Form 45-106F1 *Report of Exempt Distribution*

ITEM 1 - REPORT TYPE										
✓ New report										
Amended report If	Amended report If amended, provide filing date of report that is being amended (YYYY-MM-DD)									
ITEM 2 - PARTY CERTIFYIN	g the	REPOR	Г							
Indicate the party certifying the rep Instrument 81-106 Investment Fund									vestment fund, refer to sec	tion 1.1 of National
Investment fund issue						, ,				
✓ Issuer (other than an	invest	ment fui	nd)							
ITEM 3 - ISSUER NAME AND OTHER IDENTIFIERS										
Provide the following information a	about the	e issuer, or	if the is	suer is an	invest	ment fu	nd, aboı	ut the fund.		
Full legal	name	Idaho C	hamp	ion Golo	l Mir	nes Ca	Inada	Inc.		
Previous full legal	name									
If the issuer's name change	ed in the	last 12 ma	onths, pi	rovide mos	t rece	ent previ	ous lega	al name.		
We	ebsite	www.ida	ahoch	amp.cor	n			(if applicabl	e)	
If the issuer has a legal entity ident	ifier <u>,</u> pro	vide below	. Refer t	to Part B o	f the I	nstructi	ons for t	he definition	of "legal entity identifier".	
Legal entity ider	ntifier	254900	W2NC	DZ92H	O3C)44				
If two or more issuers distributed a	single se	ecurity, pro	vide the	e full legal	name	(s) of th	e co-issı	uer(s) other th	an the issuer named abov	e.
Full legal name(s) of co-iss	uer(s)							(if applicabl	e)	
Item 4 - Underwriter In	FORM	ATION								
If an underwriter is completing the	report, p	provide the	underw	riter's full	legal	name a	nd firm l	NRD number.		
Full legal name										7
Firm NRD number							(if app	olicable)		
If the underwriter does not have a f	irm NRL) number, j	provide	the head o	office	contact	informa	tion of the un	derwriter.	
Street address										
Municipality							Prov	ince/State		
Country						Pos	tal code	e/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 2 1 2 2 0
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
Does the issuer have a SEDAR profile?
No ✓ Yes If yes, provide SEDAR profile number 0 0 0 8 8 9 9
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 Financial year-end
YYYY MM DD MM DD
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.
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.
Exchange 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
S100M to under \$500M	S500M to under \$1B	\$1B or over

ITEM 6 - INVESTMENT	FUND ISSUER INFORMATION
If the issuer is an inves	tment fund, provide the following information.
a) Investment fund m	anager information
Full legal name	
Firm NRD number	(if applicable)
If the investment fund mane	ager 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 investment	fund
Type of investment fund the	nt most accurately identifies the issuer (select only one) .
Money market	Equity Fixed income Balanced
Alternative strateg	jies Cryptoasset 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	
	tive Investment of Transferable Securities funds (UCITs Funds) are investment funds regulated by the European Union ollective investment schemes to operate throughout the EU on a passport basis on authorization from one member state.
c) Date of formation a	nd financial year-end of the investment fund
Date of forma	tion Financial year-end
	YYYY MM DD MM DD
d) Reporting issuer st	atus of the investment fund
Is the investment fund a rep	orting issuer in any jurisdication of Canada? No Yes
	s of Canada in which the investment fund is a reporting issuer.
	AB BC MB NB NL NT
	NU ON PE QC SK YT
e) Public listing status	s of the investment fund
If the investment fund has a	CUSIP number, provide below (first 6 digits only)
	CUSIP number
	blicly listed, provide the name of the exchange on which the investment fund's securities primarily trade. Provide only the not a trading facility such as, for example, an automated trading system.
Exchange n	ame
f) Net asset value (NA	V) 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 \$50	DM \$500M to under \$1B \$1B or over Date of NAV calculation:
	YYYY MM DD

