# 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 amended	ded, provide filing date	of report that is being am	ended	(YYYY-MM-DD)
ITEM 2 - PARTY CERTIFYING THE	Report			
Indicate the party certifying the report (selec National Instrument 81-106 Investment Fun				on 1.1 of
Investment fund issuer				
✓ Issuer (other than an invest	tment fund)			
Underwriter				
ITEM 3 - ISSUER NAME AND OTH Provide the following information about the		vestment fund, about the fund		
_	ParcelPal Technology			
Previous full legal name				
_	the last 12 menths provide me	oct recent provious logal name		
If the issuer's name changed in t Website	ne last 12 months, provide mo	sst recent previous legal name.	(if applicable)	
If the issuer has a legal entity identifier, prov Legal entity identifier	lide below. Refer to Part B of t	ne instructions for the definition	of "legal entity identifier".	
ITEM 4 - UNDERWRITER INFORM	ATION			
If an underwriter is completing the report, p	rovide the underwriter's full le	gal name and firm National Reg	istration Database (NRD) nu	mber.
Full legal name				
Firm NRD number		(if applicable)		
If the underwriter does not have a firm NRD	number, provide the head off	ice contact information of the ur	nderwriter.	
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 corresponds to the issuer's primary business activity. For more information on finding the NAICS industry code go to <b>Statistics Canada's NAICS industry search tool.</b> NAICS industry code 5 4 1 5 1 1
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.           Image: Im
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       9       8       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 <sup>1</sup>	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	ON						
If an issuer located outside of Can purchasers resident in that jurisdic should be disclosed in Item 8. The	tion of Canada only. Do not inc	clude in Ite	em 7 securitie	es issued a	as payment	t of con	nmissions or find	der's fees, which
a) Currency								
Select the currency or currencies in				-		ort mus	t be in Canadiar	n dollars.
Canadian dollar	] US dollar 🛛 🗌 Eur	0	Other	describe	e)			
b) Distribution date(s)								
State the distribution start and en as both the start and end dates. I distribution period covered by the Start o	f the report is being filed for sec e report.	curities dis			us basis, in	nclude t 8		
c) Detailed purchaser infor	mation							
Complete Schedule 1 of this	form for each purchaser a	nd attac	h the sche	dule to t	the comp	leted	report.	
d) Types of securities distr	ibuted							
Provide the following informatic Instructions for how to indicate distributed. The information incl <u>Asked Questions.</u>	the security code. If providing th	ne CUSIP r	number, indic	ate the fu	ll 9-digit C	CUSIP n	umber assigned	to the security being ee our <u>Frequently</u>
Security CUSIP number code (if applicable)	Description of security		Numbe		Single	st	Highest price	Total amount
				,924.00	price	e 1350		1,651,039.75
			12,229	,924.00	η <u></u> .	1350		1,031,039.75
e) Details of rights and cor If any rights (e.g. warrants, optio	vertible/exchangeable secu		nrice and exr	oirv date f	for each ria	aht If a	nv convertible/e	xchanaeable securities
were distributed, provide the co								
Security Underlying code Security code	Exercise price (Canadian \$)		iry date - MM-DD)	Convers ratio		Descri	be other items (if	applicable)
W N T C M S	Lowest Highest	2020	)-01-12					
	ion by jurisdiction and exem							
State the total dollar amount of purchaser resides and for each e distribution in a jurisdiction of C This table requires a separate lin purchaser resides, if a purchaser jurisdiction. For jurisdictions within Canada,	securities distributed and the nu xemption relied on in Canada fo anada, include distributions to p e item for: (i) each jurisdiction v resides in a jurisdiction of Cana	umber of p or that dis ourchasers where a pu ada, and (u	tribution. Ho s resident in t urchaser resic ii) each exem	wever, if a hat jurisda les, (ii) eac aption relia	an issuer lo liction of Co ch exempti	ocated o anada ion relie	outside of Canac only. ed on in the juris	la completes a sdiction where a
Province or country	Exemption	n relied on			Number of purchase		Total amou	nt (Canadian \$)
British Columbia	NI 45-106 2.3 [Accredi	ted inve	estor]			43		939,614.85
British Columbia	NI 45-106 2.5 [Family, associates]	friends	and busin	ess		10		108,449.96
Alberta	NI 45-106 2.3 [Accredi	ted inve	estor]			4		92,499.98
Saskatchewan	atchewan NI 45-106 2.3 [Accredited investor] 1 27,000.00							
Ontario	NI 45-106 2.3 [Accredi	ted inve	estor]			9		469,974.96
Québec	NI 45-106 2.3 [Accredi	ted inve	estor]			1		13,500.00
		Total do	lar amount	of securi	ties distri	buted		1,651,039.75
	Total num	ber of ur	ique purcha	asers <sup>2</sup>		68		
<sup>2</sup> In calculating the total number	of unique purchasers to which	the issuer	distributed se	ecurities. c	count each	purche	ser only once. r	eaardless of whether

<sup>2</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.

