Form 45-106F1 Report of Exempt Distribution

ITEM 1 - REPORT TYPE												
✓ New report												
☐ Amended report If amended, provide filing date	Amended report If amended, provide filing date of report that is being amended (YYYY-MM-DD)											
TEM 2 - PARTY CERTIFYING THE REPORT												
Indicate the party certifying the report (select only one). For guidance regarding whether an issuer is an investment fund, refer to section 1.1 of National Instrument 81-106 Investment Fund Continuous Disclosure and the companion policy to NI 81-106.												
☐ Investment fund issuer												
✓ Issuer (other than an investment fund)												
Underwriter												
ITEM 3 - ISSUER NAME AND OTHER IDENTIFIERS												
Provide the following information about the issuer, or if the issuer is an in	ovestment fund, about the fund.											
Full legal name Empower Clinics Inc.												
Previous full legal name Adira Energy Ltd.												
If the issuer's name changed in the last 12 months, provide most	recent previous legal name.											
Website www.empowerclinics.c	com (if applicab	le)										
If the issuer has a legal entity identifier. provide below. Refer to Part B of	the Instructions for the definition	of "legal entity identifier".										
Legal entity identifier												
If two or more issuers distributed a single security, provide the full legal n	ame(s) of the co-issuer(s) other th	an the issuer named above.										
Full legal name(s) of co-issuer(s)	(if applicabl	e)										
ITEM 4 - UNDERWRITER INFORMATION												
If an underwriter is completing the report, provide the underwriter's full l	eaal name and firm NRD number											
Full legal name	<u>, </u>											
Firm NRD number	(if applicable)											
If the underwriter does not have a firm NRD number, provide the head of	fice contact information of the un	derwriter.										
Street address												
Municipality	Province/State											
Country	Postal code/Zip code											
Telephone number	Website	(if applicable)										

ITEM 5 - ISSUER INFORMATION
If the issuer is an investment fund, do not complete Item 5. Proceed to Item 6.
a) Primary industry
Provide the issuer's North American Industry Classification Standard (NAICS) code (6 digits only) that in your reasonable judgment most closely corresponds to the issuer's primary business activity.
NAICS industry code 5 4 1 7 1 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:
c) SEDAR profile number
Does the issuer have a SEDAR profile?
No ✓ Yes If yes, provide SEDAR profile number 0 0 0 2 3 3 1 7
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
\$100M to under \$500M	☐ \$500M 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 ma	anager information
Full legal name	
Firm NRD number	(if applicable)
If the investment fund mand	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 tha	nt most accurately identifies the issuer (select only one) .
Money market	☐ Equity ☐ Fixed income ☐ Balanced
Alternative strate	gies 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 Fund¹	
	tive Investment of Transferable Securities funds (UCITs Funds) are investment funds regulated by the European Union of 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 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
If yes, select the jurisdictions	s of Canada in which the investment fund is a reporting issuer.
AII	AB BC MB NB NL NT
☐ NS ☐	NU ON PE QC SK T
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 oot a trading facility such as, for example, an automated trading system.
Exchange on	
-	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 \$500	DM S500M to under \$1B S1B or over Date of NAV calculation:
	YYYY MM DD

ITEM 7 - INFORMATION ABOUT THE DISTRIBUTION

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

00	auto i of the report.										
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 (describe)											
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.											
	Start date	2019	04	02	End date	2019	04	02			
		YYYY	MM	DD		YYYY	MM	DD	•		

c) Detailed purchaser information

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

d) Types of securities distributed

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

							Canadian \$		
			CUSIP number (if applicable)	Description of security	Number of securities	Single or lowest price	Highest price	Total amount	
	U	В	S	001696	Each unit consists of one common share and one common share purchase warrant.	21,115,000.00	0.1000	0.1000	2,111,500.00
	С	٧	D	001696	Convertible Debenture, bearing interest at a rate of 6% per annum and convertible into units at a price of \$0.11 per unit.	799,500.00	0.0000		799,500.00

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 security code		Underlying security code					Expiry date (YYYY- MM-DD)	Conversion ratio	Describe other items (if applicable)	
						Lowest	Highest			
W	N	Т	O	М	S	0.1600	0.1600	2021-04-02	1:1	Each warrant is exercisable into one common share at an exercise price of \$0.16.
С	V	D	U	В	S	0.1100	0.1100	2020-04-02	1:1	Each unit consists of one common share and one common share purchase warrant. Each warrant is exercisable into one additional common share for a period of two years at a price of \$0.16 per common share.

