#### SCHEDULE "A"

Pursuant to an order of the Ontario Superior Court of Justice dated March 21, 201 f in the CCAA proceeding (the "Proceeding") commenced by Canwest Publishing Inc. and certain other entities (the "LP Entities"), Nelligan O'Brien Payne LLP and Shibley Righton LLP were jointly appointed as counsel to assist Russell Mills, Blair MacKenzie, Rejean Saumure and Les Bale (the "Representatives") and those current and former salaried (i.e. non-unionized) employees of the LP Entities, and persons claiming on their behalf or through them, who expressly authorize such counsel in accordance with applicable legislation and the terms of a retainer between such counsel and the Tax/EI Represented Parties (as defined below), which are attached to this letter as Exhibit A, to act for them in connection with tax and employment matters, (the "Tax/EI Represented Parties") arising from the distribution of shares under the Amended Consolidated Plan of Compromise concerning the LP Entities. A copy of the Order can be found on the Monitor's website at: http://cfcanada.fticonsulting.com/clp.

Funding in a maximum amount of \$75,000 has been set aside in trust to pay for the reasonable legal, accounting and financial expert and advisory fees and all other incidental fees and disbursements incurred by the court-appointed counsel in carrying out their prescribed mandate. Accordingly, you are not required to contribute to the fees of counsel for the Tax/EI Represented Parties except for any fees exceeding the maximum amount of \$75,000 set aside in trust.

Additional information concerning the Proceedings, including previous orders granted in the Proceedings, can be found on the Monitor's website listed above.

Individuals may contact Nelligan O'Brien Payne in confidence directly at — CSER@nelligan.ca (use your personal email) or by telephone to Ms. Leigh Norton 613-231-8216 or 1-888-565-9912 to obtain the authorization forms enabling the court appointed counsel to act on their behalf in connection with their dealings with Canada Revenue Agency and/or the Employment Insurance Commission, as the case may be.

## EXHIBIT "A"

Canada Revenue Agency Agence du revenu du Canada

### Authorizing or Cancelling a Representative

Complete this form to give the Canada Revenue Agency (CRA) your consent to deal with another person (such as your spouse or common-law partner, other family member, friend, or accountant) who would act as your representative for income tax matters or to cancel any existing representatives on your file. Send your completed form to your CRA tax centre. You can find the address of your tax centre on the attached information sheet. To immediately cancel a consent, call us at 1-800-959-8281. You can also give or cancel a consent by providing the requested information online through "Authorize my representative" on our Web site at www.cra.gc.ca/myaccount.

#### Note

We will accept a change of address only from you or your legal representative. If you have recently moved, call us at 1-800-959-8281 before submitting this form to ensure we have your current mailing address. If you have registered with the My Account service, you can change your address by going to www.cra.gc.ca/myaccount.

To authorize a representative, complete Part 1, Part 2 or Part 3, Part 4, and Part 6.

To concella concessantative complete Part 1 Part 5 and Part 6

	information entify yourself and to give your accour te a separate Form T1013 for each a		ny kaodin'ny fivondronan'i Amerika. Ny faritr'i Amerika dia mandritry kaodin-daham
First name	Last name	Work telephone number	Home telephone number
	Individual	Trust	T5
Complete the one that applies:	Social insurance number	Trust account number	T5 filer identification number

To authorize your representative for online access, complete Part 2; otherwise, complete Part 3.

