## Form 45-106F1 Report of Exempt Distribution

#### **ITEM 1 - REPORT TYPE**

✓ New report

Amended report

If amended, provide filing date of report that is being amended.

(YYYY-MM-DD)

#### ITEM 2 - PARTY CERTIFYING THE REPORT

Indicate the party certifying the report (select only one). For guidance regarding whether an issuer is an investment fund, refer to section 1.1 of National Instrument 81-106 Investment Fund Continuous Disclosure and the companion policy to NI 81-106 (in Québec, Regulation 81-106 respecting Investment Fund Continuous Disclosure and Policy Statement to Regulation 81-106 respecting Investment Fund Continuous Disclosure and Policy Statement to Regulation 81-106 respecting Investment Fund Continuous Disclosure and Policy Statement to Regulation 81-106 respecting Investment Fund Continuous Disclosure and Policy Statement to Regulation 81-106 respecting Investment Fund Continuous Disclosure and Policy Statement to Regulation 81-106 respecting Investment Fund Continuous Disclosure and Policy Statement to Regulation 81-106 respecting Investment Fund Continuous Disclosure and Policy Statement to Regulation 81-106 respecting Investment Fund Continuous Disclosure and Policy Statement to Regulation 81-106 respecting Investment Fund Continuous Disclosure and Policy Statement Fund Continuous Disclosure).

Investment fund issuer

✓ Issuer (other than an investment fund)

Underwriter

#### **ITEM 3 - ISSUER NAME AND OTHER IDENTIFIERS**

Provide the following information about the issuer, or if the issuer is an investment fund, about the fund.

Full legal name	Hemlo Explorers Inc. / Hemlo Explorers Inc.				
Previous full legal name	HEMLO EXPLORERS INC. (FORMERLY, CANADIAN OREBODIES INC.)				
If the issuer's name changed in the last 12 months, provide most recent previous legal name.					
Website	www.hemloexplorers.ca (if applicable)				
If the issuer has a legal entity identifier, p	rovide below. Refer to Part B of the Instructions for the definition of "legal entity identifier".				
Legal entity identifier					
If two or more issuers distributed a single above.	e security, provide the full legal name(s) of the co-issuer(s) other than the issuer named				
Full legal name(s) of co-issuer(s)	(if applicable)				

# ITEM 4 - UNDERWRITER INFORMATION

If an underwriter is completing the report, provide the underwriter's full legal name, firm NRD number, and SEDAR+ profile number.

Full legal name		
Firm NRD number	(if applicable)	
SEDAR+ profile number		

## **ITEM 5 - ISSUER INFORMATION**

TEW 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 213119
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.
🗌 Mortgages 🔄 Real estate 🔄 Commercial/business debt 📄 Consumer debt 📄 Private companies
Cryptoassets
b) Number of employees
Number of employees: 🗹 0 - 49 🗌 50 - 99 🗌 100 - 499 🗌 500 or more
c) SEDAR+ profile number
Provide the issuer's SEDAR+ profile number
000026670

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

Indicate whether one or k	ooth of the following apply to the investn	nent fund.			
🗌 Invest primarily in o	ther investment fund issuers				
Is a UCITs Fund <sup>1</sup>					
	e Investment of Transferable Securities funds (UC				n Union (EU) directives
that allow collective investmen	nt schemes to operate throughout the EU on a pa	issport basis on authoriza	tion from one mei	nber state.	
c) Net asset valu	ue (NAV) of the investment fund				
Select the NAV range of th	he investment fund as of the date of the i	most recent NAV calcu	ılation (Canadi	an \$).	
Under \$5M	S5M to under \$25M	🔲 \$25M to unde	er \$100M	Date of NA	V calculation:
\$100M to under \$50	00M 🗌 \$500M to under \$1B	s1B or over		YYYY	MM DD
ITEM 7 - INFORMA	ATION ABOUT THE DISTRIBU	JTION			
lf an issuer located outsic	de of Canada completes a distribution in	a iurisdiction of Can	ada. include in	Item 7 and S	chedule 1
information about purch	asers resident in that jurisdiction of Can	ada only. Do not inclu	ıde in Item 7 se	curities issue	d as payment of
	fees, in connection with the distribution, t h the information provided in Schedule		ed in Item 8. Tl	he informatio	on provided in
a) Currency					
Select the currency or cur dollars.	rrencies in which the distribution was mo	ade. All dollar amoun	ts provided in t	he report mu	st be in Canadian
✓ Canadian dollar	🗌 US dollar 📄 Euro Other (	describe)			7
b) Distribution (	datas				
b) Distribution o	lates				
State the distribution start and end dates. If the report is being filed for securities distributed on only one distribution date, provide					
	ooth the start and end dates. If the report I dates for the distribution period covered	<b>.</b>	ırities distribue	d on a contii	nuous basis,
					7
Start date	2024 10 31	End date	2024	10 31	
	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 secu	urities distributed				
Drovido the following info	primation for all distributions researched	a par cacutit : basi-	Defer to Davit A	(12) of the li-	structions for how
	ormation for all distributions reported or ode. If providing the CUSIP number, indic				
distributed.	,, C	, 0		0	, ,
				Canadian	\$
Security CUSIP		Number of	Single or	Highest	
code number (if applicable)	Description of security	securities	lowest price	price	Total amount
UBS	Units, each comprised of one co	27,100,000.0000	0.0500	0.0500	1,355,000.0000
				1 2.33300	,,000000

