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 (in Québec, Regulation 81-106 respecting Investment Fund Continuous Disclosure and Policy Statement to Regulation 81-106 respecting Investment Fund Continuous Disclosure).

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	Golden Cariboo Resources Ltd. / Golden Cariboo Resources Ltd.		
Previous full legal name	GOLDEN CARIBOO RESOURCES LTD		
If the issuer's name changed in	the last 12 months, provide most recent previous legal name.		
Website	www.goldencariboo.com (if applicable)		
If the issuer has a legal entity identifier, p	rovide 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 above.	e security, provide the full legal name(s) of the co-issuer(s) other than the issuer named		
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, firm NRD number, and SEDAR+ profile number. Full legal name Firm NRD number

SEDAR+ profile number

(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 212220			
If the issuer is in the mining industry , 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: 🗹 0 - 49 🗌 50 - 99 🗌 100 - 499 🔲 500 or more			
c) SEDAR+ profile number			
Provide the issuer's SEDAR+ profile number			
000005852			

ITEM 6 - INVESTMENT FUND ISSUER INFORMATION						
If the issuer is an investment f	If the issuer is an investment fund, provide the following information.					
a) Investment fund ma	anager information	1				
Full legal name						
Firm NRD number		(if applicable)	1			
SEDAR+ profile number						
b) Type of investment	fund					
Type of investment fund that mo	st accurately identifies	the issuer (select only one).				
🗌 Money market	Equity	Fixed income	Balanced			
Alternative strategies	Cryptoasset	Other (describe)				

Indicate whether one or b	both of the following apply to the investm	nent fund.			
🗌 Invest primarily in o	ther investment fund issuers				
Is a UCITs Fund ¹					
	e Investment of Transferable Securities funds (UC t schemes to operate throughout the EU on a pa				tives:
c) Net asset valu	ie (NAV) of the investment fund				
Select the NAV range of th	ne investment fund as of the date of the r	most recent NAV calc	ulation (Canad	ian \$).	
🗌 Under \$5M	🗌 \$5M to under \$25M	🗌 \$25M to und	er \$100M	Date of NAV calculation:	-
S100M to under \$50	00M 🗌 \$500M to under \$1B	S1B or over			
				YYYY MM DD	
ITEM 7 - INFORMA	TION ABOUT THE DISTRIBU	JTION			
	de of Canada completes a distribution in				
	asers resident in that jurisdiction of Cano ees, in connection with the distribution, v				of
	h the information provided in Schedule 1		seu III iteiii o. 1	ne mjormation provided m	
a) Currency					
Select the currency or cur dollars.	rrencies in which the distribution was ma	ide. All dollar amour	its provided in a	the report must be in Canad	ian
🖌 Canadian dollar	US dollar Euro Other (describe)			
b) Distribution o	latas				
	lates				
	rt and end dates. If the report is being file oth the start and end dates. If the report				de
	dates for the distribution period covered		unities distribu	ea on a continuous basis,	
Start date	2024 08 12	End date	2024	08 12	
Start date	YYYY MM DD		YYYY	MM DD	
c) Detailed purc	haser information				
Complete Schedule 1 of this form for each purchaser and attach the schedule to the completed report.					
d) Types of secu	irities 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 \$	
Security CUSIP		Number of	Single or	Highest	
code number (if applicable)	Description of security	securities	lowest price	price Total amour	π
UBS 380813402	Units	7,910,000.0000	0.1500	0 1,186,500.00	000

e) Details of rights and convertible/exchangeable securities

If any rights (e.g. warrants, options) 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.

Convertible / exchangeable	Underlying	Exercise price (Canadian \$)		(Canadian \$)		Expiry date (YYYY-MM-	Conversion ratio	Describe other terms (if
security code	security code	Lowest	Highest	DD)		applicable)		
WNT	CMS	0.2000	0.2500	2027-08-12	1:1	Whole Warrant. Each Whole Transferable Warrant exerci sable at a price of \$0.20, \$0. 22 and \$0.25, expiring on A ugust 12, 2027.		

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, otherwise state the country.

Province or country	Exemption relied on	Number of unique purchasers ^{2a}	Total amount (Canadian \$)
British Columbia	NI 45-106 2.3 [Accredited investor]	11	149,999.7000
Québec	NI 45-106 2.3 [Accredited investor]	1	30,000.0000
Mexico	NI 45-106 2.5 [Family, friends and business associates]	1	10,500.0000
Thailand	NI 45-106 2.3 [Accredited investor]	1	411,000.0000
Switzerland	NI 45-106 2.3 [Accredited investor]	1	15,000.0000
Denmark	NI 45-106 2.3 [Accredited investor]	2	70,000.2000
United States of America	es of NI 45-106 2.3 [Accredited investor]		500,000.1000
	\$1,186,500.0000		
	Total number of unique purchasers ^{2b}	18	

^{2a} In calculating the number of unique purchasers per row, count each purchaser only once. Joint purchasers may be counted as one purchaser.

