# Form 45-106F1 Report of Exempt Distribution

ITEM 1 — REPORT TYPE
New report  Amended report  If amended, provide filing date of report that is being amended. (YYYY-MM-DD)
ITEM 2 – PARTY CERTIFYING THE REPORT
Indicate the party certifying the report (select only one). For guidance regarding whether an issuer is an investment fund, refer to section 1.1 of National Instrument 81-106 Investment Fund Continuous Disclosure and the companion policy to NI 81-106.  Investment fund issuer  Issuer (other than an investment fund)  Underwriter
ITEM 3 – ISSUER NAME AND OTHER IDENTIFIERS
Provide the following information about the issuer, or if the issuer is an investment fund, about the fund.  Full legal name Top Strike Resources Corp.
Previous full legal name
If the issuer's name changed in the last 12 months, provide most recent previous legal name.
Website
If the issuer has a legal entity identifier, provide below. Refer to Part B of the Instructions for the definition of "legal entity identifier".
Legal entity identifier
If two or more issuers distributed a single security, provide the full legal name(s) of the co-issuer(s) other than the issuer named above.  Full legal name(s) of co-issuer(s) (if applicable)
ITEM 4 – UNDERWRITER INFORMATION
If an underwriter is completing the report, provide the underwriter's full legal name and firm NRD number.
Full legal name
Firm NRD number (if applicable)
If the underwriter does not have a firm NRD number, provide the head office contact information of the underwriter.
Street address
Municipality Province/State
Country Postal code/Zip code
Telephone number Website (if applicable)

ITEM 5 – ISSUER INFORMATION									
If the issuer is an investment fund, do not complete Item 5. Proceed to Item 6.									
a) Primary industry									
Provide the issuer's North American Industry Classification Standard (NAICS) code (6 digits only) that in your reasonable judgment most closely corresponds to the issuer's primary business activity.									
NAICS industry code 5 5 1 1 1 3									
If the issuer is in the <b>mining industry</b> , indicate the stage of operations. This does not apply to issuers that provide services to issuers operating in the mining industry. Select the category that best describes the issuer's stage of operations.									
☐ Exploration ☐ Development ☐ Production									
Is the issuer's primary business to invest all or substantially all of its assets in any of the following? If yes, select all that apply.									
☐ Mortgages ☐ Real estate ☐ Commercial/business debt ☐ Consumer debt ☐ Private companies									
☐ Cryptoassets									
b) Number of employees									
Number of employees:									
c) SEDAR profile number									
Does the issuer have a <u>SEDAR</u> profile?									
□ No									
If the issuer does not have a SEDAR profile complete Item 5(d) – (h).									
d) Head office address									
Street address Province/State									
Municipality Postal code/Zip code									
Country Telephone number									
e) Date of formation and financial year-end									
Date of formation Financial year-end									
YYYY MM DD MM DD									
f) Reporting issuer status									
Is the issuer a reporting issuer in any jurisdiction of Canada?									
If yes, select the jurisdictions of Canada in which the issuer is a reporting issuer.									
□ AII □ AB □ BC □ MB □ NB □ NL □ NT									
□ NS         □ NU         □ ON         □ PE         □ QC         □ SK         □ YT									
g) Public listing status									
If the issuer has a CUSIP number, provide below (first 6 digits only)									
CUSIP number									
If the issuer is publicly listed, provide the name of the exchange on which the issuer's equity securities primarily trade. Provide only the name of an exchange and not a trading facility such as, for example, an automated trading system.									
Exchanges name									
h) Size of issuer's assets									
Select the size of the issuer's assets based on its most recently available annual financial statements (Canadian \$). If the issuer has not prepared annual financial statements for its first financial year, provide the size of the issuer's assets at the distribution end date.									
□ \$0 to under \$5M □ \$5M to under \$25M □ \$25M to under \$100M									
□ \$100M to under \$500M □ \$500M to under \$1B □ \$1B or over									

