



Authorization for Provision of Investment Direction by Email

THE CORPORATION OF THE _____ OF _____

To: *The One Investment Program*

I, _____, Treasurer of the Corporation of the _____ of _____ (the "Investor") CERTIFY THAT:

- 1) The persons named below, with their respective offices set opposite their names and signatures, have been duly appointed and are authorized to give investment, withdrawal, and transfer instructions via email communication to LAS or CIBC Mellon, in connection with the various investment opportunities offered through The One Investment Program pursuant to the Agreement executed by between Local Authority Services Limited and CHUMS Financing Corporation (as agents for The One Investment Program) and the investor.

NAME	TITLE	AUTHORIZED EMAIL ADDRESS	SIGNATURE
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

- 2) This certificate shall remain in force and be binding upon the Investor until a certificate repealing or replacing this certificate has been received by The One Investment Program.

Dated this _____ day of _____, 20____.

Signature of the Treasurer

Second Signature (if Required)

Note: This completed form should be returned to The One Investment Program with a copy being appended to your organization's current Certificate of Treasurer document.