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 ²⁸ purchasers	Total amount (Canadian \$)						
British Columbia	NI 45-106 2.3 [Accredited investor]	12	1,646,000.00						
Ontario	NI 45-106 2.3 [Accredited investor]	8	541,500.00						
Alberta	NI 45-106 2.3 [Accredited investor]	1	100,000.00						
Québec	NI 45-106 2.3 [Accredited investor]	6	168,500.00						
Panama	NI 45-106 2.3 [Accredited investor]	1	55,000.00						
Cayman Islands	NI 45-106 2.3 [Accredited investor]	1	50,000.00						
Thailand	NI 45-106 2.3 [Accredited investor]	1	50,000.00						
Bermuda	Other	2	100,000.00						
Germany	NI 45-106 2.3 [Accredited investor]	2	200,000.00						
	Total dollar amount of securities distributed								
	Total number of unique purchasers ^{2b}								

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

g) Net proceeds to the investment fund by jurisdiction

If the issuer is an investment fund, provide the net proceeds to the investment fund for each jurisdiction of Canada and foreign jurisdiction where a purchaser resides. 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)

^{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.

Ітем 8 - С с	OMPENSATIO	N INFORMATION	
•		rson (as defined in NI 45-106) to whom the issuer directly provides, litional copies of this page if more than one person was, or wi	
Indicate whe	ther any compens	sation was paid, or will be paid, in connection with the distribution.	
		If yes, indicate number of persons compensated.	

a) Name of person compe	nsated and regis	stration	status											
Indicate whether the person comp	pensated is a regist	rant.		☐ No)	\checkmark	Yes	3						
If the person compensated is an i	ndividual, provide	the nam	e of the indi	vidual.										
Full legal name of individual														
		Family n	ame		Firs	t given ı	name			Se	condary	given n	ames	
If the person compensated is not	an individual, prov	ide the j	following inf	ormation.										
Full legal name o	f non-individual	Canad	ccord Gen	uity Corp.										
Firr	n NRD number	9	0 ()					(if appl	icable)				
Indicate whether the person comp	pensated facilitated	d the dis	tribution thr	ough a fund	ding port	tal or a	n inte	rnet-l	based p	oortal.	✓	No		Yes
b) Business contact inform	ation													
If a firm NRD number is not provi	ded in Item 8 (a), ¡	orovide	the business	contact inf	ormation	of the	perso	n bei	ng con	npensatea	!.			
Street address														
Municipality						F	Provir	nce/S	State					
Country					F	Postal	code	/Zip d	code					
Email address						Tele	phone	e nur	mber					
c) Relationship to issuer or	r investment fun	d mana	ager											
Indicate the person's relationship the Instructions and the meaning				-						ining of "	connect	ed" in I	Part i	B(2) of
Connect with the issuer	or investment fun	ıd mana	ger			Insider	of the	e issu	ier (oth	er than a	ın inves	tment t	fund))
Director or officer of the	investment fund	or inves	tment fund i	manager		Emplo	yee of	f the i	ssuer	or investr	nent fur	nd man	ager	•
✓ None of the above														
d) Compensation details														
Provide details of all compensation Canadian dollars. Include cash con incidental to the distribution, such allocation arrangements with the	mmissions, securiti as clerical, printin directors, officers o	es-baseo g, legal or emplo	d compensation	tion, gifts, d ng services	iscounts An issuei	or othe r is not	er com requii	penso red to	ation. L ask fo	Do not rep	ort pay	ments	for s	ervices
Cash commissions paid	35,0	00.00					Secu	rity co	de 1	Security	code 2	Secu	rity co	ode 3
Value of all securities distributed as compensation ⁴	1			Security of	codes		W	N	Т					
Describe ter	ms of warrants, op	otions o	r other rights		Finder date of				n exe	rcise pri	ce of \$	0.16 v	vith a	an
Other compensation ⁵			Describe	•										
Total compensation paid	35,00	00.00												
Check box if the pers										ahts exer	cisable	to acai	uire	
additional securities of the issue rights exercisable to acquire add ⁵ Do not include deferred compen	r. Indicate the seculitional securities o	urity cod	des for all se											er

