Form 45-106F1 Report of Exempt Distribution

IT IS AN OFFENCE TO MAKE A MISREPRESENTATION IN THIS REPORT

ITEM 1 - REPORT TYPE		
 New report Amended report If amen 	ded, provide filing date of report that	is being amended 2017 06 08 (YYYY-MM-DD)
ITEM 2 - PARTY CERTIFYING THE	Report	
	ct only one). For guidance regarding whether and the companion p	n issuer is an investment fund, refer to section 1.1 of
Investment fund issuer	a continuous Disclosure una the companion p	oncy to Nr 81-100.
 ✓ Invocution rand leader ✓ Issuer (other than an invest 	tment fund)	
	,	
ITEM 3 - ISSUER NAME AND OTH		
	issuer, or if the issuer is an investment fund, al	bout the fund.
Full legal name	Alba Minerals Ltd.	
Previous full legal name		
If the issuer's name changed in	the last 12 months, provide most recent previou	is legal name.
Website	www.albamineralsltd.com	(if applicable)
If the issuer has a legal entity identifier. pro	vide below. Refer to Part B of the Instructions fo	or the definition of "legal entity identifier".
Legal entity identifier		
ITEM 4 - UNDERWRITER INFORM	ΔΤΙΟΝ	
		m National Registration Database (NRD) number
	rovide the underwriter's full legal hame and fin	m National Registration Database (NRD) number.
Full legal name	·····	
Firm NRD number	(if a	applicable)
If the underwriter does not have a firm NRL	number, provide the head office contact inform	mation of the underwriter.
Street address		
Municipality	Pro	ovince/State
Country	Postal co	ode/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 corresponds to the issuer's primary business activity. For more information on finding the NAICS industry code go to Statistics Canada's NAICS industry search tool .
NAICS industry code212398
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. If the issuer is in the mining industry , indicate the stage of operations. If the issuer is in the mining industry , indicate the stage of operations. If the issuer is in the category that best describes the issuer's stage of operations. If the issuer is in the mining industry. If the issuer is in the mining industry is the issuer's stage of operations. If the issuer is in the mining industry. If the issuer is industry.<
Is the issuer's primary business is to invest all or substantially all of its assets in any of the following? If yes, select all that apply. Mortgages Real estate Commerial/business debt Consumer debt Private companies
b) Number of employees
Number of employees: ✓ 0 - 49 50 - 99 100 - 499 500 or more
c) SEDAR profile number
Does the issuer have a SEDAR profile?
No Yes If yes, provide SEDAR profile number 0 0 0 0 8 3 6 5
If the issuer does not have 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
f) Reporting issuer status
Is the issuer a reporting issuer in any jurisdication of Canada? No Yes
If yes, select the jurisdictions of Canada in which the issuer is a reporting issuer.
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 names of all exchanges on which its securities are listed. Include only the names of exchanges for which the issuer has applied for and received a listing, which excludes, for example, automated trading systems.
Exchange name(s):
h) Size of issuer's assets
Select the size of the issuer's assets for its most recent financial year-end (Canadian \$). If the issuer has not existed for a full 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
S100M to under \$500M S500M to under \$1B \$1B or over

