# **OPTIMI HEALTH CORP.**

#### **INTERIM FINANCIAL STATEMENTS**

□ Mark this box if you would like to receive Interim Financial Statements by mail.

### **ANNUAL FINANCIAL STATEMENTS**

□ Mark this box if you would like to receive Annual Financial Statements by mail.

## **Financial Statements Request Form**

Under securities regulations, a reporting issuer must send annually a form to holders to request the Interim Financial Statements and MD&A and/or the Annual Financial Statements and MD&A. If you would like to receive the report(s) by mail, please make your selection and return to:

## 40440 Thunderbird Ridge B1831 Garibaldi Highlands, BC, VON 1T0

Alternatively, you may choose to access the report(s) online at www.sedar.com

**OPTIMI HEALTH CORP.** will use information collected solely for the mailing of such financial statements.

If you wish to receive the financial statements by email, please provide your email address below.

**Email Address** 

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#### - OR -

Please place my name on your financial statement mailing list.

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