ITEM 7 - INFORMATION ABOUT THE DISTRIBUTION

	Canada completes		residuction of Canada inc	ludo in Itom 7 an	d Schodi	la 1 inform	nation about					
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 Schedule 1 of the report.	on, which must be o	disclosed in Item 8. T	he information provided	in Item 7 must re	econcile v	vith the in	formation provided in					
a) Currency												
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	US dollar	Euro	Other (describ									
b) Distribution date(s)												
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 basis, include the start and end dates for the distribution period covered by the report.												
	t date 2022	12 21	End da	^{ate} 2022	12	23						
	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 of	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 (if applicable)	Descriptio	on of security	Number of securities	Single or lowest price	High	est price	Total amount					
F T S 451153			16,220,767.0	0.060	0	0.0700	1,116,787.02					
e) Details of rights and	convertible/exch	angeable securiti	es									
lf any rights (e.g. warrants, op were distributed, provide the		•		-	-		xchangeable securities					
Convertible / exchangeable Underlying security code security code	(Car	cise price nadian \$)	Expiry date (YYYY- MM-DD)	Conversion ratio	Desc	Describe other items (if applicable)						
	Lowest	Highest										
f) Summary of the distr		-										
purchaser resides and for eac distribution in a jurisdiction o This table requires a separate purchaser resides, if a purcha jurisdiction.	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											
Province or country		Exemption relie	d on	Number of unique purchasers		Total ar	mount (Canadian \$)					
Québec	NI 45-106 2	2.3 [Accredited i	nvestor]		25		344,785.00					
Ontario					3		602,000.02					
	INI 45-106 2	2.3 [Accredited i	nvestor				,					
British Columbia		2.3 [Accredited i 2.3 [Accredited i	-		1		170,002.00					
British Columbia		2.3 [Accredited i	-	ecurities distrib	1 outed							
British Columbia		2.3 [Accredited i	nvestor]		1 outed 29		170,002.00					

^{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	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 - COMPENSATION	INFORMATION				
Provide information for each person the distribution. Complete additi					any compensation in connection with ited.
Indicate whether any compensati	ion was paid, or will be pa	id, in connectio	on with the distribut	ion.	
🗌 No 🗹 Yes	If yes, indicate num	nber of perso	ns compensated.	4	
a) Name of person compen	sated and registration	status			
Indicate whether the person comp	ensated is a registrant.		No	✓ Yes	
If the person compensated is an in	dividual, provide the nam	e of the individ	ual.		
Full legal name of individu	lal				
	Family na	ame	First gi	ven name	Secondary given names
If the person compensated is not a	n individual, provide the f	following inform	nation.		
Full legal name of	non-individual BT CF	ROISSANCE	GLOBALE / BT (GLOBAL GROWT	H INC.
Firm	NRD number 3	4 1	9 0	(if app	olicable)
Indicate whether the person comp	ensated facilitated the dis	tribution throug	gh a funding portal	or an internet-based	portal. 🗸 No 🗌 Yes
b) Business contact informa	ation				
If a firm NRD number is not provid	led in Item 8 (a), provide t	the business co	ntact information of	^f the person being co	mpensated.
Street address					
Municipality				Province/State	
Country			Pos	stal code/Zip code	
Email address			Т	elephone number	
c) Relationship to issuer or	investment fund mana	ager			
Indicate the person's relationship w the Instructions and the meaning o					raning of "connected" in Part B(2) of
Connect with the issuer	or investment fund mana	ger	lns	ider of the issuer (ot	ther than an investment fund)
Director or officer of the	investment fund or invest	tment fund ma	nager 🗌 En	nployee of the issuer	r or investment fund manager
✓ None of the above					
d) Compensation details					
incidental to the distribution, such allocation arrangements with the a	nmissions, securities-based as clerical, printing, legal lirectors, officers or emplo	d compensatior or accounting s	, gifts, discounts or ervices. An issuer is	other compensation. not required to ask f	istribution. Provide all amounts in Do not report payments for services for details about, or report on, internal
Cash commissions paid	17,186.75			Security code 1	Security code 2 Security code 3
Value of all securities distributed as compensation ⁴		S	ecurity codes		
Describe tern	ns of warrants, options or	r other rights			
Other compensation ⁵		Describe			
Total compensation paid					
Check box if the perso	on will or may receive any	deferred com	pensation (describe	e the terms below)	
			a analo d'a a d'		
⁴ Provide the aggregate value of a additional securities of the issuer, rights exercisable to acquire addi r	Indicate the security cod itional securities of the iss	les for all secu			
⁵ Do not include deferred compen-	sation.				