	mmon share and one common sh are purchase warrant ("Warrant").				
FTS	Flow-through shares	12,900,000.0000	0.0500	0.0500	645,000.0000

#### e) Details of rights and convertible/exchangeable securities

If any rights (e.g. warrants, options) were distributed, provide the exercise price and expiry date for each right. If any convertible/exchangeable securities were distributed, provide the conversion ratio and describe any other terms for each convertible/exchangeable security.

Convertible / exchangeable	Underlying security code	Exercise price (Canadian \$)		Expiry date (YYYY-MM- DD)		Describe other terms (if applicable)
security code	security code	Lowest	Highest	(00)		applicable)
WNT	CMS	0.1000	0.1000	2027-10-31	1:1	Each Warrant entitles the h older to acquire one comm on share, on a non-flow tho ugh basis, at \$0.10 until Oct ober 31, 2027, subject to ac celerated expiry terms follo wing the four month and a day hold period.

#### f) Summary of the distribution by jurisdiction and exemption

State the total dollar amount of securities distributed and the number of purchasers for each jurisdiction of Canada and foreign jurisdiction where a purchaser resides and for each exemption relied on in Canada for that distribution. However, if an issuer located outside of Canada completes a distribution in a jurisdiction of Canada, include distributions to purchasers resident in that jurisdiction of Canada only.

This table requires a separate line item for: (i) each jurisdiction where a purchaser resides, (ii) each exemption relied on in the jurisdiction where a purchaser resides, if a purchaser resides in a jurisdiction of Canada, and (iii) each exemption relied on in Canada, if a purchaser resides in a foreign jurisdiction.

*For jurisdictions within Canada, state the province or territory, otherwise state the country.* 

Province or country	Exemption relied on	Number of unique purchasers <sup>2a</sup>	Total amount (Canadian \$)			
Alberta	NI 45-106 2.3 [Accredited investor]	1	20,000.0000			
British Columbia	NI 45-106 2.3 [Accredited investor]	2	200,000.0000			
Ontario	NI 45-106 2.3 [Accredited investor]	29	1,370,500.0000			
Ontario	NI 45-106 2.5 [Family, friends and business associates]		124,500.0000			
Québec	NI 45-106 2.3 [Accredited investor]	3	60,000.0000			
Austria	other - Exemption in OSC Rule 72-503	1	75,000.0000			
Germany	other - Exemption in OSC Rule 72-503	1	75,000.0000			
United Kingdom	other - Exemption in OSC Rule 72-503	1	50,000.0000			
Virgin Islands British	other - Exemption in OSC Rule 72-503	1	25,000.0000			
	\$2,000,000.0000					
	Total number of unique purchasers2b46					
<sup>2a</sup> In calculating the number of unique purchasers per row, count each purchaser only once. Joint purchasers may be counted as one purchaser.						

<sup>2b</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.

