

Contract for Online Services Agreement
For services offered by **Canadian Financial Publishing Group**
4A-385 Fairway Road South, Suite 221, Kitchener, ON N2C2N9

As per the date of: _____ 200__, on behalf of ____ (# of) advisors,

I, _____

of the firm, _____

of the address: _____ and,

E-mail: _____ Tel: () _____

Cell: () _____ Fax: () _____

do hereby agree:

- 1) to lease Internet Website content and services from Canadian Financial Publishing Group (also referred to as CFPG) for the duration of a minimum term of:
1 year *not including basic updates* []; 2 years []; 3 years []; 4 years []; and
- 2) to inform CFPG, 60 days in advance by registered letter if we plan to discontinue leasing these services at the end of the said term selected, with payment for all outstanding amounts at the rate of 100% for the first 12 months, and 50% for any contracted remaining months on account as determined by CFPG; and repay any previously discounted amounts that may have been deducted from fees based on the contracted term herein selected; and
- 3) to not copy any article for purpose of rewriting or newspaper or any newsletter inclusion; and
- 4) to abide by all copyright laws, and disclaimers as posted online with the said Internet Website or Internet content, and advise all of our associates and representatives that may use the said services to abide by the same; and
- 5) it is understand that there may be other attending charges from CFPG in relation to our order requests (such as the ordering of special design; email accounts; or extra options) which will be invoiced; and
- 6) it is understood that, where a Internet Website is removed from the Internet, and/or a paid domain is released, a one hundred and twenty-five dollar charge (\$125.00) will apply at that time to cover administration and reconfiguration expenses incurred; and
- 7) it is clearly understand that we are selecting the service(s) of:

<input type="checkbox"/> Searchable Financial Library	<input type="checkbox"/> Personalized E-Newsletter
<input type="checkbox"/> Build an Advisor Website	<input type="checkbox"/> Other E-Newsletter
<input type="checkbox"/> Build a Corporate or Group Website	<input type="checkbox"/> Host a domain
<input type="checkbox"/> Refurbish an existing Website	<input type="checkbox"/> Other: _____

Product Code: [] CFPG Admin Contact(s): _____

Definition/Comments: _____

it is herein agreed as verified by the signature below, signed at:

the town/city of: _____ in the province of: _____.

X _____
President or Officer or Director or Proprietor

X _____
Witness

Getting Started

Please provide your information similar to the text displayed on the Sample Websites at:

www.cfpg.com/advisor_websites

Please go through a Sample Website by clicking only the top links. You'll find ideas from the examples of how to present your own profile pages etc. Then, go ahead and create your own profile pages, placing all your content into one Word document.

Save your prepared information in MS Word documents. Send these documents to admin@cfpg.com . We will insert the information and design your pages.

2. Send the photo and logo you want displayed in a jpeg or tiff file format as an email attachment to admin@cfpg.com .

Alternatively, indicate where your logo can be found on the internet (if applicable).

3. Do you want us to register a domain name for you?

If so, send 3 names you are interested in, in order of priority, to authorize registration of the first one available.

1. _____

2. _____

3. _____

Or do you want us to take over a domain name for you?

Yes – take over this domain: _____

In either case there is no initial cost for registering the Domain Name. You will be billed a per month fee (**as per prices on www.cfpg.com**), which gives you auto-renewal and maintains configurations that direct your domain name to your website's server.

4. Do you require any emails? NO YES How many? _____ 2 emails included per advisor; and 1 email per staff personnel.

Please list email addresses you would like to use.

Additional available as per prices on www.cfpg.com

Are there any other details or instructions? Please send them in a Word Document with your contact details for clarification. Send to admin@cfpg.com Thank you.

Select your preferred form of payment for the monthly service plan:

full term (or 12, or 6 month cycle) lump sum payment (less any discount), currently due (Prepayment invoiced).

a signed and authorized monthly PAC agreement to start currently.

A minimum down payment will be due up front as per the prices on www.cfpg.com; and further, once built, the invoice for the balance of the build fee will be payable in full, less one month FREE service fee.

It is your responsibility to read the legal terms of use as linked to your website Understand that all data linking to your website (other than your own) is protected under copyright law.

PRE-AUTHORIZED PAYMENT AUTHORIZATION - TERMS AND CONDITIONS

I(We) acknowledge that this Authorization is provided for the benefit of the Payee and (Processing Institution) and is provided in consideration of (Processing Institution) agreeing to process debits against my account in accordance with the Rules of the Canadian Payments Association.

I(We) warrant and guarantee that all persons whose signatures are required to sign on this account have signed this agreement below.

I(We) hereby authorize (Name of Payee) to draw on (Name of Payor) account number _____ with (Processing Institution), for the following purpose _____.

This authorization may be cancelled at any time upon notice by (Name of Payor). I(We) acknowledge that, in order to revoke this authorization, I(We) must provide notice of revocation to (Name of Payee).