DOCS 18464084 - 2 -

ITEM 6 - INVESTMENT FUND ISSUER INFORMATION									
If the issuer is an investment fund, provide the following information.									
a) Investment fund manager information									
Full legal name									
Firm NRD number (if applicable)									
If the investment fund manager does not have a firm NRD number, provide the head office contact information of the investn	nent fund manager.								
Street address									
Municipality Province/State									
Country Postal code/Zip code									
Telephone number Website (if applicable)									
veosite (ii applicable)									
b) Type of investment fund									
Type of investment fund that most accurately identifies the issuer (select only one).									
☐ Money market ☐ Equity ☐ Fixed income ☐ Balanced									
☐ Alternative strategies ☐ Cryptoasset ☐ Other (describe)									
Indicate whether one or both of the following apply to the investment fund.									
☐ Invests primarily in other investment fund issuers									
☐ Is a UCITs Fund <sup>1</sup>									
<sup>1</sup> Undertaking for the Collective Investment of Transferable Securities funds (UCITs Funds) are investment funds regulated by directives that allow collective investment schemes to operate throughout the EU on a passport basis on authorization from the collective investment schemes.									
c) Date of formation and financial year-end of the investment fund									
Date of formation Financial year-end									
YYYY MM DD MM DD									
d) Reporting issuer status of the investment fund									
Is the investment fund a reporting issuer in any jurisdiction in Canada?									
If yes, select the jurisdictions of Canada in which the investment fund is a reporting issuer.									
□ AII □ AB □ BC □ MB □ NB □ N	NL NT								
□ NS         □ NU         □ ON         □ PE         □ QC         □ S	SK 🔲 YT								
e) Public listing status									
If the investment fund has a CUSIP number, provide below (first 6 digits only)									
CUSIP number									
If the investment fund is publicly listed, provide the name of the exchange on which the investment fund's securities primarily	trade. Provide only the								
name of an exchange and not a trading facility such as, for example, an automated trading system.									
Exchanges name									
f) Net asset value (NAV) of the investment fund									
Select the NAV range of the investment fund as of the date of the most recent NAV calculation (Canadian \$).									
□ \$0 to under \$5M □ \$5M to under \$25M □ \$25M to under \$100M									
□ \$100M to under \$500M □ \$500M to under \$1B □ \$1B or over Date of NAV calculation:									
	YYYY MM DD								

DOCS 18464084 - 3 -

ľ	ITEM 7 _	INFORM	ATION A	SOLIT THE	DISTRIBUT	LIUN
	IIEW / —	INCORIV		2/0/0/		

If an issuer located outside of Canada completes a distribution in a jurisdiction of Canada, include in Item 7 and Schedule 1 information about purchasers resident in that jurisdiction of Canada only. Do not include in Item 7 securities issued as payment of commissions or finder's fees in connection with the distribution, which must be disclosed in Item 8. The information provided in Item 7 must reconcile with the information provided in Schedule 1 of the report.

				•			•		· · · · · · · · · · · · · · · · · · ·		
a) Cu	urrency										
Select the c	Select the currency or currencies in which the distribution was made. All dollar amounts provided in the report must be in Canadian dollars.										
☐ Canadian dollar ☐ Euro Other (describe)											
b) Di	stribution date(s	)				<u>.</u>					
both the sta	State the distribution start and end dates. If the report is being filed for securities distributed on only one distribution date, provide the distribution date as both the start and end dates. If the report is being filed for securities distributed on a continuous report. basis, include the start and end dates for the distribution period covered by the report										
	Start date	2018	10	19	End date	2018	10	19			
		YYYY	MM	DD	-	YYYY	MM	DD			

### c) Detailed purchaser information

Complete Schedule 1 of this form for each purchaser and attach the schedule to the completed report.

#### d) Types of Securities distributed

Provide the following information for all distributions reported on a per security basis. Refer to Part A(12) of the Instructions for how to indicate the security code. If providing the CUSIP number, indicate the full 9-digit CUSIP number assigned to the security being distributed.