ITEM 6 - INVESTMEN	t Fund Issuer Information
If the issuer is an invest	tment fund, provide the following information.
a) Investment fund m	anager information
Full legal name	
Firm NRD number	(if applicable)
If the investment fund ma	nager does not have a firm NRD number, provide the head office contact information of the investment fund manager.
Street address	
Municipality	Province/State
Country	Postal code/Zip code
Telephone number	Website (if applicable)
b) Type of investmen	t fund
Type of investment fund the	at most accurately identifies the issuer (select only one) .
Money market	Equity Fixed income
Balanced	Alternative strategies Other (describe)
Indicate whether one or bot	h of the following apply to the investment fund .
Invests primarily in	n other investment fund issuers
Is a UCITs Fund ¹	ive Investment of Transferable Securities funds (UCITs Funds) are investment funds regulated by the European Union (EU)
directives that allow collecti	ve investment of transferable securities tands (och's runds) are investment tands regulated by the European onion (EO) ve investment schemes to operate throughout the EU on a passport basis on authorization from one member state.
c) Date of formation a	and financial year-end of the investment fund
Date of forma	tion Financial year-end MM DD MM DD
d) Reporting issuer s	tatus of the investment fund
Is the investment fund a rep	porting issuer in any jurisdication of Canada? 🔲 No 🗌 Yes
If yes, select the jurisdictions	of Canada in which the investment fund is a reporting issuer. AB BC MB NB NL NT
	s of the investment fund
If the investment fund has a	a CUSIP number, provide below (first 6 digits only)
	CUSIP number
	blicly listed, provide the names of all exchanges on which its securities are listed. Include only the names of exchanges for I for and received a listing, which excludes, for example, automated trading systems.
Exchange nam	les
f) Net asset value (NA	AV) of the investment fund
-	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 \$50	
	YYYY MM DD

ITEM 7 - INFORMATION A	BOUT THE DISTRIBUTIO	DN					
If an issuer located outside of Canc purchasers resident in that jurisdict should be disclosed in Item 8. The i	ada completes a distribution in a tion of Canada only. Do not inc	a jurisdict lude in Ite	em 7 securitie	es issued as	s payment of cor	mmissions or find	ler's fees, which
a) Currency							
Select the currency or currencies in	which the distribution was ma	de. All do	llar amounts	provided i	n the report mus	st be in Canadian	dollars.
🖌 Canadian dollar	US dollar 🛛 🗌 Euro	0	Other	(describe)		
b) Distribution date(s)							
State the distribution start and en as both the start and end dates. If distribution period covered by the Start d	f the report is being filed for sec e report.	urities dis			e 2017		
c) Detailed purchaser inform	mation						
Complete Schedule 1 of this f	form for each purchaser a	nd attac	h the sche	dule to ti	he completed	report.	
d) Types of securities distri	buted						
Provide the following information Instructions for how to indicate t distributed. The information inclu <u>Asked Questions.</u>	he security code. If providing th	e CUSIP r	number, indic	ate the ful	l 9-digit CUSIP r	number assigned	to the security being
Security CUSIP number (if applicable)	Description of security		Numbe securi		Single or lowest price	Highest price	Total amount
UBS 004937 10	Common Share & 1 War	rant	2,200	,000.00	0.1000	0.1000	220,000.00
e) Details of rights and con	vertible/exchangeable secu	irities			•		
If any rights (e.g. warrants, option	ns) were distributed, provide the	e exercise	• •	-	-	•	changeable securities
were distributed, provide the con	Exercise price				-	ecurity.	
Security Underlying code security code	(Canadian \$) Lowest Highest		iry date - MM-DD)	Convers ratio		ibe other items (if a	applicable)
W N T C M S	0.1500 0.1500	2019	9-03-06	1:1			
f) Summary of the distributi	on by jurisdiction and exem	ption					
State the total dollar amount of s purchaser resides and for each ex distribution in a jurisdiction of Ca This table requires a separate line purchaser resides, if a purchaser jurisdiction. For jurisdictions within Canada, s	xemption relied on in Canada fo anada, include distributions to p e item for: (i) each jurisdiction w resides in a jurisdiction of Cana	or that dis ourchasers where a pu da, and (i	tribution. Ho s resident in t urchaser resic ii) each exem	wever, if a hat jurisdi les, (ii) eac option relie	n issuer located ction of Canada h exemption reli	outside of Canad only. ed on in the juris	a completes a diction where a
Province or country	Exemption	n relied on			Number of purchasers	Total amou	nt (Canadian \$)
British Columbia	NI 45-106 2.3 [Accredi	ted inve	estor]		9		100,000.00
Ontario	NI 45-106 2.3 [Accredi	ted inve	estor]		3		35,000.00
Nova Scotia	NI 45-106 2.3 [Accredi	ted inve	estor]		5		40,000.00
New Brunswick	NI 45-106 2.3 [Accredi	ted inve	estor]		2		10,000.00
United States	NI 45-106 2.5 [Family, associates]	friends	and busin	ess	1		25,000.00
Alberta	NI 45-106 2.3 [Accredi	ted inve	estor]		1		10,000.00
		Total do	lar amount	of securit	ies distributed		220,000.00
	Total num	ber of ur	ique purcha	asers ²	21		
2	of unique purchasers to which t	ha iccuar	distributed a	ocurition o	ount oach purch	acor only onco r	aardlass of whathar

