

EXCLUSION FORM

I, the undersigned, state that I want to be excluded from the class action described below, knowing that I won't obtain any benefit to arise from this class action.

Maxime Couillard c. Ville de Québec,
Superior Court No 200-06-000212-718.

I acknowledge that by signing this form:

- I won't participate in anyway in the legal proceedings and won't obtain any benefit to arise from a judgment or a settlement;;
- I would have to institute an individual action against Quebec's City if I wanted to assert my rights related to this case.

Personal information:

LAST NAME:	FIRST NAME :
PHONE NUMBER :	
MAILING ADDRESS:	
EMAIL ADDRESS:	

I formally request to be excluded from the group described in this class action.

Signature

Place of signature

Signing date