Provide information for each person (as defined in NI 45-106) (in Québec, Regulation 45-106 respecting Prospectus Exemptions) to whom the issuer directly provides, or will provide, any compensation in connection with the distribution. <b>Complete additional</b> <b>copies of this page if more than one person was, or will be, compensated.</b>							
	Indicate whether any compensation was paid, or will be paid, in connection with the distribution.						
a) Name of person comp	ensated and regi	istration	status				
Indicate whether the person compen	nsated is a registrant.						
🗌 No 🗹 Yes							
If the person compensated is an indi	ividual, provide the n	ame of the	e individual.				
Full legal name of individual							
If the person compensated is not an	Family name individual, provide ti	he followin	First given nam ng information.	e	Secondary giv	ven names	
Full legal name of non-individ	lual Canaccord Ge	nuity Corp	o./Corporation Canac	cord Gen	uity	]	
Firm NRD num	ber 900		(if app	licable)			
Indicate whether the person compen	nsated facilitated the	distributio	n through a funding p	oortal or a	n internet-based	portal	
✓ No □ Yes	-						
b) Business contact infor	mation						
If a firm NRD number is not provided	d in Item 8(a), provid	e the busir	ness contact information	on of the p	person being com	pensated.	
Street address							
Municipality			Province/State				
Country		Р	ostal code/Zip code				
Email address			Telephone number				
c) Relationship to issuer or investment fund manager							
Indicate the person's relationship with the issuer or investment fund manager (select all that apply). Refer to the meaning of 'connected' in Part B(2) of the Instructions and the meaning of 'control' in section 1.4 of NI 45-106 (in Québec, Regulation 45-106 respecting Prospectus Exemptions) for the purposes of completing this section.							
Connected with the issuer or investment fund manager							
Insider of the issuer (other than an investment fund)							
<ul> <li>Director or officer of the investment fund or investment fund manager</li> <li>Employee of the issuer or investment fund manager</li> </ul>							
$\checkmark$ None of the above	.sunent iunu mand	501					
d) Compensation details							

Cash commissions paid	\$1,200.0000		
Value of all securities distributed as compensation <sup>4</sup>	\$0.0000		
Security codes	Security code 1	Security code 2	Security code 3
	CMS	WNT	
	24 000 Findaria W	arrants, each exer	
		non share of the l	
		\$0.05 per share ur	
Describe terms of warrants, options or other rights	2027.		
Other compensation <sup>5</sup>			
Describe			
Total compensation paid	\$1,200.0000		7
	L	n (docaribo tha ta	
Check box if the person will or may receive any def	erred compensatio	on (describe the te	THIS DEIOW)
<sup>4</sup> Provide the aggregate value of all securities distributed as compensa securities of the issuer. Indicate the security codes for all securities dis acquire additional securities of the issuer.	•	•	
<sup>5</sup> Do not include deferred compensation.			
· ·			

Provide information for each person (as defined in NI 45-106) (in Québec, Regulation 45-106 respecting Prospectus Exemptions) to whom the issuer directly provides, or will provide, any compensation in connection with the distribution. <b>Complete additional</b> <b>copies of this page if more than one person was, or will be, compensated.</b>						
	or will be paid, in connection with the distribution. ate number of persons compensated. 8					
a) Name of person compensated	and registration status					
Indicate whether the person compensated is a	registrant.					
🗌 No 🗹 Yes						
If the person compensated is an individual, pro	ovide the name of the individual.					
Full legal name of individual						
If the person compensated is not an individual,	Family name First given name Secondary given names , <i>provide the following information.</i>					
Full legal name of non-individual CAST	TLEWOOD CAPITAL CORPORATION					
Firm NRD number 7573	30 (if applicable)					
Indicate whether the person compensated facil	litated 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 &	(a), provide the business contact information of the person being compensated.					
Street address						
Municipality	Province/State					
Country	Postal code/Zip code					
Email address	Telephone number					
c) Relationship to issuer or investment fund manager						
Indicate the person's relationship with the issuer or investment fund manager (select all that apply). Refer to the meaning of 'connected' in Part B(2) of the Instructions and the meaning of 'control' in section 1.4 of NI 45-106 (in Québec, Regulation 45-106 respecting Prospectus Exemptions) for the purposes of completing this section.						
Connected with the issuer or investment fund manager						
Insider of the issuer (other than an investment fund)						
Director or officer of the investment fund or investment fund manager						
<ul> <li>Employee of the issuer or investment fu</li> <li>None of the above</li> </ul>	nd manager					
d) Compensation details						