^{2b}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.

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.*³*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 Ne

Net proceeds (Canadian \$)

Total net proceeds to the investment fund	

³"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.

Provide information for each person (as defined in NI 45-106) (in Québec, Regulation 45-106 respecting Prospectus Exemptions) to whom the issuer directly provides, or will provide, any compensation in connection with the distribution. Complete additional copies of this page if more than one person was, or will be, compensated.				
Indicate whether any compensation was paid, or will be paid, in connection with the distribution.				
a) Name of person compensated and registration status				
Indicate whether the person compensated 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 r If the person compensated is not an individual, provide the following information. Secondary given r	names			
Full legal name of non-individual VENTUM FINANCIAL CORP.				
Firm NRD number 5290 (if applicable)				
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based por	tal			
🗹 No 🗌 Yes				
b) Business contact information				
If a firm NRD number is not provided in Item 8(a), provide the business contact information of the person being comper	isated.			
Street address				
Municipality Province/State				
Country Postal code/Zip code				
Email address Telephone number				
c) Relationship to issuer or investment fund manager				
Indicate the person's relationship with the issuer or investment fund manager (select all that apply). Refer to the meaning of 'connected' in Part B(2) of the Instructions and the meaning of 'control' in section 1.4 of NI 45-106 (in Québec, Regulation 45-106 respecting Prospectus Exemptions) for the purposes of completing this section.				
Connected with the issuer or investment fund manager				
Insider of the issuer (other than an investment fund)				
Director or officer of the investment fund or investment fund manager				
 Employee of the issuer or investment fund manager None of the above 				
d) Compensation details				

Cash commissions paid	\$3,600.0000		
Value of all securities distributed as compensation ⁴			
Coqueity codes	Security code 1	Security code 2	Security code 3
Security codes	CMS	WNT	
	ſ		
Describe terms of warrants, options or other rights		arrants exercisable \$0.25, expiring on	
Other compensation ⁵			
Describe			
			_
Total compensation paid	\$3,600.0000		
Check box if the person will or may receive any def	erred compensati	on (describe the te	erms below)
⁴ 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 additionaddities additities addities addities addities addities add			
⁵ Do not include deferred compensation.			

Provide information for each person (as defined in NI 45-106) (in Québec, Regulation 45-106 respecting Prospectus Exemptions) to whom the issuer directly provides, or will provide, any compensation in connection with the distribution. Complete additional copies of this page if more than one person was, or will be, compensated.				
Indicate whether any compensation was paid, or will be paid, in connection with the distribution. No If yes, indicate number of persons compensated.				
a) Name of person compensated and registration status				
Indicate whether the person compensated 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 individual, provide the following information. Secondary given name	es			
Full legal name of non-individual LEEDE FINANCIAL INC.				
Firm NRD number 5770 (if applicable)				
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal				
✓ No □ Yes				
b) Business contact information				
If a firm NRD number is not provided in Item 8(a), provide the business contact information of the person being compensat	ted.			
Street address				
Country Postal code/Zip code				
Email address Telephone number				
c) Relationship to issuer or investment fund manager				
Indicate the person's relationship with the issuer or investment fund manager (select all that apply). Refer to the meaning of 'connected' in Part B(2) of the Instructions and the meaning of 'control' in section 1.4 of NI 45-106 (in Québec, Regulation 45-106 respecting Prospectus Exemptions) for the purposes of completing this section.				
Connected with the issuer or investment fund manager				
Insider of the issuer (other than an investment fund)				
Director or officer of the investment fund or investment fund manager				
 Employee of the issuer or investment fund manager None of the above 				
d) Compensation details				

Cash commissions paid	\$4,799.9800		
Value of all securities distributed as compensation ⁴			
Security codes	Security code 1	Security code 2	Security code 3
Security codes	CMS	WNT	
	r		
Describe terms of warrants, options or other rights		arrants exercisable \$0.25, expiring on	
Other compensation ⁵			
Describe			
Total compensation paid	\$4,799.9800		
Check box if the person will or may receive any def	erred compensation	on (describe the te	erms below)
⁴ 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 additional securities additional securities of the issuer.			
⁵ Do not include deferred compensation.			