a) Name of person comp	pensated and registration status								
Indicate whether the person co	mpensated is a registrant.	✓ No Yes							
If the person compensated is an individual, provide the name of the individual.									
Full legal name of indiv	vidual								
	Family name	First given name	Secondary given names						
If the person compensated is no	If the person compensated is not an individual, provide the following information.								
Full legal name of non-individual Boom Capital Markets Inc.									
Firm NRD number (if applicable)									
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal. V No Yes									
b) Business contact info	rmation								
If a firm NRD number is not pr	ovided in Item 8 (a), provide the business	contact information of the person being cor	mpensated.						
Street address	8 The Esplanade, Suite 2705								
Municipality	Toronto	Province/State	Ontario						
Country	Canada	Postal code/Zip code	M5E 0A6						
Email address		Telephone number							
c) Relationship to issuer	or investment fund manager								
		nager (select all that apply). Refer to the me for the purposes of completing this section							
	uer or investment fund manager	<u> </u>	her than an investment fund)						
<u> </u>	•	_	,						
Director or officer of t	the investment fund or investment fund r	nanager Employee of the issuer	or investment fund manager						
✓ None of the above									
d) Compensation details	3								
Canadian dollars. Include cash incidental to the distribution, su	commissions, securities-based compensat	tified in Item 8(a) in connection with the di ion, gifts, discounts or other compensation. g services. An issuer is not required to ask for n-individual compensated by the issuer.	Do not report payments for services						
Cash commissions pa	aid 29,855.00	Security code 1	Security code 2 Security code 3						
Value of all securition distributed as compensation		Security codes W N T							
•	terms of warrants, options or other rights	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	ercise price of \$0.16 with an						
Other compensation	on ⁵ Describe	expiry date of April 2, 2021.							
Total compensation pa									
Check box if the person will or may receive any deferred compensation (describe the terms below)									
40 14. 11	of all and office Part 1	the second of the second of	the same to the same						
additional securities of the issu	uer. Indicate the security codes for all se additional securities of the issuer.	tion, <u>excluding</u> options, warrants or other n curities distributed as compensation, <u>inclu</u>	ights exercisable to acquire <u>ding</u> options, warrants or other						

a) Name of person com	pensated and registration status								
Indicate whether the person co	ompensated 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 give	n name	Secondary given names					
If the person compensated is n	If the person compensated is not an individual, provide the following information.								
Full legal name of non-individual EDM Financial Inc.									
Firm NRD number (if applicable)									
Indicate whether the person 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 pr	rovided in Item 8 (a), provide the busines	s contact information of th	he person being com	pensated.					
Street address	398 De Maisonneuve Ouest								
Municipality	Montreal		Province/State	Québec					
Country	Canada	Posta	al code/Zip code	H3A 1L2					
Email address		Tel	ephone number						
c) Relationship to issue	r 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.									
	uer or investment fund manager		. •	er than an investment fund)					
<u> </u>	the investment fund or investment fund	_	,	or investment fund manager					
None of the above			loyoo or the looder t	or invocations raine manager					
<u> </u>									
d) Compensation details									
Canadian dollars. Include cash	tion paid, or to be paid, to the person ide commissions, securities-based compense	ition, gifts, discounts or oti	her compensation. L	Oo not report payments for services					
	uch as clerical, printing, legal or account he directors, officers or employees of a n			r details about, or report on, internal					
Cash commissions p	. ,	on that via dat compensates							
Value of all securit			Security code 1 W N T	Security code 2 Security code 3					
distributed as compensati		Security codes	VV 14 1						
Describe	terms of warrants, options or other righ	8,000 Finder's War		sise price of \$0.16 with an					
Other compensation	on ⁵ Describ		·						
Total compensation p	aid 8,000.00								
Check box if the p	erson will or may receive any deferred of	compensation (describe the	he terms below)						
⁴ Provide the agaregate value	of all securities distributed as compens	ation, excludina options	warrants or other ric	hts exercisable to acquire					
additional securities of the iss	suer. Indicate the security codes for all sanditional securities of the issuer.								
⁵ Do not include deferred com									

a) Name of person comp	ensated and regis	tration status	3											
Indicate whether the person co	mpensated is a regist	rant.		✓ No] Yes	3						
If the person compensated is an individual, provide the name of the individual.														
Full legal name of indiv	vidual Kletas			Spiro										
		Family name			First	t given	name		I	Sec	condary	given na	ames	
If the person compensated is not an individual, provide the following information.														
Full legal name	of non-individual													
F	Firm NRD number (if applicable)													
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal. V No Yes														
b) Business contact infor	mation													
If a firm NRD number is not pro	ovided in Item 8 (a), p	provide the bus	iness co	ontact info	rmation	of the	perso	n bei	ng com	pensated.	•			
Street address	1706-2345 Madiso	on Ave												
Municipality	Burnaby					ı	Provi	nce/S	State	British	Colum	nbia		
Country	Canada				Р	ostal	code	/Zip d	code	V5C 0	B4			
Email address						Tele	phon	e nur	mber					
c) Relationship to issuer	or investment fund	d manager												
Indicate the person's relationsh the Instructions and the meani	•			-						ning of "c	connect	ed" in I	Part I	3(2) of
Connect with the issu	-		,	-		•	_			er than a	n inves	tment f	und)	
☐ Director or officer of t		-	und ma	anager					,	or investn			ĺ	
✓ None of the above				ŭ			•						Ü	
d) Compensation details														
Provide details of all compensate Canadian dollars. Include cash of incidental to the distribution, su allocation arrangements with the	commissions, securitions chas clerical, printing	es-based comp g, legal or acco	ensatio unting	n, gifts, di. services. A	scounts An issuer	or othe is not	er com requi	npenso red to	ation. D ask for	o not rep	ort pay	ments	for se	ervices
Cash commissions pa	aid 2,4	50.00					Secu	rity co	de 1	Security of	code 2	Secu	rity co	ode 3
Value of all securitie distributed as compensation			,	Security co	odes		W	N	Т					
Describe t	erms of warrants, op	otions or other	rights	2,100 F expiry o					exerc	ise price	of \$0	.16 wi	th ar	ו
Other compensatio	n ⁵	Des	scribe	Схриу		7 (PIII 2	2, 202							
Total compensation pa	2,45	50.00												
Check box if the pe	erson will or may rece	eive any deferi	red con	npensatio	n (descr	ibe the	e term	s belo	ow)					
⁴ Provide the aggregate value of additional securities of the issurights exercisable to acquire a ⁵ Do not include deferred comp	uer. Indicate the secu dditional securities o	ırity codes for												er