							Canadian	\$
Sec	curity o	ode	CUSIP number (if applicable)	Description of security	Number of Securities	Single or lowest price	Highest price	Total amount
U	В	s		Units comprised of one common share and one half of one common share purchase warrant	22,502,521	0.06		1,350,151.28
U	В	s		Insider Units comprised of one common share and one common share purchase warrant	14,354,811	0.05		717,740.55

## e) Details of rights and convertible/exchangeable securities

If any rights (e.g. warrants, options) securities were distributed, provide the exercise price and expiry date for each right. If any convertible/exchangeable securities were distributed, provide the conversion ratio and describe any other terms for each convertible/exchangeable security.

	nvertib		U	nderlyir	ng	Exercise (Canadi	•	Expiry date	Conversion	Describe other terms (if	
	urity c	able   security o		security code		Lowest	Highest	(YYYY-MM-DD)	ratio	applicable)	
w	N	Т	С	М	s	0.09		2021-10-19	1:1	Upon certain conditions being met, the Issuer will be entitled to accelerate the expiry date.	
W	N	Т	С	М	S	0.06		2023-10-19	1:1 (see other terms)	Upon certain conditions being met, the Issuer will be entitled to accelerate the expiry date. Warrants become exercisable for two common shares upon certain conditions being met.	

DOCS 18464084 - 4 -

## f) Summary of the distribution by jurisdiction and exemption

State the total dollar amount of securities distributed and the number of purchasers for each jurisdiction of Canada and foreign jurisdiction where a purchaser resides and for each exemption relied on in Canada for that distribution. However, if an issuer located outside of Canada completes a distribution in a jurisdiction of Canada, include distributions to purchasers resident in that jurisdiction of Canada only.

This table requires a separate line item for (i) each jurisdiction where a purchaser resides, (ii) each exemption relied on in the jurisdiction where a purchaser resides, if a purchaser resides in a jurisdiction of Canada, and (iii) each exemption relied on in Canada, if a purchaser resides in a foreign jurisdiction.

For jurisdictions within Canada, state the province or territory, other state the country.

Province or country	Exemption relied on	Number of unique purchasers <sup>2a</sup>	Total amount (Canadian \$)
Alberta	NI 45-106 section 2.3	6	410,000.00
Alberta	NI 45-106 section 2.5	10	321,199.98
British Columbia	NI 45-106 section 2.3	13	650,493.98
British Columbia	NI 45-106 section 2.5	9	111,998.94
Ontario	NI 45-106 section 2.3	5	274,499.96
Ontario	NI 45-106 section 2.5	1	9,999.96
United States	NI 45-106 section 2.3	5	289,699.01
	Total dollar	amount of securities distributed	2,067,891.83
	Total number of unique purchasers <sup>2b</sup>	49	

<sup>&</sup>lt;sup>2a</sup>In calculating the number of unique purchasers per row, count each purchaser only once. Joint purchasers may be counted as one purchaser.

#### g) Net proceeds to the investment fund by jurisdiction

If the issuer is an investment fund, provide the net proceeds to the investment fund for each jurisdiction of Canada and foreign jurisdiction where a purchaser resides.<sup>3</sup> If an issuer located outside of Canada completes a distribution in a jurisdiction of Canada, include net proceeds for that jurisdiction of Canada only. For jurisdictions within Canada, state the province or territory, otherwise state the country.

Province or country	Net Proceeds (Canadian \$)
Total net proceeds to the investment fund	

<sup>&</sup>lt;sup>3</sup>"Net proceeds" means the gross proceeds realized in the jurisdiction from the distributions for which the report is being filed, less the gross redemptions that occurred during the distribution period covered by the report.

# h) Offering materials - This section applies only in Saskatchewan, Ontario, Québec, New Brunswick and Nova Scotia

If a distribution has occurred in Saskatchewan, Ontario, Québec, New Brunswick or Nova Scotia, complete the table below by listing the offering materials that are required under the prospectus exemption relied on to be filed with or delivered to the securities regulatory authority or regulator in those invisidictions.