Provide information for each person (as defined in NI 45-106) (in Québec, Regulation 45-106 respecting Prospectus Exemptions) to whom the issuer directly provides, or will provide, any compensation in connection with the distribution. Complete additional copies of this page if more than one person was, or will be, compensated.				
Indicate whether any compensation was paid, or will be paid, in connection with the distribution.				
a) Name of person compensated and registrat	ion status			
Indicate whether the person compensated is a registrant.				
□ No ✓ Yes				
If the person compensated is an individual, provide the name o	of the individual.			
Full legal name of individual				
Family name If the person compensated is not an individual, provide the foll	First given name Secondary given names owing information.			
Full legal name of non-individual Canaccord Genuity	Corp./Corporation Canaccord Genuity			
Firm NRD number 900	(if applicable)			
Indicate whether the person compensated facilitated the distrib	bution through a funding portal or an internet-based portal			
✓ No □ Yes				
b) Business contact information				
If a firm NRD number is not provided in Item 8(a), provide the l	business contact information of the person being compensated.			
Street address				
Municipality	Province/State			
Country	Postal code/Zip code			
Email address	Telephone number			
c) Relationship to issuer or investment fund manager				
Indicate the person's relationship with the issuer or investment fund manager (select all that apply). Refer to the meaning of 'connected' in Part B(2) of the Instructions and the meaning of 'control' in section 1.4 of NI 45-106 (in Québec, Regulation 45-106 respecting Prospectus Exemptions) for the purposes of completing this section.				
Connected with the issuer or investment fund manager				
Insider of the issuer (other than an investment fund)				
Director or officer of the investment fund or investment fund manager				
Employee of the issuer or investment fund manager V None of the above				
d) Compensation details				

Cash commissions paid	\$32,880.0000		
Value of all securities distributed as compensation ⁴			
Security codes	Security code 1	Security code 2	Security code 3
Security codes	CMS	WNT	
Describe terms of warrants, options or other rights		Varrants exercisab \$0.25, expiring on	
Other compensation ⁵			
Describe			
Total compensation paid	\$32,880.0000		
Check box if the person will or may receive any def	erred compensati	on (describe the te	erms below)
⁴ Provide the aggregate value of all securities distributed as compensa securities of the issuer. Indicate the security codes for all securities dis acquire additional securities of the issuer.			
⁵ Do not include deferred compensation.			

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Provide information for whom the issuer directly copies of this page if n	/ provides, or wi	ll provide, any con	mpensation in	connection with t			
Indicate whether any co	-	s <i>paid, or will be p</i> , indicate numbe		Г			
a) Name of per	son compens	sated and regis	stration sta	tus			
Indicate whether the per Indicate whether the per- No I Yes		-		1: : 1			
If the person compensation			ame of the ind				
Full legal name of		KLINGBEIL Family name		Christian First given nam	e	Secondary give	en names
If the person compensa	ted is not an ind	,	ne following in	-		Secondary Sin	
Full legal name of	f non-individual						
Firi	n NRD number			(if app	licable)		
Indicate whether the pe	rson compensat	ed facilitated the a	distribution th	rough a funding r	oortal or a	n internet-based r	ortal
✓ No □ Yes				, e			
b) Business coi	ntact informa	tion					
lf a firm NRD number is	not provided in	ltem 8(a), provide	e the business	contact informati	on of the p	person being comp	pensated.
Street address	Apt 11c 1 Rue	Des Genets					
Municipality	Lemillefiori			Province/State			_
Country	Monaco		Posta	al code/Zip code			\exists
				·		0.070.000.47	
Email address	ck@mcp.ltd		leie	ephone number	377 (417)979-80047	
c) Relationship	to issuer or i	nvestment fun	nd manager				
Indicate the person's rel 'connected' in Part B(2) of respecting Prospectus E Connected with th Insider of the issue Director or officer Employee of the is	of the Instruction xemptions) for the e issuer or inve er (other than a of the investme	ns and the meanin he purposes of col stment fund mar n investment fun ent fund or invest	ng of 'control' i mpleting this s nager nd) tment fund m	in section 1.4 of N section.			
None of the above	:	_					
d) Compensati	on details						

Cash commissions paid	\$5,600.0000		
Value of all securities distributed as compensation ⁴			
Coqueity codes	Security code 1	Security code 2	Security code 3
Security codes	CMS	WNT	
	ſ]
Describe terms of warrants, options or other rights		arrants exercisable \$0.25, expiring on	
Other compensation ⁵			
Describe			
			_
Total compensation paid	\$5,600.0000		
Check box if the person will or may receive any def	erred compensation	on (describe the te	erms below)
⁴ Provide the aggregate value of all securities distributed as compensative securities of the issuer. Indicate the security codes for all securities dist acquire additional securities of the issuer.			
⁵ Do not include deferred compensation.			