Part 2 – Giving consent for a representative You must complete a separate Form T1013 for each representation of the form to give your consent to a separate Form to give your consent to be separated.	presentative. Note that online ac	cess is not available for trust accounts.
To grant online access to your representative, enter his or her identification number.  For an individual  RepID	Enter the full name of the in  Name of individual assorting  First name:  Name of the group assorting	Last name:
Or For a group GroupID G	Name of the business a	issociated to the BN
For a business  Business Number (BN)  Your representative must have registered the BN with the CRA "Represent a Client" service.	1 '	el of authorization, we will assign a level 1. have a year-specific option. Therefore, your

You must complete a separate Form If you are giving consent for an ind If you are giving consent for a bus	dividual, enter the indi	vidual's full name in the			
- Name of individual		siness			
First name: Steven	All person	All persons at Nelligan O'Brien Payne LLP and Shibley Righton LLP			
Last name: Levitt	Telephone:	613-231-8283	Ext:	Fax:	613-788-2369

Part 3 (Continued)
Tick either:
Box A below to give consent for all tax years and specify the level of authorization; or
• Box B below to give consent for a specific tax year or years and specify the level of authorization for each tax year.
If you do not specify a level of authorization, we will assign a level 1.
A. All (past, present, and future) tax years  Level of authorization (level 1 or 2):
B. Enter the applicable tax year or years (past and/or present), and specify the level of authorization (level 1 or 2) for each tax year.
Tax year(s)
Level of authorization
Month Day
If this consent is for a trust account and the year-end is not December 31, enter the month and day of the year-end.
Part 4 – Consent expiry date
Enter an expiry date for the consent given in Part 2 or Part 3 if you want the consent to end at Year Month Day
a particular time. Your consent will stay in effect until you cancel it, it reaches the expiry date
you choose, or we are notified of your death.
Part 5 – Cancelling one or more existing consents
Complete this section only to cancel an existing consent. Tick the appropriate box.
Complete this section only to cancer an existing consent. Tick the appropriate box.
A. Cancel all consents. B. Cancel the consents given for the individual, group or business identified below:
Name of Individual ————————————————————————————————————
Name of Individual  First name:  Name of business  Last name:
First name: Last name:
First name:  RepID or GroupID or Business Number G
First name:    RepID   Or   GroupID   Or   Business Number
First name:  RepID or GroupID or Business Number G
Part 6 – Signature  You or your legal representative (for example, a person with your power of attorney, your guardian, or an executor or administrator of
Part 6 – Signature  You or your legal representative (for example, a person with your power of attorney, your guardian, or an executor or administrator of the taxpayer's estate) must sign and date this form. If you are signing and dating this form as the legal representative, tick the box
Part 6 – Signature  You or your legal representative (for example, a person with your power of attorney, your guardian, or an executor or administrator of the taxpayer's estate) must sign and date this form. If you are signing and dating this form as the legal representative, tick the box below. Also, send us a copy of the legal document that identifies you as the legal representative, if you have not already done so.  I have power of attorney for this taxpayer, I am the legal guardian of this taxpayer, or I am the executor/administrator of this taxpayer's estate.  By signing and dating this form, you authorize us to deal with the individual, group, or business identified in Part 2 or Part 3 and/or
Part 6 – Signature  You or your legal representative (for example, a person with your power of attorney, your guardian, or an executor or administrator of the taxpayer's estate) must sign and date this form. If you are signing and dating this form as the legal representative, tick the box below. Also, send us a copy of the legal document that identifies you as the legal representative, if you have not already done so.  I have power of attorney for this taxpayer, I am the legal guardian of this taxpayer, or I am the executor/administrator of this taxpayer's estate.  By signing and dating this form, you authorize us to deal with the individual, group, or business identified in Part 2 or Part 3 and/or to cancel the consents shown in Part 5.
Part 6 – Signature  You or your legal representative (for example, a person with your power of attorney, your guardian, or an executor or administrator of the taxpayer's estate) must sign and date this form. If you are signing and dating this form as the legal representative, tick the box below. Also, send us a copy of the legal document that identifies you as the legal representative, if you have not already done so.  I have power of attorney for this taxpayer, I am the legal guardian of this taxpayer, or I am the executor/administrator of this taxpayer's estate.  By signing and dating this form, you authorize us to deal with the individual, group, or business identified in Part 2 or Part 3 and/or
Part 6 – Signature  You or your legal representative (for example, a person with your power of attorney, your guardian, or an executor or administrator of the taxpayer's estate) must sign and date this form. If you are signing and dating this form as the legal representative, tick the box below. Also, send us a copy of the legal document that identifies you as the legal representative, if you have not already done so.  I have power of attorney for Ihis taxpayer, I am the legal guardian of this taxpayer, or I am the executor/administrator of this taxpayer's estate.  By signing and dating this form, you authorize us to deal with the individual, group, or business identified in Part 2 or Part 3 and/or to cancel the consents shown in Part 5.  We will not process this form unless it is signed and dated by you or your legal representative.  This form must be received by the CRA within six months of its signature date. If not, it will not be processed.
Part 6 – Signature  You or your legal representative (for example, a person with your power of attorney, your guardian, or an executor or administrator of the taxpayer's estate) must sign and date this form. If you are signing and dating this form as the legal representative, tick the box below. Also, send us a copy of the legal document that identifies you as the legal representative, if you have not already done so.  I have power of attorney for Ihis taxpayer, I am the legal guardian of this taxpayer, or I am the executor/administrator of this taxpayer's estate.  By signing and dating this form, you authorize us to deal with the individual, group, or business identified in Part 2 or Part 3 and/or to cancel the consents shown in Part 5.  We will not process this form unless it is signed and dated by you or your legal representative.  Print name of taxpayer or legal representative
Part 6 – Signature  You or your legal representative (for example, a person with your power of attorney, your guardian, or an executor or administrator of the taxpayer's estate) must sign and date this form. If you are signing and dating this form as the legal representative, tick the box below. Also, send us a copy of the legal document that identifies you as the legal representative, if you have not already done so.  I have power of attorney for Ihis taxpayer, I am the legal guardian of this taxpayer, or I am the executor/administrator of this taxpayer's estate.  By signing and dating this form, you authorize us to deal with the individual, group, or business identified in Part 2 or Part 3 and/or to cancel the consents shown in Part 5.  We will not process this form unless it is signed and dated by you or your legal representative.  This form must be received by the CRA within six months of its signature date. If not, it will not be processed.