a) Name of person comp	pensated and regis	tration status				
Indicate whether the person co	mpensated is a registr	rant.	No No	✓ \	Yes	
If the person compensated is a	n individual, provide ti	he name of the indivi	dual.			
Full legal name of indiv	vidual					
	F	amily name	Fire	st given nar	ne	Secondary given names
If the person compensated is n	ot an individual, provi	de the following infor	mation.			
Full legal name	of non-individual	Canaccord Genuit	ty Corp./Corpor	ration Ca	naccord Ger	nuity
F	irm NRD number	9 0 0			(if app	olicable)
Indicate whether the person co	mpensated facilitated	the distribution throu	igh a funding poi	rtal or an i	nternet-based	portal. 🖌 No 🗌 Yes
b) Business contact info	rmation					
If a firm NRD number is not pr	ovided in Item 8 (a), p	rovide the business co	ontact informatio	n of the pe	erson being co	mpensated.
Street address						
Municipality				Pro	ovince/State	
Country				Postal co	de/Zip code	
Email address				Telepho	one number	
c) Relationship to issuer	or investment fund	l manager	1			
						eaning of "connected" in Part B(2) of
the Instructions and the meaning Connect with the issues	-		or the purposes o	-	-	<i>.</i> ther than an investment fund)
Director or officer of t	the investment fund o	r investment fund ma	anager	Employee	e of the issuer	r or investment fund manager
✓ None of the above						
d) Compensation details	;					
Canadian dollars. Include cash	commissions, securitie Ich as clerical, printing	es-based compensatic , legal or accounting	n, gifts, discounts services. An issue	s or other c er is not rec	compensation. quired to ask f	istribution. Provide all amounts in Do not report payments for services for details about, or report on, internal
Cash commissions pa	aid 5,65	52.50		S	ecurity code 1	Security code 2 Security code 3
Value of all securitio			Security codes			
	terms of warrants, op	tions or other rights				
Other compensation	n ⁵	Describe				
Total compensation pa						
Check box if the pe	erson will or may rece	ive any deferred con	npensation (desc	ribe the te	erms below)	
⁴ Provide the aggregate value additional securities of the iss rights exercisable to acquire a ⁵ Do not include deferred comp	uer. Indicate the secu additional securities of	rity codes for all sect				rights exercisable to acquire Iding options, warrants or other

a) Name of person comp	ensated and registrati	on status							
Indicate whether the person cor	npensated is a registrant.		No No	\checkmark	Yes				
If the person compensated is an	individual, provide the n	ame of the indivi	dual.						
Full legal name of indiv	idual								
	Famil	ly name	Firs	st given na	ame	I	Secon	dary given n	ames
If the person compensated is no	t an individual, provide ti	ne following infor	mation.						
Full legal name	of non-individual GL	ORES SECUR	ITIES INC						
Fi	irm NRD number 7	0 1	8 0			(if appli	cable)		
Indicate whether the person cor	npensated facilitated the	distribution throu	igh a funding por	tal or an	internet-	based p	ortal.	✓ No	Yes
b) Business contact infor	mation								
If a firm NRD number is not pro	ovided in Item 8 (a), provi	de the business co	ontact information	n of the p	person be	ing com	pensated.		
Street address									
Municipality				P	rovince/	State			
Country			F	Postal c	ode/Zip	code			
Email address				Telepl	hone nu	mber			
c) Relationship to issuer	or investment fund ma	anager	J						
Indicate the person's relationshi the Instructions and the meanin							ning of "con	nected" in	Part B(2) of
Connect with the issu	er or investment fund ma	anager		Insider of	of the iss	uer (oth	er than an ir	nvestment	fund)
Director or officer of th	he investment fund or inv	estment fund ma	anager	Employ	ee of the	issuer o	or investmer	nt fund mar	nager
✓ None of the above									
d) Compensation details									
Provide details of all compensat Canadian dollars. Include cash c incidental to the distribution, suc allocation arrangements with th	ommissions, securities-bo ch as clerical, printing, leg e directors, officers or em	ased compensatio gal or accounting ployees of a non-	n, gifts, discounts services. An issue	or other r is not r	compens	sation. D o ask for	o not report	t payments	for services
Cash commissions pa	id 24,500.0	0			Security c	ode 1	Security cod	e 2 Secu	urity code 3
Value of all securitie distributed as compensatio			Security codes						
	erms of warrants, option	 s or other rights							
Other compensation	n ⁵	Describe							
Total compensation pa	id								
Check box if the pe	rson will or may receive	_ any deferred con	pensation (desc	ribe the t	terms bel	low)			
⁴ Provide the aggregate value of additional securities of the issu- rights exercisable to acquire ad ⁵ Do not include deferred comp	er. Indicate the security dditional securities of the	codes for all sect							