'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	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.

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 jurisdictions.

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.

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)

ITEM 8 - COMPENSATIO	ION INFORMATION	
	h person (as defined in NI 45-106) to whom the issuer directly provides, or will provide, any compensation plete additional copies of this page if more than one person was, or will be, compensated.	on in connection
Indicate whether any compension	ensation was paid, or will be paid, in connection with the distribution.	
🗌 No 🗹 Yes	If yes, indicate number of persons compensated.	
a) Name of person com	mpensated and registration status	
Indicate whether the perso	rson compensated is a registrant. 🖌 No 🗌 Yes	
If the person compensated is	l is an individual, provide the name of the individual.	
Full legal name of indiv	dividual	
	Family name First given name Secondary given name	es
If the person compensated	d is not an individual, provide the following information.	
Full legal name	ne of non-individual SKYE CAPITAL CORPORATION INC.	
F	Firm NRD number (if applicable)	
Indicate whether the persor		√ No □ Yes
b) Business contact info		
,	ot provided in Item 8 (a), provide the business contact information of the person being compensated.	
Street address	1287 Route 331	
		1
Country	Canada Postal code/Zip code B0R 1G0	
Email address		
		38
Indicate the person's relation	ler or investment fund manager ionship with the issuer or investment fund manager (select all that apply). Refer to the meaning of "conn d the meaning of "control" in section 1.4 of NI 45-106 for the purposes of completing this section.	ected" in Part
	ssuer or investment fund manager	stment fund)
	of the investment fund or investment fund manager	,
✓ None of the above		
d) Compensation details	ills	
Canadian dollars. Include cas services incidental to the dist	ensation paid, or to be paid, to the person identified in Item 8(a) in connection with the distribution. Prov cash commissions, securities-based compensation, gifts, discounts or other compensation. Do not report p istribution, such as clerical, printing, legal or accounting services. An issuer is not required to ask for deta Ingements with the directors, officers or employees of a non-individual compensated by the issuer.	payments for
Cash commissions p	s paid 4,800.00 Security codes Security code 1 Security code 2	Security code 3
Value of all securiti distributed compensatio	rities das	
Describe	be terms of warrants, options or other rights	
Other compensation	ation ⁵ Describe	
Total compensation pa	paid 4,800.00	
Check box if the pe	person will or may receive any deferred compensation (describe the terms below)	
]
⁴ Provide the anarenate value	alue of all securities distributed as compensation, <u>excluding</u> options, warrants or other rights exercisal	ble to acquire
additional securities of the is	e issuer. Indicate the security codes for all securities distributed as compensation, <u>including</u> options, v irre additional securities of the issuer.	

⁵Do not include deferred compensation.