Cash commissions paid	\$12,000.0000		
Value of all securities distributed as compensation <sup>4</sup>	\$0.0000		
Security codes	Security code 1	Security code 2	Security code 3
	CMS	WNT	
Describe terms of warrants, options or other rights	acquire one comr	Warrants, each exe mon share of the l \$0.05 per share ur	ssuer at an
Other compensation <sup>5</sup>			
Describe			
<b>Total compensation paid</b> Check box if the person will or may receive any definition	\$12,000.0000 ferred compensation	on (describe the te	 rms below)
<sup>4</sup> Provide the aggregate value of all securities distributed as compensa securities of the issuer. Indicate the security codes for all securities dis acquire additional securities of the issuer. <sup>5</sup> Do not include deferred compensation.		-	

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

Cash commissions paid	\$10,500.0000		
Value of all securities distributed as compensation $^{4}$	\$0.0000		
Security codes	Security code 1	Security code 2	Security code 3
Security codes	CMS	WNT	
Describe terms of warrants, options or other rights	acquire one com	Warrants, each exe non share of the l \$0.05 per share ur	ssuer at an
Other compensation <sup>5</sup>			
Describe			
<b>Total compensation paid</b> Check box if the person will or may receive any details	\$10,500.0000 ferred compensatio	on (describe the te	] rms below)
<sup>4</sup> Provide the aggregate value of all securities distributed as compense securities of the issuer. Indicate the security codes for all securities dis acquire additional securities of the issuer. <sup>5</sup> Do not include deferred compensation.		-	

Provide information for each person (as defined in NI 45-106) (in Québec, Regulation 45-106 respecting Prospectus Exemptions) to whom the issuer directly provides, or will provide, any compensation in connection with the distribution. <b>Complete additional copies of this page if more than one person was, or will be, compensated.</b>				
Indicate whether any compo □ No ☑ Yes	ensation was paid, or will be If yes, indicate numb	<i>paid, in connection with</i> per of persons compens		
a) Name of persor	n compensated and reg	istration status		
🗌 No 🗹 Yes	n compensated is a registrant is an individual, provide the i			
Full legal name of indi				
_	Family name is not an individual, provide a		t given name Secondary given names	
Full legal name of no	n-individual VENTUM FINA	ANCIAL CORP.		
Firm N	IRD number 5290		(if applicable)	
Indicate whether the person	n compensated facilitated the	ر distribution through a fu	funding portal or an internet-based portal	
✓ No □ Yes				
b) Business conta	ct information			
lf a firm NRD number is not	provided in Item 8(a), provid	le the business contact in	information of the person being compensated.	
Street address				
Municipality		Province	ce/State	
Country		Postal code/Zi	Zip code	
Email address		Telephone ni		
c) Relationship to	issuer or investment fu	ind manager		
Indicate the person's relationship with the issuer or investment fund manager (select all that apply). Refer to the meaning of 'connected' in Part B(2) of the Instructions and the meaning of 'control' in section 1.4 of NI 45-106 (in Québec, Regulation 45-106 respecting Prospectus Exemptions) for the purposes of completing this section.				
Connected with the issuer or investment fund manager				
<ul> <li>Insider of the issuer (other than an investment fund)</li> <li>Director or officer of the investment fund or investment fund manager</li> </ul>				
		-		
<ul> <li>Employee of the issuer or investment fund manager</li> <li>None of the above</li> </ul>				
d) Compensation details				
u) compensation	actails			

Cash commissions paid	\$3,000.0000		]
Value of all securities distributed as compensation <sup>4</sup>	\$0.0000		
Security codes	Security code 1	Security code 2	Security code 3
	CMS	WNT	
	60,000 Finder's W	arrants, each exer	cisable to
		non share of the l	
Describe terms of warrants, options or other rights	exercise price of \$0.05 per share until October 31, 2027.		
Other compensation <sup>5</sup>	[		7
Other compensation -			
Describe			
			_
Total compensation paid	\$3,000.0000		
Check box if the person will or may receive any def	erred compensatio	on (describe the te	rms below)
<sup>4</sup> Provide the aggregate value of all securities distributed as compensa securities of the issuer. Indicate the security codes for all securities dis acquire additional securities of the issuer.	• •	•	
<sup>5</sup> Do not include deferred compensation.			