#### 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>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 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 (as defined in NI 45-106) to with the distribution. <b>Complete additional copies of this page</b>	whom the issuer directly provides, or will provide, any compensation in connection e <b>i f more than one person was, or will be, compensated.</b>
Indicate whether any compensation was paid, or will be paid, in c	connection with the distribution.
No Ves If yes, indicate number of	of persons compensated.
a) Name of person compensated and registration statu	JS
Indicate whether the person compensated is a registrant.	□ No   ✓ Yes
If the person compensated is an individual, provide the name of	f 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 foll	lowing information.
Full legal name of non-individual Canaccord	Genuity Corp.
Firm NRD number 9 0	0 (if applicable)
Indicate whether the person compensated facilitated the distrib	
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	
	fund manager (select all that apply). Refer to the meaning of "connected" in Part 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	
Canadian dollars. Include cash commissions, securities-based co	
Value of all securities	Security codes Security code 1 Security code 2 Security code 3
distributed as compensation <sup>4</sup>	
Describe terms of warrants, options or other	r rights 265,920 share purchase warrants with an exercise price of \$0.20 expiring on January 12, 2020.
Other compensation <sup>5</sup>	escribe
Total compensation paid 35,899.20	
Check box if the person will or may receive any defer	rred compensation (describe the terms below)
	mpensation, <u>excluding</u> options, warrants or other rights exercisable to acquire for all securities distributed as compensation, <u>including</u> options, warrants or other :

<sup>5</sup>Do not include deferred compensation.

a) Name of person com	pensated and reg	istration status							
Indicate whether the perso	on compensated is a	registrant.	No No	$\checkmark$	Yes				
If the person compensated is	an individual, provi	de the name of the l	individual.						
Full legal name of indiv	vidual								
	Fa	amily name	F	irst given name	9	Seco	ndary given nam	ies	
If the person compensated	is not an individual,	provide the followin	g information						
Full legal name	of non-individua	Haywood Secu	rities Inc.						
F	irm NRD number	1 6	3 0			(if app	licable)		
Indicate whether the persor	n compensated facili	tated the distributio	n through a fu	Inding portal	or an int	ernet-bas	ed portal.	🗌 No	✓ Yes
b) Business contact info	rmation								
If a firm NRD number is not	provided in Item 8 (	a), provide the busin	ess contact in	formation of	the perso	on being c	ompensated.		
Street address									
Municipality					Provinc	e/State			
Country				Postal	code/Z	ip code			
Email address			]			number			
	cor invoctmont fu	nd managar							
c) Relationship to issuer Indicate the person's relation			managor (soli	oct all that an	nlv) Pofe	r to the r	paning of "con	noctod" ir	Part
B(2) of the Instructions and t	•						<b>U</b> .	necieu ii	irun
Connect with the issu	uer or investment fu	ind manager		Inside	er of the	issuer (oth	ner than an inv	estment f	und)
Director or officer of	the investment func	l or investment fund	manager	Emplo	oyee of t	he issuer	or investment	und man	ager
✓ None of the above									
d) Compensation details	3								
Provide details of all compen. Canadian dollars. Include cas services incidental to the dist on, internal allocation arrang	h commissions, securibution, such as cle	irities-based compen rical, printing, legal o	nsation, gifts, or accounting	discounts or o services. An i	other con ssuer is r	npensatior not require	n. Do not report ed to ask for de	payment	ts for
Cash commissions p	aid 10,	800.00	Security co	odes	Securit	y code 1	Security code	2 Secu	rity code 3
Value of all securiti			Coounty of			N T			
distributed compensatio									]
Describe	terms of warrants, o	pptions or other righ	100,000	share purch I on January			th an exercis	e price o	of \$0.20
Other compensation	on <sup>5</sup>	Descrit	be						
Total compensation pa	aid								
Check box if the pe	erson will or may re	ceive any deferred	compensatior	n (describe th	e terms	below)			
<sup>4</sup> Provide the aggregate value additional securities of the is rights exercisable to acquire <sup>5</sup> Do not include deferred control of the security <sup>5</sup> Do not include deferred control of the security of the s	ssuer. Indicate the s additional securitie	security codes for al							