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 CROMWELL JAMES
Family name First given name Secondary given names
If the person compensated is not an individual, provide the following information.
Full legal name of non-individual
Firm NRD number (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 compensated.
Street address 220-145 Chadwick Court
Municipality Vancouver Province/State British Columbia
Country Canada Postal code/Zip code V7M 3K1
Email address tradewaycomm@shaw.ca Telephone number 6046263115
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 for the purposes of completing this section.
Connect 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
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 1,200.00 Security codes Security code 1 Security code 2 Security code 3
Value of all securities distributed as compensation ⁴
Describe terms of warrants, options or other rights
Other compensation ⁵ Describe
Total compensation paid 1,200.00
Check box if the person will or may receive any deferred compensation (describe the terms below) Provide the aggregate value of all securities distributed as compensation, <u>excluding options</u> , 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. Indicate the security codes for all securities distributed as compensation.

rights exercisable to acquire additional securities of the issuer. ⁵Do not include deferred compensation.

a) Name of person com	nsated and registration status	
Indicate whether the perso	compensated is a registrant. 🔽 No 🗌 Yes	
If the person compensated is	individual, provide the name of the individual.	
Full legal name of indi	ual Powell Jason	
	Family name First given name Secondary given na	ames
If the person compensated	ot an individual, provide the following information.	
Full legal name	non-individual	
F	n NRD number (if applicable)	
Indicate whether the persor	mpensated facilitated the distribution through a funding portal or an internet-based portal.	🖌 No 🗌 Yes
b) Business contact info	ation	
If a firm NRD number is not	vided in Item 8 (a), provide the business contact information of the person being compensated.	
Street address	963 West 21st Avenue	
Municipality	ancouver Province/State British Co	olumbia
Country	anada Postal code/Zip code V6L 1K7	
Email address	owell@albamineralsItd.co Telephone number 6047796	497
		101
c) Relationship to issue	r investment fund manager	
-	p with the issuer or investment fund manager (select all that apply). Refer to the meaning of "co meaning of "control" in section 1.4 of NI 45-106 for the purposes of completing this section.	onnected" in Part
	or investment fund manager Insider of the issuer (other than an ir	vestment fund)
Director or officer of	investment fund or investment fund manager	nt fund manager
None of the above		Ũ
d) Compensation details		
Provide details of all compen Canadian dollars. Include cas services incidental to the dist	ion paid, or to be paid, to the person identified in Item 8(a) in connection with the distribution. F ommissions, securities-based compensation, gifts, discounts or other compensation. Do not repo ition, such as clerical, printing, legal or accounting services. An issuer is not required to ask for a ents with the directors, officers or employees of a non-individual compensated by the issuer.	ort payments for
Cash commissions p	6,400.00 Security codes Security code 1 Security code	e 2 Security code 3
Value of all securiti distributed		
compensati		
Describe	ms of warrants, options or other rights	
Other compensation	Describe	
Total compensation pa	6,400.00	
Check box if the p	on will or may receive any deferred compensation (describe the terms below)	
	of all securities distributed as compensation, <u>excluding</u> options, warrants or other rights exerci	
	er. Indicate the security codes for all securities distributed as compensation, <u>including</u> option. Iditional securities of the issuer.	s, warrants or other

⁵Do not include deferred compensation.

a) Name of person compensated and registration status	
Indicate whether the person compensated is a registrant. Vo Ves	;
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 names
If the person compensated is not an individual, provide the following information.	
Full legal name of non-individual MACKIE RESEARCH CAPITAL CORPORATION	ΓΙΟΝ
Firm NRD number	(if applicable)
Indicate whether the person compensated facilitated the distribution through a funding portal or an inter-	nternet-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 perso	son being compensated.
Street address 1075 West Georgia Street	
Municipality Vancouver Provinc	nce/State British Columbia
Country Canada Postal code/Z	Zip code V6E 3C9
Email address Telephone r	e number 7283734100
c) Relationship to issuer or investment fund manager	
Indicate the person's relationship with the issuer or investment fund manager (select all that apply). Refe B(2) of the Instructions and the meaning of "control" in section 1.4 of NI 45-106 for the purposes of comp	÷
Connect with the issuer or investment fund manager	e issuer (other than an investment fund)
Director or officer of the investment fund or investment fund manager Employee of the	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 Canadian dollars. Include cash commissions, securities-based compensation, gifts, discounts or other com services incidental to the distribution, such as clerical, printing, legal or accounting services. An issuer is n on, internal allocation arrangements with the directors, officers or employees of a non-individual compen	mpensation. Do not report payments for not required to ask for details about, or report
Cash commissions paid 2,000.00 Security codes Security	rity code 1 Security code 2 Security code 3
Value of all securities distributed as compensation ⁴	
Describe terms of warrants, options or other rights	
Other compensation ⁵ Describe	
Total compensation paid 2,000.00	
Check box if the person will or may receive any deferred compensation (describe the terms t	s below)
⁴ Provide the aggregate value of all securities distributed as compensation, <u>excluding</u> options, warrants additional securities of the issuer. Indicate the security codes for all securities distributed as compensa rights exercisable to acquire additional securities of the issuer.	