a) Name of person comp	ensated and registration statu	s				
Indicate whether the person con	npensated is a registrant.] No	✓ Yes	;	
If the person compensated is an	individual, provide the name of th	e individual	<u>l</u> .			
Full legal name of indiv	idual					
	Family name	I	First	given name		Secondary given names
If the person compensated is no	t an individual, provide the followi	ng informat	ion.			
Full legal name	of non-individual RED CLOU	D SECUR	RITIES INC.			
Fi	rm NRD number 6 2	8	1 0		(if appli	icable)
Indicate whether the person con	npensated facilitated the distribution	on through a	a funding porte	al or an inter	met-based p	ortal. 🖌 No 🗌 Yes
b) Business contact infor	mation					
If a firm NRD number is not pro	wided in Item 8 (a), provide the bu	siness conta	ct information	of the perso	n being com	pensated.
Street address						
Municipality				Provir	nce/State	
Country			P	ostal code/	Zip code	
Email address				Telephone	e number	
c) Relationship to issuer	or investment fund manager					
	p with the issuer or investment fur g of "control" in section 1.4 of NI 4					ning of "connected" in Part B(2) of
Connect with the issue	er or investment fund manager		· 🗆	nsider of the	e issuer (oth	er than an investment fund)
Director or officer of th	ne investment fund or investment	fund manag	ger 🗌 E	Employee of	the issuer c	or investment fund manager
✓ None of the above						
d) Compensation details						
Canadian dollars. Include cash c incidental to the distribution, suc		pensation, g punting serv	ifts, discounts o vices. An issuer	or other com is not requir	pensation. D ed to ask for	tribution. Provide all amounts in Do not report payments for services r details about, or report on, internal
Cash commissions pa	id 8,500.10			Secur	rity code 1	Security code 2 Security code 3
Value of all securitie distributed as compensation		Secu	urity codes			
	erms of warrants, options or other	rights				
Other compensation	n ⁵ De	scribe				
Total compensation pa	id					
Check box if the per	rson will or may receive any defer	red comper	nsation (descri	be the terms	s below)	
additional securities of the issu	of all securities distributed as comp er. Indicate the security codes for dditional securities of the issuer. ensation.					

	ITIVE OFFICERS	AND PROMO	ERS OF THE ISS	UER						
If the issuer is an investment fun	d, do not complete	Item 9. Procced 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).										
✓ Reporting issuer in any jurisdiction of Canada										
Foreign public issuer										
Wholly owned subsidiary of	f a reporting issuer i	n any jurisdiction of	Canada ⁶							
Provide nar	me of reporting issue	er]		
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 officer	rs and promoters	of the issuer								
Provide the following information for territory; otherwise state the country						tate the	province	or		
Organization or company name	Family name	First given name	Secondary given names	Business loc non-individu resident jurisdictio individu	ual or ail n of		tionship to issuer ect all that apply)			
				Province or country		D	0	Р		
b) Promoter information										
b) Promoter information If the promoter listed above is not ar within Canada, state the province or										
If the promoter listed above is not ar				omoter", "D" – Dire Residential jurisdiction of individual	ector, "O" - Rela	<i>Executi</i>		ter		
If the promoter listed above is not ar within Canada, state the province or	territory; otherwise	state the country. Fo	r "Relationship to pro	omoter", "D" – Dire Residential jurisdiction of	ector, "O" - Rela	<i>Executi</i>	to promo	ter licable)		
If the promoter listed above is not ar within Canada, state the province or	territory; otherwise	state the country. Fo	r "Relationship to pro	Residential jurisdiction of individual Province or	ector, "O" - Rela (select c	<i>Executi</i>	ve Officer to promo oth if app	ter licable)		

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 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 exemt 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/underwriter/ investment fund manager/agent	Idaho Champion Gold Mines Canada Inc.								
Full legal name	Fairhurst	Helga							
	Family name	First given name	•	Seconda	ıry given n	ames			
Title	Corporate Secretary								
Telephone number	41664218067	Email address	hfairhurst@idahochampion.com			n.com			
Signature	Helga Fairhurst	Date	2022	12	30				
			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.

Same as individual certifying the report

Full legal name				Title	
	Family name	First given name	Secondary given names		
Name of company					
Telephone number		Er	nail 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.