**APPLICATION FOR ANNUAL CERTIFICATE**

**ORIGINAL TEXT IN FRENCH**

APPENDIX 1: SUMMARY SHEET QIFT 7.21

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **QIFT 7.21** | | **Cash management 1** | |  | From: | To: | | |  |  | | |  | | | | |  |
|  |  |  | | |  |  | | |  | | | | |  |
|  | Taxation year covered | | | |  |  | | | IFC certificate number | | | | |  |
|  | | | | | | | | | | | | | | | | | | |
|  | A) If, during the taxation year covered by this application, the IFC provided cash management services, check the following box: | | | | | | | | | | |  | | |  |  | | |
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|  |  | | | | | | | | | | | | | | | |  | |
|  | B) Were these services provided regarding activities carried out exclusively or almost exclusively2 outside Canada? | | | | | |  | Yes | | |  | | | No |  |  | | |
|  | | |  | | |  |  |  | | |
|  | **If you answered “no”**, please specify: | | | | | | | | | | | | | | | |  | |
|  |  | | | | | | | | | | | | | | | |  | |
|  | C) List the clients and specify the cash management3 services provided for each of them by the IFC: | | | | | | | | | | | | | | | |  | |
|  | **Name of client** | |  | | | | | | | | | | | | | |  | | |
|  | **Location** | |  | | | | | | | | | | | | | |  | | |
|  | **Cash management services provided** | | | | | | | | | | | | | | | |  | | |
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|  | **Name of client** | |  | | | | | | | | | | | | | |  | | |
|  | **Location** | |  | | | | | | | | | | | | | |  | | |
|  | **Cash management services provided** | | | | | | | | | | | | | | | |  | | |
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**APPLICATION FOR ANNUAL CERTIFICATE**

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APPENDIX 1: SUMMARY SHEET QIFT 7.21

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|  | |  | |  |  | |
|  | | **Name of client** | |  |  | |
|  | | **Location** | |  |  | |
|  | | **Cash management services provided** | | |  | |
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|  | | **Name of client** | |  |  | |
|  | | **Location** | |  |  | |
|  | | **Cash management services provided** | | |  | |
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|  | | **Name of client** | |  |  | |
|  | | **Location** | |  |  | |
|  | | **Cash management services provided** | | |  | |
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|  | | **Name of client** | |  |  | |
|  | | **Location** | |  |  | |
|  | | **Cash management services provided** | | |  | |
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|  | 1 The expression “cash management” is defined in section 4 of the Act respecting international financial centres (CQLR, chapter C-8.3). | | | |  |
|  | 2 The expression “exclusively or almost exclusively” means at least 90%.  3 Indicate the cash management services for which the IFC is applying for certification. | | | |  |

If more space is required, append a document with the additional information and indicate the number of the summary sheet.