Schedule "C"

OBJECTION

THIS IS NOT A CLAIM FORM. Completing and returning this OBJECTION Form will give notice to the Court that you object to the terms and conditions of the proposed settlement in this class action.

Provide your personal in	nformation below.		
Section 1 - YOUR PER	SONAL INFORMATION		
Last Name:	First:	Middle:	Date of Birth:
Street Address:		Apartment:	Home Phone No.:
City:	Province:		Postal Code:
	Reasons (Please	for Objection write legibly)	

IMPORTANT! Once this Form is fully completed and signed, return it by fax, email, courier or regular mail **no later than December 17, 2010** to the following:

Rochon Genova LLP

Vincent Genova/Christina Barbato 121 Richmond Street West, Suite 900

Toronto, ON M5H 2K1

Phone: 416-363-1867 Fax: 416-363-0263

E-mail: cbarbato@rochongenova.com

^{*} This Form must be clearly postmarked by no later than December 17, 2010.