

AGREEMENT TO ACT EX-OFFICIO AS PROXY OF THE BENEFICIARY

Name of Beneficiary	_____
Date of Birth	_____/_____/_____ Year Month Day
File Number	_____
Date of Event	_____/_____/_____ Year Month Day

I, _____, hereby agree to act ex-officio as proxy of the beneficiary and promise to comply with the obligations described on the following page.

Name	_____
Address	_____ _____ _____
Telephone	_____
Social Insurance Number	_____
Relationship to beneficiary	_____

I authorize the Direction de l'indemnisation des victimes d'actes criminels (IVAC) to convey all confidential information concerning the benefits paid to me as proxy to the Public Curator.

Signature

_____/_____/_____
Year Month Day

Please forward this form, duly completed and signed, to the Direction de l'indemnisation des victimes d'actes criminels, 1199, rue de Bleury, C.P. 6056, succ. Centre-ville, Montréal (Québec) H3C 4E1.

OBLIGATIONS OF THE PERSON WHO ACTS EX-OFFICIO AS PROXY OF THE BENEFICIARY

Obligations according to the Act respecting curatorship

Forward to the Public Curator:

- ♦ a copy of the inventory of the sums entrusted to his/her management within six months of his/her agreement to act as proxy;
- ♦ an annual report of his/her administration;
- ♦ a copy of the completed report of his/her administration.

The address of the Quebec Public Curator is as follows

600, boul. René-Lévesque Ouest, bur. 500
Montréal (Québec) H3B 4W9
Tél.: (514) 873-4074 ou 1-800-363-9020

Obligations according to the Civil Code of Québec

- ♦ Act in a reasonable and conservative way. Act in an honest and loyal way, in the best interest of the Beneficiary.
- ♦ Invest the sums of money belonging to the Beneficiary (e.g. bank deposits, savings bonds).
- ♦ Give account to the Beneficiary at the end of his/her administration.