Provide information for each person (as defined in NI 45-106) (in Québec, Regulation 45-106 respecting Prospectus Exemptions) to whom the issuer directly provides, or will provide, any compensation in connection with the distribution. <b>Complete additional copies of this page if more than one person was, or will be, compensated.</b>					
Indicate whether any compensation was paid, or will be paid, in connection with the distribution.					
a) Name of person	compensated and reg	istration status			
Indicate whether the person c	compensated is a registrant	t.			
🗌 No 🗹 Yes					
<i>If the person compensated is</i>	an individual, provide the i	name of the individual.			
Full legal name of indivi	idual				
If the person compensated is	Family name not an individual, provide a	· · · · · · · · · · · · · · · · · · ·		given names	
Full legal name of non-	individual PRIMARY CAP	PITAL INC./GROUPE FINA	ANCIER PRIMARY CAPITAL		
Firm NR	D number 23980		(if applicable)		
Indicate whether the person c	compensated facilitated the	e distribution through a fu	unding portal or an internet-basec	l portal	
✔ No 🗌 Yes					
b) Business contact	information				
If a firm NRD number is not n	rovided in Item 8(a) provid	le the husiness contact in	formation of the person being cor	mpensated	
Street address					
Municipality		Province	e/State		
Country		Postal code/Zi	p code		
Email address		Telephone n	umber		
c) Relationship to issuer or investment fund manager					
Indicate the person's relationship with the issuer or investment fund manager (select all that apply). Refer to the meaning of 'connected' in Part B(2) of the Instructions and the meaning of 'control' in section 1.4 of NI 45-106 (in Québec, Regulation 45-106 respecting Prospectus Exemptions) for the purposes of completing this section.					
Connected with the issuer or investment fund manager					
Insider of the issuer (other than an investment fund)					
	Director or officer of the investment fund or investment fund manager				
<ul> <li>Employee of the issuer or investment fund manager</li> <li>None of the above</li> </ul>					
d) Compensation d	etails				

Cash commissions paid	\$27,450.0000		
Value of all securities distributed as compensation <sup>4</sup>	\$0.0000	\$0.0000	
Security codes	Security code 1	Security code 2	Security code 3
	CMS	WNT	
Describe terms of warrants, options or other rights	acquire one comr	Warrants, each exe non share of the l \$0.05 per share ur	ssuer at an
Other compensation <sup>5</sup>			
Describe			
<b>Total compensation paid</b> Check box if the person will or may receive any definition	\$27,450.0000 Ferred compensation	on (describe the te	] rms below)
<sup>4</sup> Provide the aggregate value of all securities distributed as compensa securities of the issuer. Indicate the security codes for all securities dis acquire additional securities of the issuer.		-	
<sup>5</sup> Do not include deferred compensation.			

Provide information for each person (as defined in NI 45-106) (in Québec, Regulation 45-106 respecting Prospectus Exemptions) to whom the issuer directly provides, or will provide, any compensation in connection with the distribution. <b>Complete additional copies of this page if more than one person was, or will be, compensated.</b>					
Indicate whether any compensation was paid, or will be paid, in connection with the distribution.					
a) Name of person compensated and registration status					
Indicate whether the person compensated is a registrant. □ No   ✓ Yes					
If the person compensated is an individual, provide the name of the individual.					
Full legal name of individual					
Family name       First given name       Secondary given names         If the person compensated is not an individual, provide the following information.					
Full legal name of non-individual SHERBROOKE STREET CAPITAL (SSC) INC. / CAPITAL SHERBROOKE STREET (SSC) INC.					
Firm NRD number 16140 (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					
Municipality Province/State					
Country Postal code/Zip code					
Email address Telephone number					
c) Relationship to issuer or investment fund manager					
Indicate the person's relationship with the issuer or investment fund manager (select all that apply). Refer to the meaning of 'connected' in Part B(2) of the Instructions and the meaning of 'control' in section 1.4 of NI 45-106 (in Québec, Regulation 45-1 respecting Prospectus Exemptions) for the purposes of completing this section.	06				
Connected with the issuer or investment fund manager					
Insider of the issuer (other than an investment fund)					
Director or officer of the investment fund or investment fund manager					
Employee of the issuer or investment fund manager					
✓ None of the above					