⁵Do not include deferred compensation.

Item 9	- DIRECTORS, EXECUTIV	/E OFFICERS A	ND PROMO	TERS OF THE I	SSUER				
If the	issuer is an investment fund, a	lo not complete Ite	em 9. Procced to	o Item 10.					
Indicat	te whether the issuer is any of the	e following (select a	ll that apply).						
\checkmark	Reporting issuer in any jurisdic	tion of Canada							
	Foreign public issuer								
	Wholly owned subsidiary of a r	eporting issuer in a	iny jurisdiction of	f Canada ⁶					
	Provide name o	of reporting issuer							
	Wholly owned subsidiary of a fe	oreign public issuer	r ⁶						
	Provide name of for	eign public issuer							
	Issuer distributing eligible foreig	on securities only to	permitted clien	ts ⁷					
If the	issuer is at least one of the ab	ove, do not compl	ete Item 9(a) –	(c). Proceed to Ite	m 10.				
securitie ⁷ Check	uer is a wholly owned subsidiary ies that are required by law to be this box if it applies to the curre Refer to the definitions of "eligib If the issuer is none of the abo	e owned by its direc nt distribution even ole foreign security'	ctors, are benefic if the issuer ma and "permitted	cially owned by the de previous distrib client" in Part B(1)	reporting issuer utions of other ty	or the foreig pes of secu	n publ	ic issue	er, respectively.
a) D	Virectors, executive officers a	nd promoters of	the issuer						
	de the following information for ory; otherwise state the country. I						da, sta	te the p	province or
ο	rganization or company name	Family name	First given name	Secondary give names	Business lo non-indivio residen jurisdicti indivio	dual or ntail ion of		ationsh issuer ect all apply)	that
					Province o	r country	D	0	Р
b) P	romoter information		·						
	promoter listed above is not an n Canada, state the province or t		-				-		
0	rganization or company name	Family name	First given name	Secondary given names	Residential jurisdiction of individual	Relatio (select one			
					Province or country	D		C)
c) R	esidential address of each ir	ndividual							
Compl	lete Schedule 2 of this form pro	oviding the full res	sidential addre	ss for each individ	lual listed in Ite	m 9(a) and	(b) an	d atta	:h 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 or director 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 not be delegated to an agent or other individual preparing the report on behalf of the issuer or underwriter. If the individual completing and filing the report is different from the individual certifying the report, provide their name and contact details 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.

IT IS AN OFFENCE TO MAKE A MISREPRESENTATION IN THIS REPORT

By completing the information below, I certify to the securities regulatory authority or regulator that:

- I have read and understand this report; and
- all of the information provided in this report is true.

Full legal name	Jonsson	Carl	Roland		
	Family name	First given name	Secondary given names		
Title	Secretary				
Name of issuer/underwriter/ investment fund manager	Alba Minerals Ltd.				
Telephone number	6046406357	Email address jonsson@	@securitieslaw.bc.ca		
Signature	"Carl R Jonsson"	Date 2017	06 09		
		YYYY	MM 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.

 \checkmark Same as individual certifying the report

Full legal name				Title
	Family name	First given name	Secondary given names	
Name of company				
Telephone number		E	mail 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.

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 Schedules 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.