SCHEDULE F

OBJECTION FORM

OBJECTION FORM

Please use this form only if you object to the Court approving this Settlement. Do not use this form if you wish to exclude yourself from the groups covered by the class actions.	
IDENTIFICATION	
Family name:	Given Name:
Home address:	
BANK AND ACCOUNT NUMBER	
You must indicate whether your credit card is a card issued by Canadian Imperial Bank of Commerce ("CIBC") and provide the account number of your CIBC credit card: ☐ I have a CIBC credit card Credit card account number:	
REASONS FOR OBJECTING OR REPRESENTATIONS WITH RESPECT TO THE SETTLEMENT	
(Please attach an additional page if the space above is insufficient)	
Signature:	Date:
Please send your duly completed form to either of the following addresses by December 16, 2016 at the latest:	
Mes Benoit Marion and Gilles Krief SYLVESTRE FAFARD PAINCHAUD S.E.N.C.R.L. 740 Atwater Avenue Montréal, QC, H4C 2G9	Mes Yves Martineau et Guillaume Boudreau-Simard STIKEMAN ELLIOT S.E.N.C.R.L. /s.r.l. 1155 René-Lévesque Blvd. West 40th Floor Montréal (Québec) H3B 3V2