

<b>Business Name:</b> _____
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Share Capital		
	Number Issued	Dollar Value
Common Voting Shares		
Preferred Shares		

Company Shareholders			
Name	Position	Age	Number of Shares Held
Include a personal resume for each shareholder who has more than 10% ownership in the company.			

Shareholder Loans (if applicable)		
Name	Dollar Value	Repayment Terms and Amount

Key Employees				
Name	Position	Age	Tenure	Major Areas of Responsibility

The information on this form, and any information you provide to us in the future related to this form, is collected under the authority of the *Agriculture Financial Services Act* (Alberta) and the *Freedom of Information and Protection of Privacy Act* (Alberta) (the "FOIP Act"). The collected information, whether personal information or business information, will be used: (i) to evaluate your eligibility for the program to which this form relates; (ii) for the administration of the program; and/or (iii) for the administration of any other AFSC program or benefit in which you participate. Your personal information is subject to the provisions of the FOIP Act.

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If you have any questions about this form and the collection and use of your information, please contact AFSC at 5718 - 56 Avenue, Lacombe AB T4L 1B1, 1.877.899.2372.