a) Name of person com	pensated and registration status
Indicate whether the perso	on compensated is a registrant. 🔽 No 🗌 Yes
If the person compensated is	an individual, provide the name of the individual.
Full legal name of indi	vidual
	Family name First given name Secondary given names
If the person compensated	is not an individual, provide the following information.
Full legal name	e of non-individual Fat Pitch Capital Corp.
F	irm NRD number (if applicable)
Indicate whether the persor	n compensated facilitated the distribution through a funding portal or an internet-based portal.   Ves
b) Business contact info	rmation
If a firm NRD number is not	provided in Item 8 (a), provide the business contact information of the person being compensated.
Street address	1652 King George Blvd
Municipality	Surrey Province/State British Columbia
Country	Canada Postal code/Zip code V4A 4Z8
Email address	jeffstrig@hotmail.com Telephone number 6048021765
c) Relationship to issue	r or investment fund manager
B(2) of the Instructions and t	Instrument fund manager (select all that apply). Refer to the meaning of "connected" in Part the meaning of "control" in section 1.4 of NI 45-106 for the purposes of completing this section.         Instrument fund manager       Insider of the issuer (other than an investment fund)         Investment fund or investment fund manager       Employee of the issuer or investment fund manager
d) Compensation details	3
Provide details of all compen Canadian dollars. Include cas services incidental to the dist	sation paid, or to be paid, to the person identified in Item 8(a) in connection with the distribution. Provide all amounts in th commissions, securities-based compensation, gifts, discounts or other compensation. Do not report payments for ribution, such as clerical, printing, legal or accounting services. An issuer is not required to ask for details about, or report mements with the directors, officers or employees of a non-individual compensated by the issuer.
Cash commissions p	aid 48,900.00 Security codes Security code 1 Security code 2 Security code 3
Value of all securiti distributed compensati	
Describe	terms of warrants, options or other rights 362,222 share purchase warrants with an exercise price of \$0.20 expiring on January 12, 2020.
Other compensation	Describe
Total compensation pa	aid
Check box if the p	erson will or may receive any deferred compensation (describe the terms below)
additional securities of the i	te of all securities distributed as compensation, <u>excluding</u> options, warrants or other rights exercisable to acquire ssuer. Indicate the security codes for all securities distributed as compensation, <u>including</u> options, warrants or other e 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 compensated is a registrant. Vo 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	es
If the person compensated is not an individual, provide the following information.	
Full legal name of non-individual Gravitas Financial Inc.	
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 1700-333 Bay St	
Municipality Toronto Province/State Ontario	
Country Canada Postal code/Zip code M5H 2R2	
Email address vikas@gravitasfinancial.com Telephone number 6472521674	1
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 "conn 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.	ected" in Part
Connect with the issuer or investment fund manager	stment fund)
Director or officer of the investment fund or investment fund manager Employee of the issuer or investment fund	ind 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. Prov Canadian dollars. Include cash commissions, securities-based compensation, gifts, discounts or other compensation. Do not report p services incidental to the distribution, such as clerical, printing, legal or accounting services. An issuer is not required to ask for deta on, internal allocation arrangements with the directors, officers or employees of a non-individual compensated by the issuer.	payments for
Cash commissions paid 24,000.00 Security codes Security code 1 Security code 2	Security code 3
Value of all securities distributed as compensation <sup>4</sup>	
Describe terms of warrants, options or other rights	
Other compensation <sup>5</sup> Describe	
Total compensation paid	
Check box if the person will or may receive any deferred compensation (describe the terms below)	
<sup>4</sup> Provide the aggregate value of all securities distributed as compensation, <u>excluding</u> options, warrants or other rights exercisal	ble to acquire
additional securities of the issuer. Indicate the security codes for all securities distributed as compensation, including options, we rights exercisable to acquire additional securities of the issuer.	

<sup>5</sup>Do not include deferred compensation.

Ітем 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 reporting issuer in any jurisdiction of Canada <sup>6</sup>								
	Provide name of reporting issuer								
	Wholly owned subsidiary of a foreign public issuer <sup>6</sup>								
	Provide name of for	eign public issuer							
	Issuer distributing eligible foreig	on securities only to	permitted clien	ts <sup>7</sup>					
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 <sup>7</sup> Check	<sup>6</sup> 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. <sup>7</sup> 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.							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	Abbott	Kelly	
	Family name	First given name	Secondary given names
Title	President & CEO		
Name of issuer/underwriter/ investment fund manager	ParcelPal Technology, Inc.		
Telephone number	7788232460	Email address kelly@p	arcelpal.com
Signature	"Kelly Abbott"	Date 2018	01 18
		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 indiv Full legal name	ridual certifying the repor	t Charles	C.	Title Attorney
	Family name	First given name	Secondary given names	
Name of company	O'Neill Law Corporation			
Telephone number	6046875792		Email address cch@stor	ckslaw.com

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:

- has been notified by the issuer/underwriter of the delivery to the securities regulatory authority or regulator of the information a) 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
- has authorized the indirect collection of the information by the securities regulatory authority or regulator. b)