Authorization to Act on My Be	<u>half Regarding Employment Insurance Issues</u>
and Shibley Righton LLP to represent a possible repayment obligations I may had compensation for my claim against Can	retained the law firms of Nelligan O'Brien Payne LLP me regarding my employment insurance benefits and any ave from receiving shares in Postmedia ("Shares") in west. I hereby authorize that all information, records and ent insurance claim be provided to Nelligan O'Brien
	ive appeal or test case that may be commenced to addressary repayment obligation and agree that the Board of beal or test case will apply to my case.
	Nelligan O'Brien Payne LLP and Shibley Righton LLP docket and all communications concerning any appeal or ntatives only.
Date:	Signature:
Print Name:  Email:  Address:	
Social Insurance Number:	

#### CANWEST SALARIED EMPLOYEES AND RETIREES

# AUTHORIZATION AND RETAINER REGARDING TAX AND EI PROCEEDINGS

I, the undersigned, confirm that I am either a former employee or retiree of Canwest's Newspapers. I also confirm that I received shares in Postmedia ("Shares") in compensation for my claim against Canwest.

I understand that the Canwest Salaried Employees and Retirees Committee ("CSER") is a group of former salaried employees and retirees of Canwest's Newspapers.

I also understand that pursuant to a Court Order dated March 21, 2011, the Steering Committee for the CSER ("the Representatives") has retained the law firms of Nelligan O'Brien Payne LLP and Shibley Righton LLP ("the Law Firms") on behalf of itself and the members of the CSER group it represents for advice and representation in connection with their dealings with Canada Revenue Agency and/or the Employment Insurance Commission, as the case may be, regarding tax and employment insurance matters as well as all related reviews or appeals (including any appeals to the Tax Court of Canada and the Federal Court of Appeal) (collectively, the "Tax/EI Proceedings") arising from the distribution of Shares to former salaried employees and retirees under the Amended Consolidated Plan of Compromise concerning the Canwest LP Entities ("the Plan").

