

DEPOSIT RECEIPT
PRE-POSSESSION and/or HOME COMPLETION INSURANCE

PAGE 1 of 1

DATE: April 13, 2023 Job # 10545

DESCRIPTION OF NEW HOME

Legal Lot/Block/Plan: 251/01/152-5690 | Subdivision: LANGDALE - RSL | Phase: QP11
Municipal Address: 17328 9 AVENUE SW, EDMONTON

PURCHASE INFORMATION

Total Purchase Price: \$ 599,996.14 (excluding GST) Home & Land Purchase: Y
Construction Only: N
As of the date indicated above, this purchase is: Unconditional (all conditions satisfied): Y
Pre-Sale: N

Lot is owned by: Builder / Developer: Y
Date of Purchase Agreement Contract (MM/DD/YYYY): 4/3/2023

DEPOSIT INFORMATION

This Receipt is for CONDITION REMOVAL deposit in the amount of \$ 62,000.00

HOME BUYER(S)
Name: Gerald Lacelle Name:
Current Mailing Address: 240 MacLennan Cr., Fort McMurray T9H4G1
Phone (1): 4033521717 Phone (2):
Email (1): glacelle@centurioncinf.com Email (2):

Pre-Possession (Deposit) Insurance and/or Home Completion Insurance is provided by the Alberta New Home Warranty Program and is subject to the terms and conditions contained in the Program. Single family coverage is limited to 20% of the home purchase price (excluding land) to a maximum of \$100,000. Multi-family coverage is limited to 20% of the home purchase price (excluding land) to a maximum of \$50,000. Refer to the ANHWP website for further information and coverage limitations at www.anhwp.com/mandatorywarranty

PURCHASER Acknowledges payment to the Builder of above Deposit and agrees to the limits of the Alberta New Home Warranty Program as it applies to Pre-Possession Deposit Protection and/or Home Completion Insurance

Signature: DocuSigned by: Gerald Lacelle
1DD72CF2E0EB4BD...
Signature: _____

BUILDER: Acknowledges receipt from the Purchaser of the above Deposit and verifies the Builder is a Registered Builder-Member of the Alberta New Home Program
Builder Member Registration # 3042
Company Name: Pacesetter Homes (Edmonton) (the Builder)
Company Representative: JULIANA ROMBOUGH
Signature: DocuSigned by: JULIANA ROMBOUGH
D73BFA5428AA468...



Wire Transfer System

Daily Wire Transfer - Detail

Wire Amount 62017.50 CAD **Customer Pays** 62017.50 CAD

Originator: CUCXCATTAL
Branch: CYPRESS CREDIT UNION LIMITED
 FOX VALLEY BRANCH 45 CENTRE STREET FOX VALLEY SK S0N 0V0 CANADA 0889 / 30858
Contact Name: ROBBIE SCHMALTZ 306 666 2022

Status:	CUPS to Verify	Currency:	CANADIAN DOLLAR
Reference No	3085820230414241	Settle Curr.:	CANADIAN DOLLAR
As at:	4/14/2023 1:22:49 PM	Settle Amt.:	62017.50
Related Ref No:		Bank Buy Rate:	1.00000000
Amount:	62017.50	Bank Sell Rate:	1.00000000
Value Date:	April 14, 2023	Rate Ref No:	
SWIFT Type:	103	Service Charge:	0.00

Sender Type:	Individual	Destination:	0004/83189 0004/83189
Name:	GERALD LUDOVIC LACELLE	Branch:	TD CANADA TRUST
Address:	240 MACLENNON CRESCENT FORT MCMURRA ALBERTA T9H 4G1 CANADA	Address:	120 6655 178 STREET NW EDMONTON ALBERTA T5T4J5 CANADA

ID Type: Driver's Licence
ID Value: 138490 438
ID Country: CA
ID Issuer: ALBERTA
Phone 4033521717
Nature of Primary Business: OPERATIONS MANAGER FOR
CENTURION CANADA
INFRASTRUCTURE
Birthdate: 1970-03-07
Add'n Sender Info: 200306018121

Transfer Reason: PURCHASE A HOUSE

Correspondent:

Intermediary:

Beneficiary:		Account:	5276006
Pay Method:	Credit Account	Receipt Info:	
Name:	STILLMAN LLP		
Address:	100 17420 STONY PLAIN ROAD NW EDMONTON ALBERTA T5S 1K6 CANADA		
Spec. Instr.:	HOUSE GERALD LACELLE		
Additional Info			
Notes:			

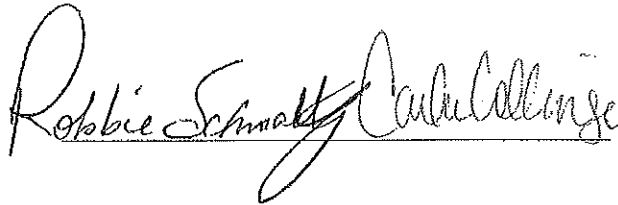
By signing below, I/we hereby acknowledge as follows:

(a) The Financial Institution shall be responsible only for performing the funds transfer services described herein and shall be liable only for its gross negligence or willful misconduct in performing these services. The Financial Institution is not required to seek clarification from anyone regarding ambiguous instructions or incomplete or inaccurate information.

