NOTICE OF OBJECTION

ONLY USE THIS FORM IF YOU **DO NOT** LIKE THE DEALERS SETTLEMENT OR THE CLAIMS AND DISTRIBUTION PROTOCOL OR THE COUNSEL FEE APPLICATION AND WISH TO OBJECT

TO: SISKINDS LLP

680 Waterloo Street PO Box 2520 London, ON N6A 3V8

Attention: Nicole Young

Email: sinoforest@siskinds.com

RE: SINO-FOREST CORPORATION — DEALERS SETTLEMENT

l,	(please check all boxes that apply):	
,	(insert name)	
	am a current shareholder of Sino-Forest Corporation	
	am a former shareholder of Sino-Forest Corporation	
	am a current noteholder of Sino-Forest Corporation	
	am a former noteholder of Sino-Forest Corporation	
	other (please explain)	

I acknowledge that pursuant to the order of Mr. Justice Morawetz dated January 29, 2015 (the "Order"), persons wishing to object to the Dealers Settlement, the claims and distribution protocol, or the counsel fee application are required to complete and deliver this Notice of Objection to Siskinds LLP by mail, courier or email to be received by no later than 5:00 p.m. (Eastern Time) on April 1, 2015.

I hereby give notice that I object to the Dealers Settlement, the claims and distribution protocol, or the counsel application for the following reasons (please attach extra pages if you require more space):

ONLY SUBMIT AN OBJECTION IF YOU <u>DO NOT</u> LIKE THE DEAL SETTLEMENT, THE CLAIMS AND DISTRIBUTION PROTOCOL, OR COUNSEL FEE APPLICATION AND WISH TO OBJECT			
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	I DO NOT intend to appear at the hearing of the motion to approve the Dealer Settlement, the Claims and Distribution Protocol, or the Counsel Fee Application, and understand that my objection will be filed with the court prior to the hearing of the motion at 10:00 a.m. on May 11, 2015, at 330 University Ave., 8th Floor Toronto Ontario.		
	I DO intend to appear, in person or by counsel, and to make submissions at the hearing of the motion to approve the Dealers Settlement, the Claims and Distribution Protocol, of the Counsel Fee Application, at 10:00 a.m. on May 11, 2015, at 330 University Ave., 8th Floor Toronto, Ontario.		
MY A	ADDRESS FOR SERVICE IS:	MY LAWYER'S ADDRESS FOR SERVICE IS (if applicable):	
Name:		Name:	
Address:		Address:	
Tel.:			
Fax:		Tel.:	
Email	l:	Fax:	
		Email:	
Date:		Signature:	