In Ontario, if the offering materials listed in the table are required to be filed with or delivered to the Ontario Securities Commission (OSC), attach an electronic version of the offering materials that have not been previously filed with or delivered to the OSC.

- 5 -

	Description	Date of document or other material (YYYY-MM-DD)	Previously filed with or delivered to regulator? (Y/N)	Date previously filed or delivered (YYYY-MM-DD)
1.	Not applicable.			
2.				
3.				

DOCS 18464084

<sup>&</sup>lt;sup>2b</sup>In calculating the total number of unique purchasers to which the issuer distributed securities, count each purchaser only once, regardless of whether the issuer distributed multiple types of securities to, and relied on multiple exemptions for, that purchaser.

ITEM 8 - COMPENSATION	אוו אוכ	OKIVIAI	ION													
Provide information for each the distribution. Complete ad											any o	compe	nsatio	in co	nnecti	on with
Indicate whether any compensation was paid, or will be paid, in connection with the distribution.																
☐ No ☐ Yes If yes, indicate number of persons compensated 4																
Name of person compensated and registration status																
Indicate whether the person is a registrant																
□ No ⊠ Yes																
If the person compensated is an individual, provide the name of the individual																
Full legal name of individual																
Family name First given name Secondary given name																
If the person compensated is	not an i	ndividual,	provide	the follo	wing infor	mation										
Full legal name	Mackie	e Researd	ch Capita	al Corpor	ration											
Firm NRD number	3	0	7	0			(	if applic	cable)							
		1														
Indicate whether the person	compens	sated faci			ution throu	ıgh a fun	ding portal	or an in	ternet-l	based	porta	I				
No □ Yes																
b) Business contact i	nformat	ion														
If a firm NRD number is not p	orovided	in Item 8(	a), provi	de the b	usiness co	ontact int	ormation of	the pe	rson be	ing co	mpen	sated.				
Street address																
Municipalitu							Dravia	/Ct-t-								
Municipality							Provin	ce/State	е							
Country						Р	ostal code/2	Zip code	е							
Email address							Telephone	numbe	er							
							•									
c) Relationship to iss																
Indicate the person's relation Instructions and the meaning											eanir	ng of "d	connec	ted" ir	Part I	3(2) of the
☐ Connected with the	Issuer o	r Investm	ent fund	issuer												
☐ Insider of the issue	r (other t	han an in	vestmen	t fund)												
☐ Director or officer o	f the inve	estment fu	and or inv	vestmen	t fund ma	nager										
☐ Employee of the iss	suer or ir	vestment	fund ma	anager												
None of the above																
d) Compensation det	ails															
Provide details of all comper Canadian dollars. Include ca services incidental to the dis- internal allocation arrangement	nsh comr ribution,	nissions, such as d	securitie derical, p	s-based orinting, l	compensa legal or ac	ation, gif counting	ts, discount services. A	s or oth An issue	er com er is no	pensa t requi	tion. red to	Do no ask fo	t report	payn	nents f	or
Cash commiss	ions paid	\$11,7	59.52													
Value of all s	ecurities					$\bar{1}$		Sec	curity co	nde 1	Sec	curity c	nde ?	Se	curity o	code 3
distr	buted as	0				So	ourity codes		N	T	С	М	s	00.	Junity C	
compe	ensation <sup>6</sup>					36	curity codes	,	IN	'	C	IVI	3			
Describe terms of warra	ints, opti	ons or oth	er rights	195,9	992 Warra	ants exer	cisable at \$	0.09 foi	r one co	ommoi	shar	e.	-		-	
Total companyation = -!-!	611 7	50 F2														
Total compensation paid	\$11,7	J9.JZ														