(b) The Financial Institution shall not be liable for acts or omissions based upon your instructions (or its reliance upon any information or data provided by you), or for acts or omissions by you or any other person (including, without limitation, any funds transfer system, any beneficiary's bank, or any beneficiary, none of which shall be deemed the Financial Institution's agent). Without limitation, the Financial Institution shall be excused from delaying or failing to act if caused by legal constraint, interruption of transmission or communications facilities, equipment failure, war, government actions, riot, telecommunications interruption or power supply failure, unavailability of or interruption or delay in third party systems, third party networks or services, failure of third party software or a failure or malfunction of third party equipment which could not be reasonably foreseen, emergency conditions, strikes, holiday observances in any country or other circumstances beyond the Financial Institution's control. In addition, the Financial Institution shall be excused from delaying or failing to execute a transfer if it would result in the Financial Institution violating any applicable law or any rule or regulation of CREDIT UNION CENTRAL ALBERTA LIMITED (or its affiliates) or any governmental regulatory authorities. In no event shall the Financial Institution be liable for any consequential, special, punitive, or indirect losses or damages incurred relating to the foregoing services including, without limitation, subsequent wrongful dishonor resulting from the Financial Institution's acts or omissions.

(c) That I/we shall be liable to the Financial Institution for and shall indemnify and hold the Financial Institution harmless from any and all claims, causes of action, damages, expenses (including reasonable attorney's fees and other legal expenses), foreign institution fees, wire transfer costs, liabilities and other losses which do not arise from the gross negligence or willful misconduct of the Financial Institution including, without limitation, those resulting from: (i) the return of a wire transfer by any financial institution; (ii) the reliance by the Financial Institution upon any instructions, information or data provided by you; (iii) the Financial Institution's debiting or crediting of the account of any person as requested by you; and (iv) the failure to act or the delay by any financial institution other than the Financial Institution.

Branch Officer:



Customer:

Wire Reference No. 3085820230414241 as at 4/14/2023 1:22:49 PM





Wire Transfer Request

Date: Apr. 14/23Time: 10:00 AmBranch: CONSUL, SK SON OPO Canada

100109977729(CDN)

831200052361(USD)

Sender Information:

Individual Name: Gerald Ludovic Lacelle ✓Address: 240 MacLennan Crescent ✓ Civic Address: 240 MacLennan Crescent, Fort McMurray,
Alberta T9H 4G1City/Town: Fort McMurray ✓Province/State: Alberta ✓Postal/Zip Code: T9H 4G1 ✓Country: Canada ✓

Produced Identification (check applicable, insert number and place of issuance) ✓

✓ D.L. ___ H.C. ___ B.C. ___ I.S.C. ___ Passport ___ Other(specify): ___ No: 138490-438 Place: AlbertaCountry: Canada Expiry Date: March 7/24

___ D.L. ___ H.C. ___ B.C. ___ I.S.C. ___ Passport ___ Other(specify): ___ No: ___ Place: ___

Country: ___ Expiry Date: ___

Occupation: Operations Manager ✓ (descriptive)
for Centurian Canada InfrastructureVerification Date: April 14/23Phone # (403) 352-1717 ✓ *Birthdate: March 7, 1970 ✓Entity/Business Name: _____ (if applicable) *If sent for entity this is info that needs to
be entered on wire system.

Address: _____ Civic Address: _____

City/Town: _____ Province/State: _____

Postal/Zip Code: _____ Country: _____ Phone Number: _____

Nature of Business _____ (Descriptive)

Posting Transaction Details:

Account # debited 200306018121 ✓Currency: ☒ CAD ☐ USD ☐ OTHER

✓ \$62,017.50	x	Exchange Rate	= \$62,017.50	+ \$35.00	= \$62,052.50
Amount			Subtotal	Service Charge	Total Charge to Member

Purpose Of Wire: Purchase a houseSource of Rate: Sask CentralSource of Funds: Cypress Credit Union Savings Account.