a) Name of person com	pensated 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 Shaygan Mohammad								
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. V No Yes								
b) Business contact info	ormation							
If a firm NRD number is not pr	rovided in Item 8 (a), provide the business	contact information of the	person being co	mpensated.				
Street address	Suite 2A Camino Real							
Municipality	Calle Winston Churchill	F	Province/State	Panama				
Country	Panama	Postal	code/Zip code					
Email address		Telep	ohone number					
c) Relationship to issue	r or investment fund manager							
	hip with the issuer or investment fund ma ing of "control" in section 1.4 of NI 45-10				ed" in Part B(2) of			
Connect with the iss	uer or investment fund manager	Insider	of the issuer (ot	ther than an inves	tment fund)			
Director or officer of	the investment fund or investment fund	manager	yee of the issuer	or investment fur	nd manager			
✓ None of the above								
d) Compensation details								
Provide details of all compensa Canadian dollars. Include cash incidental to the distribution, so	ntion paid, or to be paid, to the person ide commissions, securities-based compensa uch as clerical, printing, legal or accounti the directors, officers or employees of a no	tion, gifts, discounts or othe ng services. An issuer is not	r compensation. required to ask f	Do not report pay	ments for services			
Cash commissions p	5,005.00		Security code 1	Security code 2	Security code 3			
Value of all securiti distributed as compensation		Security codes	W N T					
·	terms of warrants, options or other right	4,290 Finder's Warra		rcise price of \$0	.16 with an			
Other compensation	on ⁵ Describ							
Total compensation p	5,005.00							
Check box if the p	erson will or may receive any deferred c	ompensation (describe the	terms below)					
additional securities of the iss	of all securities distributed as compensa suer. Indicate the security codes for all se additional securities of the issuer. pensation.	ation, <u>excluding</u> options, wa ecurities distributed as com	arrants or other r pensation, <u>inclu</u>	ights exercisable <u>ding</u> options, wari	to acquire rants or other			

тем 9 - Directors, Execu	TIVE OFFICERS	AND PROMOT	ERS OF THE ISS	SUER					
If the issuer is an investment fund	d, do not complete l	Item 9. Procced to	Item 10.						
Indicate whether the issuer is any o	f the following (select	t the one that appli	es - if more than one	applies, select onl	y one).				
✓ Reporting issuer in any juris	sdiction of Canada								
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 issu	uer ⁶						_	
Provide name of	foreign public issue	r						7	
Issuer distributing only eligil	ble foreign securities	and the distribution	n is to permitted clie	ents only ⁷				_	
If the issuer is at least one of the	above, do not comp	olete Item 9(a) – (d	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 b	ox and complete	Item 9(a) - (c).						
a) Directors, executive officer	e and promoters of	of the issuer							
Provide the following information for	•		moter of the issuer F	or locations within	Canada s	tate the	nrovince	or	
territory; otherwise state the country.							province		
Organization or company name	Organization or company name Family name First given name Secondary given names Secondary given names Business location of non-individual or residentail jurisdiction of individual Relationship to issuer (select all that apply)								
				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 company name	Organization or company name Family name First given name Secondary given names Residential jurisdiction of individual Relationship to promoter (select one or both if applicable)								
				Province or country	D		C)	
c) Residential address of eac	h individual								
Complete Schedule 2 of this form completed report. Schedule 2 also					(a) and (b)	and at	tach to t	he	

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	Empower Clinics Inc.							
Full legal name	McAuley	J.						
	Family name	First given name	Secondary given names					
Title	Chief Executive Officer							
Telephone number	6047892146	Email address	s.mcauley@empowerclinics.com					
Signature	"Steven McAuley"	2019 04 12						
			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	Blundy	Katie		Title	Lawyer				
	Family name	First given name	Secondary given names	_					
Name of company	Bennett Jones LLP								
Telephone number	6048915369	Em	ail address blundyk@b	ennettjon	es.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:

- 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.