DOCS 18464084 - 6 -

☐ Check box if the person will or may receive any deferred compensation (describe the terms											
<sup>4</sup> Provide the aggregate value of all securities distributed as compensation, <u>excluding</u> options, warrants or other rights exercisable to acquire additional securities of the issuer. Indicate the security codes for all securities distributed as compensation, <u>including</u> options, warrants or other rights exercisable to acquire additional securities of the issuer											
<sup>5</sup> Do not include deferred compensation											
a) Name of person compensated and registration status											
Indicate whether the person is a registrant											
No ☐ Yes											
If the person compensated is an individual, provid	de the name of the individu	ual									
Full legal name of individual											
	Family name	First given name	Secondar	y given name							
If the person compensated is not an individual, pr	rovide the following inform	ation									
Full legal name Purcell Capital Par	rtners Inc.										
Firm NRD number		(if applical	ble)								
Indicate whather the newscapes are to discitle	to d the adjusting the recognition	h a funding partal area into	wast bassel								
Indicate whether the person compensated facilitate  No	Tea the distribution trirough	n a lunding portal of an inte	met-based <sub>l</sub>	oortai							
b) Business contact information											
K - firm NDD grands aris and appointed in Kenn O(a)	id-th-hi	de el informe di en ef de e e e e									
If a firm NRD number is not provided in Item 8(a),	·	tact information of the person	on being coi	mpensatea.		$\neg$					
Street address 3 <sup>rd</sup> Floor-407 3	Street SVV										
Municipality Calgary		Province/State	AB								
Country		Postal code/Zip code	T2P4Z2								
Email address david@bsmc.ca	a	Telephone number	403-351	-1779		_ _					
		•				_					
c) Relationship to issuer or investment fu		(				(a) (d)					
Indicate the person's relationship with the issuer of Instructions and the meaning of "control" in section				eaning of "coi	nnected" in Part E	(2) of the					
□ Connected with the Issuer or Investmen	nt fund issuer										
☐ Insider of the issuer (other than an inves	stment fund)										
☐ Director or officer of the investment fund	d or investment fund mana	ager									
☐ Employee of the issuer or investment full	ınd manager										
■ None of the above											
d) Compensation details											
Provide details of all compensation paid, or to be paid, to the person identified in item 8(a) in connection with the distribution. Provide all amounts in Canadian dollars. Include cash commissions, securities-based compensation, gifts, discounts or other compensation. Do not report payments for services incidental to the distribution, such as clerical, printing, legal or accounting services. An issuer is not required to ask for details about, or report on, internal allocation arrangements with the directors, officers or employees of a non-individual compensated by the issuer											
Cash commissions paid \$35,109.	.40										
Value of all securities distributed as compensation <sup>4</sup>		Security codes W	rity code 1	Security coo	le 2 Security c	ode 3					
compensation		77		- I 141	-						
Describe terms of warrants, options or other	rights 579,157 Warrant	ts exercisable at \$0.09 for o	ne common	share.							

