IN THE MATTER OF THE *COMPANIES' CREDITORS ARRANGEMENT ACT*, R.S.C. 1985, c. C-36, AS AMENDED

AND IN THE MATTER OF A PLAN OF COMPROMISE OR ARRANGEMENT OF ROBERTS COMPANY CANADA LIMITED

PROOF OF CLAIM

Please read carefully the enclosed Instruction Letter for completing this Proof of Claim. All capitalized terms not defined herein have the meanings ascribed to them in the Claims Procedure Order dated July 28, 2020.

I. PARTICULARS OF CLAIMANT:

Full Mailing Address of the Claimant: Full Mailing Address of the Claimant: Telephone Number: Telephone Number: E-Mail Address: Facsimile Number: Facsimile Number: Attention (Contact Person): Have you acquired this Claim by assignment? Yes: No: (if yes, attach documents evidencing assignment) If Yes, Full Legal Name of Original Claimant(s): PROOF OF CLAIM: I,	laimar
Telephone Number:	
Facsimile Number:	
Attention (Contact Person): Have you acquired this Claim by assignment? Yes: □ No: □ (if yes, attach documents evidencing assignment) If Yes, Full Legal Name of Original Claimant(s): PROOF OF CLAIM:	
 Have you acquired this Claim by assignment? Yes: No: (if yes, attach documents evidencing assignment) If Yes, Full Legal Name of Original Claimant(s): PROOF OF CLAIM: 	
Yes: DNO: D (if yes, attach documents evidencing assignment) If Yes, Full Legal Name of Original Claimant(s): PROOF OF CLAIM:	
If Yes, Full Legal Name of Original Claimant(s): PROOF OF CLAIM:	
PROOF OF CLAIM:	
I,	
(name of Claimant or Representative of the Claimant), of	

(city and province)

- (a) that I [check (\checkmark) one]
 - \Box am the Claimant; OR
 - □ am ______ (state position or title) of

(name of Claimant)

- (b) that I have knowledge of all the circumstances connected with the Claim referred to below;
- (c) that complete documentation in support of the Claim referred to below is attached; and
- (d) that RCCL and/or one or more of the Directors or Officers of RCCL were and still are indebted to the Claimant as follows:¹

Debtor	Prefiling Claim Amount	Whether Claim is Secured, Priority Unsecured, or Unsecured	Value of Security Held, if any:
Roberts Company Canada			
Limited			
Directors and Officers of Roberts Company Canada Limited			
(insert names above)			

Debtor	Restructuring Period Claim Amount	Whether Claim is Secured, Priority Unsecured, or Unsecured	Value of Security Held, if any:
Roberts Company Canada Limited			

¹ Claims in a foreign currency are to be converted to Canadian Dollars at the Bank of Canada daily average exchange rate in effect on June 29, 2020.

III. PARTICULARS OF CLAIM

The particulars of the undersigned's total Claim (including Prefiling Claims, Restructuring Period Claims and Director/Officer Claims) are attached.

(Provide full particulars of the Claim and supporting documentation, including amount, description of transaction(s) or agreement(s) or legal breach(es) giving rise to the Claim, name of any guarantor(s) which has guaranteed the Claim, particulars and copies of any security and amount of Claim allocated thereto, date and number of all invoices, particulars of all credits, discounts, etc. claimed. If a Claim is made against any Directors or Officers, specify the applicable Directors or Officers and the legal basis for the Claim against each of them.)

IV. FILING OF CLAIM

For Prefiling Claims and Director/Officer Claims, this Proof of Claim **MUST** be received by the Monitor **before 5:00 p.m. (Eastern Standard Time) on September 14, 2020** (the "Claims Bar **Date**").

For **Restructuring Period Claims**, this Proof of Claim **MUST** be received by the Monitor **before the later of:** (i) **the Claims Bar Date and** (ii) **5:00** p.m. (Eastern Standard Time) on the date that is ten (10) Business Days after the date on which the Monitor sends a Claims Package with respect to a Restructuring Period Claim (the "Restructuring Period Claims Bar Date").

In either case, completed forms must be delivered by prepaid ordinary mail, registered mail, courier, personal delivery or email addressed:

Richter Advisory Group Inc. as Monitor of Roberts Company Canada Limited 181 Bay St., Suite 3510 Bay Wellington Tower Toronto, Ontario M5J 2T3

Phone: 1-866-585-9751 Fax: (514) 934-8603 E-mail: rccl@richter.ca

Failure to file your Proof of Claim as directed by the Claims Bar Date or Restructuring Period Claims Bar Date, as applicable, will result in your Claim being extinguished and forever barred and in you being prevented from making or enforcing a Claim against RCCL or any of its present or former Directors and Officers.

DATED at ______ this _____ day of _____, 2020.

Signature of Claimant