	Most recent inventory and appraisal of machinery and equipment		Yes		No
2 Information o	n insured production(s)				
Program name	Information in the document		ee or not close the		ent
ASRA	Productions and units insured, insurable volumes, for the		Yes		No
	insurance years:(enter year(s) in question)				
ASREC	Productions and units insured, insurable volumes, for the		Yes		No
	insurance years:(enter year(s) in question)				
AgriStability	The financial information transmitted for the participation years:		Yes		No
rigitotability			. 55		
Agrilnvest	(enter year(s) in question) The financial information transmitted for the participation years:		Yes		No
Agriirvest			165		INO
A ani Outhor	(enter year(s) in question)		Vaa		NI-
Agri-Québec	The financial information transmitted for the participation years:		Yes	"	No
	(enter year(s) in question)				
3 Other informa	ation				
	Information in the document		ree or not		
Document name		dis	ree or not close the o		ent No
3 Other informa Document name Farm plan	Information in the document Farm plan for the insurance year:	dis	close the o	docum	
Document name Farm plan	Information in the document Farm plan for the insurance year: (enter year in question)	dis	Yes	docum	
Parm plan Account statement -	Information in the document Farm plan for the insurance year:	dis	close the o	docume	No
Parm plan Account statement -	Information in the document Farm plan for the insurance year: (enter year in question) Amounts due and paid under the programs administered by	dis	Yes	docume	No
Parm plan Account statement -	Information in the document Farm plan for the insurance year: (enter year in question) Amounts due and paid under the programs administered by	disc	Yes Yes	docume	No No
Parm plan Account statement -	Information in the document Farm plan for the insurance year: (enter year in question) Amounts due and paid under the programs administered by	disc	Yes Yes	docume	No No
Document name	Information in the document Farm plan for the insurance year: (enter year in question) Amounts due and paid under the programs administered by	disc	Yes Yes Yes	docume	No No
Parm plan Account statement -	Information in the document Farm plan for the insurance year: (enter year in question) Amounts due and paid under the programs administered by	disc	Yes Yes Yes	docume	No No
Parm plan Account statement -	Information in the document Farm plan for the insurance year: (enter year in question) Amounts due and paid under the programs administered by	disc	Yes Yes Yes Yes		No No No
Pocument name Farm plan Account statement -	Information in the document Farm plan for the insurance year: (enter year in question) Amounts due and paid under the programs administered by	disc	Yes Yes Yes Yes		No No No

1055-A (2010-11) 2