Total compensation paid	\$35,10	9.40															
☐ Check box if the person will or may receive any deferred compensation (describe the terms																	
securities of the issuer. Ind	<sup>4</sup> Provide the aggregate value of all securities distributed as compensation, <u>excluding</u> options, warrants or other rights exercisable to acquire additional securities of the issuer. Indicate the security codes for all securities distributed as compensation, <u>including</u> options, warrants or other rights exercisable to acquire additional securities of the issuer																
<sup>5</sup> Do not include deferred con	npensation	1															
a) Name of person of	compensat	ted and	l registrati	ion stat	us												
Indicate whether the person	is a registi	rant															
⊠ No		☐ Ye	S														
If the person compensated	s an individ	dual, pro	ovide the i	name of	the individu	ual											
Full legal na	ame of indi	vidual	Davidso	n		John											
		-	Fa	amily nar	me	First given	nam	ne	Sec	ondar	y give	en nam	ie				
If the person compensated	s not an in	dividual	, provide t	the follo	wing inform	ation											
Full legal name														]			
Firm NRD number							(if	applica	able)								
Indicate whether the person	compensa	ated fac	ilitated the	e distribu	ution throug	h a funding por	tal or	r an int	ernet-b	ased	porta	ı					
⊠ No	•		_	Yes	· ·	0,											
b) Business contact	informatio	n															
If a firm NRD number is not	provided in	ı Itom 8	(a) provio	do the hi	usinoss con	stact information	of t	ho nor	son ho	ina co	mnon	eated					
Street address			Road N		usiness con	itact iriiorriatioi	1011	ne per	SOIT DE	ng co	преп	saicu.					
Olicot address	3000 0	Jaicec	- Noau N	4 V V													
Municipality	Calgar	гу				Pro	vince	e/State	AB	1							
Country	Canad	la				Postal cod	de/Zi <sub>l</sub>	p code	Т3	E7W	9						
Email address	davids	on@c	arscaller	n.com		Telepho	ne n	umber	403	3-298	8-845	54					
c) Relationship to is	suer or inv	estmer/	nt fund ma	anager													
Indicate the person's relatio Instructions and the meanin											eanir	ng of "c	onnect	ed" in	Part E	3(2) o	f the
☐ Connected with th	e Issuer or	Investn	nent fund	issuer													
Insider of the issue	er (other th	an an in	vestment	fund)													
☐ Director or officer	of the inves	stment f	und or inv	estment	t fund mana	ager											
Employee of the issuer or investment fund manager																	
None of the above																	
d) Compensation details																	
Provide details of all compensation paid, or to be paid, to the person identified in item 8(a) in connection with the distribution. Provide all amounts in Canadian dollars. Include cash commissions, securities-based compensation, gifts, discounts or other compensation. Do not report payments for services incidental to the distribution, such as clerical, printing, legal or accounting services. An issuer is not required to ask for details about, or report on, internal allocation arrangements with the directors, officers or employees of a non-individual compensated by the issuer																	
Cash commis	sions paid	\$600	.00														
	securities ributed as ensation <sup>4</sup>	0				Security co	des	Secu	urity co	de 1	Sec	curity c	ode 2	Sec	curity c	ode 3	
						_			<u> </u>	1		<u> </u>	1	لــــا	<del></del>	1	

Describe terms or warra	nts, optior	is or our	ier rights	10,000	vvarrani	s exer	cisabi	e at \$0.0	9 101 011	ie common	snare.		
Total compensation paid	\$600.00	)											
☐ Check box if the person will or may receive any deferred compensation (describe the terms													
<sup>4</sup> Provide the aggregate value securities of the issuer. Indic acquire additional securities of	ate the se	curity co											
<sup>5</sup> Do not include deferred com	pensation												
a) Name of person co	mpensat	ed and	registrati	on status	3								
Indicate whether the person i	s a registr	ant											
⊠ No		☐ Yes	<b>S</b>										
If the person compensated is	an individ	lual, pro	vide the r	name of th	ne individ	lual							
Full legal nar	ne of indiv	idual	Wolovec	k		Tren	t						
		_	Fa	mily name	e	F	irst gi	ven nam	ie	Seconda	ry given name		
If the person compensated is	not an inc	lividual,	provide t	he followi	ing inforn	nation							
Full legal name													
Firm NRD number								(if	applicat	ole)			
Indicate whether the person of	Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal												
No No	.o.,,po.,,ou				o u o u.	, u .u.	9	portai o	<i>a</i>		po. ta.		
b) Business contact in	nformatio	n											
,	., ,.		( )				,			, ,			
If a firm NRD number is not p Street address			ut PI #12		iness co.	nact ir	IIOIIII	ation of t	ne perso	on being co	ompensatea.		7
													_
Municipality	Denve	r						Province	e/State	СО			
Country	United	States	3			F	Postal	code/Zi	o code	80202			
Email address	wolove	tt@gr	nail.com				Tele	phone n	umber	614-27	1-4349		
c) Relationship to issu	uer or inv	estmen	t fund ma	anager									
Indicate the person's relation Instructions and the meaning											neaning of "connec	ed" in Part B(2	?) of the
☐ Connected with the	Issuer or	Investm	ent fund i	ssuer				·	Ü				
☐ Insider of the issuer	(other tha	an an in	vestment	fund)									
☐ Director or officer of the investment fund or investment fund manager													
Employee of the issuer or investment fund manager													
None of the above     None of the above													
d) Compensation deta	ails												
Provide details of all compensation paid, or to be paid, to the person identified in item 8(a) in connection with the distribution. Provide all amounts in Canadian dollars. Include cash commissions, securities-based compensation, gifts, discounts or other compensation. Do not report payments for services incidental to the distribution, such as clerical, printing, legal or accounting services. An issuer is not required to ask for details about, or report on, internal allocation arrangements with the directors, officers or employees of a non-individual compensated by the issuer													
Cash commissi	ons paid	\$4,500	0.00										
Value of all s	ecurities	0				- 			Secur	rity code 1	Security code 2	Security coo	de 3