I(We) acknowledge that provision and delivery of this authorization to (Name of Payee) constitutes delivery by (Name of Payor) to (Processing Institution). Any delivery of this authorization to you constitutes delivery by (Name of Payor).

The Payor and Payee agree to waive the pre-notification requirement set out in Section 7 of Appendix II of rule H4 of the Canadian Payments Association.

I(We) undertake to inform (Name of Payee), in writing, of any change in the account information provided in this authorization prior to the next due date of the PAD.

The account that (Name of Payee) is authorized to draw upon is indicated in the accompanying authorization. A specimen cheque for this account has been marked "VOID" and attached hereto.

I(We) acknowledge that (Processing Institution) is not required to verify that a PAD has been issued in accordance with the particulars of the Payor's Authorization including, but not limited to, the amount.

I(We) acknowledge that (Processing Institution) is not required to verify that any purpose of payment for which the PAD was issued has been fulfilled by (Name of Payee) as a condition to honouring a PAD issued or caused to be issued by (Name of Payee) on (Name of Payor) account.

Revocation of this authorization does not terminate any contract for goods or services that exists between (Name of Payor) and (Name of Payee). The Payor's Authorization applies only to the method of payment and does not otherwise have any bearing on the contract for goods or services exchanged.

A PAD may be disputed by a Payor under the following conditions:

- (1) the PAD was not drawn in accordance with the Payor's Authorization; or
- (2) the authorization was revoked; or
- (3) pre-notification was not received.

The Payor, in order to be reimbursed, acknowledges that a declaration to the effect that either (1), (2) or (3) took place, must be completed and presented to the branch of the Processing Institution holding the Payor's account up to and including 90 calendar days in the case of a personal household PAD (or up to and including 10 business days in the case of a business PAD), after the date on which the PAD in dispute was posted to the Payor's account.

The Payor acknowledges that a claim on the basis that the Payor's Authorization was revoked, or any other reason, is a matter to be resolved solely between the Payee and the Payor when disputing any PAD after (90 calendar days in the case of a personal/household PAD or 10 business days in the case of a business PAD).

DEFINITIONS

Business PAD: Means a PAD (Pre-Authorized debit in paper, electronic or other form) drawn on the account of a Payor such as, but not limited to, a corporation, an organization, a trade, an association, a government entity, a profession, a venture or an enterprise, for the payment of goods and services related to commercial activities of the Payor.

Personal / Household PAD: Means a PAD drawn on the account of a Payor for payments such as, but not limited to, charitable donations, RESP and Spousal RRSP contributions, mortgage installments, utility bills, insurance premiums, membership fees, property taxes, credit card billings and payment for other consumer goods and services.

Want to pay your bills on time - and save even more time and money?

Pay your bills the hassle-free way.

With our Pre-authorized Payment option, your payment is made automatically on the payment due date- and you don't even have to sign the cheque.

* *Save Money*

Forget about buying stamps, incurring late payment charges and reduce your bank bill payment costs.

* *Save Time*

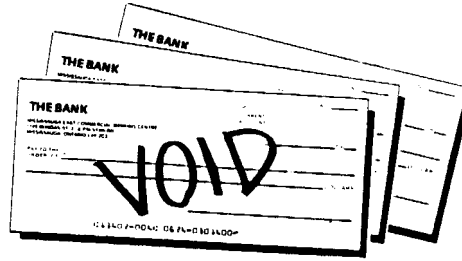
Forget about writing cheques or making trips to the bank or post office to pay your bills.

* *Save Worry*

Forget about cheques that get delayed in the mail or about missing your payment due date.

How do I join?

- Complete and sign the enrolment/ authorization form below.
- Attach a personal or business blank cheque marked "void".



- Mail or deliver the enrolment/ authorization form and void cheque to our office, along with this month's payment.

Please note: Terms and Conditions must also be given to customer.

Pre-Authorized Payment Authorization

Personal / Household PAD **OR** **Business PAD**

Payor Name(s) _____

Address: _____

City & Province: _____ Phone Number: _____

I (we) authorize _____ to process a debit, in paper, electronic or other form in the amount of:

1) Fixed amount : \$ _____ .

OR

2) Variable amount: " _____ \$X _____ ", with "variable payment amount \$X" being stated on a statement mailed to me (us) 10 days before debit date.

on my (our) account of the _____ of each _____ beginning _____ date .
day of mth week/mth/yr

I (we) acknowledge that I (we) have read, understood and accepted all the provisions contained in the Terms and Conditions of the Pre-Authorized Payment Authorization and that I (we) have received a copy.

Personal / Household PAD only Signature of Payor(s): _____ Date _____

Business PAD only Name(s) of Authorized Signing Officer(s): _____

Signature(s) of Authorized Signing Officer(s): _____ Date _____