Provide information for each person (as defined in NI 45-106) (in Québec, Regulation 45-106 respecting Prospectus Ex whom the issuer directly provides, or will provide, any compensation in connection with the distribution. Complete ac copies of this page if more than one person was, or will be, compensated.	
Indicate whether any compensation was paid, or will be paid, in connection with the distribution.	
a) Name of person compensated and registration status	
Indicate whether the person compensated is a registrant.	
□ No ✓ Yes	
If the person compensated is an individual, provide the name of the individual.	
Full legal name of individual	
Family nameFirst given nameSecondary giveIf the person compensated is not an individual, provide the following information.	n names
Full legal name of non-individual HAYWOOD SECURITIES INC. / VALEURS MOBILIERES HAYWOOD Inc.	
Firm NRD number 1630 (if applicable)	
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based po	ortal
🖌 No 🗌 Yes	
b) Business contact information	
If a firm NRD number is not provided in Item 8(a), provide the business contact information of the person being comp	ensated
Street address	
Municipality Province/State	
Country Postal code/Zip code	
Email address Telephone number	
c) Relationship to issuer or investment fund manager	
Indicate the person's relationship with the issuer or investment fund manager (select all that apply). Refer to the mean 'connected' in Part B(2) of the Instructions and the meaning of 'control' in section 1.4 of NI 45-106 (in Québec, Regulati respecting Prospectus Exemptions) for the purposes of completing this section.	
Connected with the issuer or investment fund manager	
Insider of the issuer (other than an investment fund)	
Director or officer of the investment fund or investment fund manager	
 Employee of the issuer or investment fund manager None of the above 	
d) Compensation details	

Cash commissions paid	\$4,440.0000		
Value of all securities distributed as compensation ⁴			
Sociutity codes	Security code 1	Security code 2	Security code 3
Security codes	CMS	WNT	
Describe terms of warrants, options or other rights			
Other compensation ⁵			
Describe	29600 Broker Warrants exercisable at the price of \$0.20, \$0.22 and \$0.25, expiring on August 12, 2027		
Total compensation paid	\$4,440.0000		
Check box if the person will or may receive any def	erred compensati	on (describe the te	erms below)
⁴ Provide the aggregate value of all securities distributed as compensa securities of the issuer. Indicate the security codes for all securities dis acquire additional securities of the issuer.		-	

⁵Do not include deferred compensation.

ITEM 9 – DIRECTORS, EXECUTIVE OFFICERS AND PROMOTERS OF THE ISSUER

If the issuer is an investment fund, do not complete Item 9. Proceed to Item 10.

Indicate whether the issuer is any of the following (select the one that applies - if more than one applies, select only one).

Foreign public issuer

Wholly owned subsidiary of a reporting issuer in any jurisdiction of Canada ⁶

Provide name of reporting issuer

Wholly owned subsidiary of a foreign public issuer ⁶

Provide name of foreign public issuer

□ Issuer distributing only eligible foreign securities and the distribution is to permitted clients only ⁷.

If the issuer is at least one of the above, do not complete Item 9(a) - (c). Proceed to Item 10.

⁶ An issuer is a wholly owned subsidiary of a reporting issuer or a foreign public issuer if all of the issuer's outstanding voting securities, other than securities that are required by law to be owned by its directors, are beneficially owned by the reporting issuer

or the foreign public issuer, respectively.

⁷ Check this box if it applies to the current distribution even if the issuer made previous distributions of other types of securities to non-permitted clients. Refer to the definitions of "eligible foreign security" and "permitted client" in Part B(1) of the Instructions.

□ If the issuer is none of the above, check this box and complete Item 9(a) – (c).

a) Directors, executive officers and promoters of the issuer

Provide the following information for each director, executive officer and promoter of the issuer. For locations within Canada, state the province or territory, otherwise state the country. For "Relationship to issuer", "D" – Director, "O" – Executive Officer, "P" – Promoter.

Organization or company name	Family name	First given	Secondary given names	Business location of non-individual or residential jurisdiction of individual		Relationship to issuer (select all that apply)			
		name		Province or country	D	0	Р		

b) Promoter information

If the promoter listed above is not an individual, provide the following information for each director and executive officer of the promoter. For locations within Canada, state the province or territory, otherwise state the country. For "Relationship to promoter", "D" – Director, "O" – Executive Officer.

Organization or	Family	First given	, , ,	en Residential jurisdiction Relationship to pro of individual one or both if a		•	
company name	name	name	names	Province or country	D	0	

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.

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 to that of a director of 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, 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/ investment fund manager/agent	Golden Cariboo Resources Ltd.						
Full legal name	CALLAGHAN	Jam	ายร		Frances Gerard		
	Family name	First give	en name		Secondary given names		
Title	Director						
Telephone number	+1 (604) 551-7685	Email address	jfgcallaghan	@gmail.	com		
Signature	"James Frances Gerard Callaghan"	Date	2024 YYYY	08 MM	21 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 individual certifying the report

Full legal name			
	Family name	First given name	Secondary given names
Title			
Name of company			
Telephone number		Email address	

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.

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.