DOCS 18464084 - 9 -

distributed as compensation <sup>4</sup>	Security codes W N T C M S							
Describe terms of warrants, options or other rights	75,000 Warrants exercisable at \$0.09 for one common share.							
Total compensation paid \$4,500.00								
☐ Check box if the person will or may receive any deferr	red compensation (describe the terms							
<sup>4</sup> Provide the aggregate value of all securities distributed as compensation, <u>excluding</u> options, warrants or other rights exercisable to acquire additional securities of the issuer. Indicate the security codes for all securities distributed as compensation, <u>including</u> options, warrants or other rights exercisable to acquire additional securities of the issuer								
<sup>5</sup> Do not include deferred compensation								

DOCS 18464084 - 10 -

If the is	– DIRECTORS, E ssuer is an investme		ICERS AND F	PROMOTERS	OF THE	FICCLIED				
	ssuer is an investme				OF THE	LISSULIK				
Indicate		ent tuna, ao not co	mplete Item 9. I	Proceed to Item	10.					
	e whether the issuer i	s any of the following	g (select the one	that applies – if	more thar	n one applies, selec	t only one	) <i>:</i>		
$\boxtimes$	Reporting issuer in	any jurisdiction of C	Canada							
	Foreign public issu	ier								
	Wholly owned sub	sidiary of a reporting	issuer in any jur	isdiction of Cana	ada <sup>6</sup>					
	Provide name of reporting issuer									
	Wholly owned subsidiary of a foreign public issuer <sup>6</sup>									
	Provide name of foreign public issuer									
	Issuer distributing	only eligible foreign	securities and the	e distribution is to	o permitte	d clients only.7				
<sup>6</sup> An iss securiti <sup>7</sup> Check	ssuer is at least one uer is a wholly owned ies that are required b this box if it applies to the definitions of "el	I subsidiary of a repo by law to be owned b to the current distribu	orting issuer or a by its directors, an ution even if the is	foreign public is re beneficially ov ssuer made prev	suer if all vned by th vious distr	of the issuer's outsi ne reporting issuer of ibutions of other typ	or the forei	gn public is	ssuer, res <sub>l</sub>	pectively.
	If the issuer is no	ne of the above, ch	eck this box an	d complete iten	n 9(a) – (d	<b>:</b> )				
a)	Directors, executiv	ve officers and pror	noters of the iss	suer						
	Organization or company name	issuer", "D", - Dil First given name		y given	Business loca non-individu residential juris of individu	ation of ual or Relationship to issue isdiction (select all that apply)				
						Province or co	ountry	D	0	Р
b)	Promoter Informa	tion								
	romoter listed above Canada, state the pro									
	Organization or company name	Family name	First given name	Secondary given	Residential jurisdiction of individual		Relationship to promoter (select one or both if applicable)			
	, , , , , , , , , , , , , , , , , , , ,			names	Provi	nce or country	D			0
				•	i		ı			

c) Residential address of each individual

Complete Schedule 2 of this form providing the full residential address for each individual listed in item 9(a) and (b) and attach to the completed report. Schedule 2 also requires information to be provided about control persons.