International > \$100,000:

- ☐ Foreign PEP ☐ Family Member of Foreign PEP ☐ Close Associate of Foreign PEP
☐ Domestic PEP ☐ Family Member of Domestic PEP ☐ Close Associate of Domestic PEP
☐ HIO ☐ Family Member of HIO ☐ Close Associate of HIO

Destination Information/Receiving Financial Institution:

Destination R/T# 004/83189 ✓ Destination BIC# SWIFT CODE TDOMCATTOR
 Destination Branch: TD Canada Trust Address: 120, 6655 178 Street, N.W. ✓

City: Edmonton ✓ Province/State: Alberta ✓

Postal/Zip Code: T5T 4J5 ✓ Country: Canada ✓
 Receiving: Beneficiary Name _____ Account # 5276006 ✓
 Or Business Name Stillman LLP ✓ Reference # 5276006 ✓

Civic Address: 100, 17420 Stony Plain Road N.W. City: Edmonton ✓

Province/State: Alberta ✓ Postal/Zip Code: T5S 1K6 ✓ Country: Canada ✓

Receiving Transaction Details:

Amount \$62,017.50 ✓ Payment Method: Credit Account ✓ Pay upon ID (pickup)

Payment Currency CAO ✓ Exchange Rate 0 ✓

Teller Name: Gue Grichson ✓ Source of Rate Sask Central ✓

Purpose of Wire Transfer: Purchase a house ✓ ID Country: Canada ✓

Special Instructions: House → Gerald Lacelle ✓

*Please note that a civic address must be entered for both the Sender and Receiver.

*REPORT REQUIRED FOR ALL INTERNATIONAL TRANSFERS >10,000.00.

By signing below, I/we hereby acknowledge as follows:

- The Financial Institution shall be responsible only for performing the funds transfer services described herein and shall be liable only for its gross negligence or willful misconduct in performing these services. The Financial Institution is not required to seek clarification from anyone regarding ambiguous instructions or incomplete or inaccurate information.
- The Financial Institution shall not be liable for acts or omission based upon your instructions (or its reliance upon any information or data provided by you), or for acts or omissions by you or any other person (including, without limitation, any funds transfer system, any beneficiary's bank, or any beneficiary, none of the which shall be deemed the Financial Institution's agent). Without limitation, the Financial Institution shall be excused from delaying or failing to act if caused by legal constraint, interruption of transmission or communications facilities, equipment failure, war, government actions, riot, telecommunications interruption or power supply failure, unavailability or interruption or delay in third party systems, third party networks or services, failure of third party software or a failure or malfunction of third party equipment which could not be reasonably foreseen, emergency conditions, strikes, or other circumstances beyond the Financial Institution's control. In addition, the Financial Institution shall be excused from delaying or failing to execute a transfer if it would result in the Financial Institution violation any applicable law or any rule or regulation of CREDIT UNION CENTRAL ALBERTA LIMITED (or its affiliates) or any government regulatory authorities. In no event shall the Financial Institution be liable for any consequential, special, punitive, or indirect losses of damages incurred relating to the foregoing services including, without limitation, subsequent wrongful dishonor resulting from the Financial Institution's act or omissions.
- The I/we shall be liable to the Financial Institution for and shall indemnify and hold the Financial Institution harmless from any and all claims, causes of action, damages, expenses (including reasonable attorney's fees and other legal expenses), foreign institution fees, wire transfer costs, liabilities and other losses which do not arise from the gross negligence or willful misconduct of the Financial Institution including, without limitation, those resulting from: (i) the return of a wire transfer by any financial institution; (ii) the reliance by the Financial Institution upon any instructions, information or data provided by you; (iii) the Financial Institutions' debiting or crediting of the account of any person as requested by you; and (iv) the failure to act or delay by any Financial Institution other than the Financial Institution.

Approval: Gerald Lacelle ✓
 Employee Signature: [Signature] Approval Officer Signature: [Signature]

(Employee Initiating Wire Transfer Request must be different than the Approval Officer Signature)

Supervisor/Management Signature: [Signature]

STILLMAN LLP
WIRE TRANSFER and DIRECT DEPOSIT INSTRUCTIONS

* PLEASE ADD \$17.50 to the required amount if you choose to wire funds
unless sending from TD Bank*

Beneficiary Bank	TD Canada Trust
Beneficiary Bank Address	120, 6655 178 Street NW
Beneficiary City	Edmonton
Beneficiary Province/State	Alberta
Beneficiary Country	Canada
Beneficiary Bank ID	SWIFTCODE TDOMCATTOR
Beneficiary Bank No.	004
Beneficiary Bank Translt Code	83189
Beneficiary Bank Account No	5276006
Beneficiary Bank Account Name	Stillman LLP
	100, 17420 Stony Plain Road NW
	Edmonton, Alberta, Canada T5S 1K6

For USD wires only:

Intermediary Bank	Bank of America
Intermediary Bank Address	New York, New York
Intermediary Bank ID	SWIFT BOFAUS3N or ABA 026009593

ELECTRONIC DEPOSITS (wire transfer) please provide the following:

- copy of confirmation from financial institution
- faxed or emailed proof of deposit **AND PROOF OF GUARANTEED FUNDS**

NON-ELECTRONIC DEPOSITS (direct deposit) please provide the following:

- copy of deposit slip
- copy of the certified cheque / bank draft / trust cheque which was deposited

Stillman LLP
Fax: (780) 484-4184
Email: accounting@stillmanllp.com