I hereby retain and authorize the Law Firms to act on my behalf regarding tax and employment insurance matters arising from the distribution of Shares to me.

I further understand that the Law Firms will be instructed by the Representatives on behalf of all members in the Group who have opted to retain the Law Firms and I agree to be bound by those instructions.

I agree that the Law Firms will represent the interests of all members of the group in all aspects of the Tax/EI Proceedings, without any obligation to consult with or seek instructions from myself and other individual group members other than the Representatives, unless otherwise ordered by any Court.

I acknowledge that any proposed settlement of the Tax/EI Proceedings will be approved solely by the Representatives. If I do not wish to be bound by any settlement approved by the Representatives, I may, within two weeks from the date that I am advised of the settlement, notify the Law Firms that I wish to opt out of the settlement. If I so opt out, I will then not be bound any settlement and will no longer be represented by the Law Firms in the Tax/EI Proceedings and shall be free to represent myself or retain other counsel.

I understand that pursuant to the representation order granted on March 21, 2011 an amount of \$75,000 for fees and disbursements is being paid by the Monitor to Nelligan O'Brien Payne LLP as a retainer to be held in trust for legal, accounting and financial expert and advisory fees and all other incidental fees and disbursements related to the Tax/EI Proceedings. I understand that it is expected that the amount of \$75,000 for fees and disbursements will be sufficient to fees related to the Tax/EI Proceedings.

I further understand that in the event that the funds held in trust by Nelligan O'Brien Payne LLP are exhausted before conclusion of Tax/EI Proceedings, any legal fees and disbursements (including the applicable HST on those amounts) over and above the amount of \$75,000 held in trust ("Additional Fees") will be shared proportionately by myself and each of the former salaried employees and retirees who have retained the Law Firms to represent them ("the Group") pro rata based on the number of shares distributed to each Group member under the Plan.

I also understand that the Representatives, myself and each member of the Group agree to share proportionately in the payment of any award of costs ("Costs") made against the Representatives in the Tax/EI Proceedings again based pro-rata on the number of shares distributed each Group member under the Plan.

In the event that I decide to opt out as described above or otherwise discontinue my personal retainer of the Law Firms, I agree that any obligation I may have to pay Additional Fees or Costs will be calculated as at the date I opt out and I will forthwith make payment of same.

I agree to keep the terms of this Retainer strictly confidential and agree that the Retainer is not to be discussed with or disclosed to anyone, save and except other members of the Group who will also be required hold the terms of the Retainer in confidence unless disclosure is ordered by a Court or if the Representatives release me from my confidentiality obligations.

I understand that the Law Firms will be providing me with guidance and instructions on how to complete my tax return in regards to the shares. I also acknowledge that the Law Firms are only providing me with advice and guidance regarding the taxation of the shares issued to me and not any other aspect of my tax returns or filings.

I have signed the attached Canada Revenue Agency's ("CRA") Form T1013 authorizing the Law Firms to act on my behalf and communicate with CRA as my representative regarding the taxation of the shares issued to me.

If I received employment insurance benefits ("EI") following my termination from Canwest. I have also signed the attached form required by Human Resources and Skills Development Canada ("HRSDC") authorizing the Law Firms to act on my behalf and communicate with HRSDC as my representative regarding my EI benefits and any possible repayment claim made by HRSDC.

Date:	Signature:	
Print Name:		
Email:		
Address:		
HomePhone:		

[Please Note: The signed Retainer, form T1013 and the HRSDC form are to be sent to Nelligan O'Brien Payne LLP, attention Leigh Norton, Suite 1500, 50 O'Connor Street, Ottawa, ON, K1P by mail, fax 613-364-4158 or by email to leigh.norton@nelligan.ca