DOCS 18464084 - 11 -

### ITEM 10 - CERTIFICATION

Provide the following certification and business contact information of an officer, director or agent of the issuer or underwriter. If the issuer or underwriter is not a company, an individual who performs functions similar to that of a director or officer may certify the report. For example, if the issuer is a trust, the report may be certified by the issuer's trustee. If the issuer is an investment fund, a director or officer of the investment fund manager (or, if the investment fund manager is not a company, an individual who performs similar functions) may certify the report if the director or officer has been authorized to do so by the investment fund.

The certification may be delegated but only to an agent that has been authorized by an officer or director of the issuer or underwriter to prepare and certify the report on behalf of the issuer or underwriter. If the report is being certified by an agent on behalf of the issuer or underwriter, provide the applicable information for the agent in the boxes below.

If the individual completing and filing the report is different from the individual certifying the report, provide the name and contact details for the individual completing and filing the report in Item 11.

The signature on the report must be in typed form rather than handwritten form. The report may include an electronic signature provided the name of the signatory is also in typed form.

Securities legislation requires an issuer or underwriter that makes a distribution of securities under certain prospectus exemptions to file a completed report of exempt distribution.

By completing the information below, I certify on behalf of the issuer/underwriter/investment fund manager, to the securities regulatory authority or regulator that, as applicable, that I have reviewed this report and to my knowledge, having exercised reasonable diligence, the information provided in this report is true and, to the extent required, complete.

Name of issuer/underwriter/investment fund manager/agent	McGorman	David					
	Family name	First given name	Second	ame			
Title	Director and Chief Executive Officer						
	Top Strike Resources Corp.						
Telephone number	403-351-1779	Email addres	s david@bs	david@bsmc.ca			
Signature	/s/ "David McGorman"	Dat	e 2018	10 MM	29 DD		

ITEM 11 -	CONTACT	PERSON
-----------	---------	--------

Provide the following business contact information for the individual that the securities regulatory authority or regulator may contact with any questions regarding the contents of this report, if different than the individual certifying the report in Item 10

Same as	s individual cer	tifying the repo	rt				
Full legal name	Gallant		Trena		Title	Paralegal	
Family Name			First Given Name	Secondary Given Name			
Name	e of Company	McCarthy Té	trault LLP				
Telep	hone number	403-260-3658	3	Email address	tgallant@mcc	carthy.ca	

### Notice - Collection and Use of Personal Information

The personal information required under this form is collected on behalf of and used by the securities regulatory authority or regulator under the authority granted in securities legislation for the purposes of the administration and enforcement of the securities legislation.

If you have any questions about the collection and use of this information, contact the securities regulatory authority or regulator in the local jurisdiction(s) where the report is filed, at the address(es) listed at the end of this form.

The attached Schedules 1 and 2 may contain personal information of individuals and details of the distribution(s). The information in Schedules 1 and 2 will not be placed on the public file of any securities regulatory authority or regulator. However, freedom of information legislation may require the securities regulatory authority or regulator to make this information available if requested.

By signing this report, the issuer/underwriter confirms that each individual listed in Schedule 1 or 2 of the report who is resident in a jurisdiction of Canada:

- a) has been notified by the issuer/underwriter of the delivery to the securities regulatory authority or regulator of the information pertaining to the individual as set out in Schedule 1 or 2, that this information is being collected by the securities regulatory authority or regulator under the authority granted in securities legislation, that this information is being collected for the purposes of the administration and enforcement of the securities legislation of the local jurisdiction, and of the title, business address and business telephone number of the public official in the local jurisdiction, as set out in this form, who can answer questions about the security regulatory authority's or regulator's indirect collection of the information, and
- b) has authorized the indirect collection of the information by the securities regulatory authority or regulator.