#### d) Compensation details

Cash commissions paid	\$3,600.0000				
Value of all securities distributed as compensation <sup>4</sup>	\$0.0000				
Security codes	Security code 1	Security code 2	Security code 3		
Security coues	CMS	WNT			
	-	72,000 Finder's Warrants, each exercisable to acquire one common share of the Issuer at an			
Describe terms of warrants, options or other rights		exercise price of \$0.05 per share until October 31,			
Other compensation <sup>5</sup>			]		
Describe					
	Г		7		
Total compensation paid	\$3,600.0000				
Check box if the person will or may receive any def	erred compensatio	on (describe the te	rms below)		
<sup>4</sup> Provide the aggregate value of all securities distributed as compensate securities of the issuer. Indicate the security codes for all securities dis- acquire additional securities of the issuer.	•	•	•		
<sup>5</sup> Do not include deferred compensation.					

Provide information for each person (as defined in NI 45-106) (in Québec, Regulation 45-106 respecting Prospectus Exemptions) to whom the issuer directly provides, or will provide, any compensation in connection with the distribution. <b>Complete additional copies of this page if more than one person was, or will be, compensated.</b>				
Indicate whether any compensation was paid, or will be paid, in connection with the distribution.				
a) Name of person compensated and registration status				
Indicate whether the person compensated is a registrant.				
□ No ✓ Yes				
If the person compensated is an individual, provide the name of the individual.				
Full legal name of individual				
Family name First given name Secondary gi If the person compensated is not an individual, provide the following information.	iven names			
Full legal name of non-individual STEPHENAVENUE SECURITIES INC.				
Firm NRD number 8080 (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 con	npensated.			
Street address				
Municipality Province/State				
Country Postal code/Zip code				
Email address Telephone number				
c) Relationship to issuer or investment fund manager				
Indicate the person's relationship with the issuer or investment fund manager (select all that apply). Refer to the meaning of 'connected' in Part B(2) of the Instructions and the meaning of 'control' in section 1.4 of NI 45-106 (in Québec, Regulation 45-106 respecting Prospectus Exemptions) for the purposes of completing this section.				
Connected with the issuer or investment fund manager				
Insider of the issuer (other than an investment fund)				
<ul> <li>Director or officer of the investment fund or investment fund manager</li> <li>Employee of the issuer or investment fund manager</li> </ul>				
✓ None of the above				
d) Compensation details				

Cash commissions paid	\$600.0000		
Value of all securities distributed as compensation <sup>4</sup>	\$0.0000		
Security codes	Security code 1	Security code 2	Security code 3
	CMS	WNT	
	12 000 Findaria W	arrante aach avar	
		arrants, each exer non share of the l	
	exercise price of \$0.05 per share until October 31,		
Describe terms of warrants, options or other rights			
Other compensation <sup>5</sup>			
Describe			-
Describe			
			_
Total compensation paid	\$600.0000		
Check box if the person will or may receive any def	ferred compensation	on (describe the te	rms below)
<sup>4</sup> Provide the aggregate value of all securities distributed as compensa securities of the issuer. Indicate the security codes for all securities dis acquire additional securities of the issuer.		-	
<sup>5</sup> Do not include deferred compensation.			

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

Cash commissions paid	\$9,000.0000 \$0.0000		
Value of all securities distributed as compensation <sup>4</sup>			
Security codes	Security code 1	Security code 2	Security code 3
Security codes	CMS	WNT	
Describe terms of warrants, options or other rights Other compensation <sup>5</sup> Describe	180,000 Finder's V acquire one comi exercise price of 9 2027.	ssuer at an	
Total compensation paid	\$9,000.0000		]
Check box if the person will or may receive any defendence of all securities distributed as compensate and the aggregate value of all securities distributed as compensate and the securities distributed			
securities of the issuer. Indicate the security codes for all securities dist	•	•	

acquire additional securities of the issuer.

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

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

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

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

Reporting issuer in a jurisdiction 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 foreign public issuer

Issuer distributing only eligible foreign securities and the distribution is to permitted clients only <sup>7</sup>.

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

<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.

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

#### a) Directors, executive officers and promoters of the issuer

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

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

#### b) Promoter information

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

Organization o			Secondary given	Residential jurisdiction of individual		promoter (select if applicable)
company name	e name	name	names	Province or country	D	0

#### c) Residential address of each individual

Complete Schedule 2 of this form providing the full residential address for each individual listed in Item 9(a) and (b) and attach to the completed report. Schedule 2 also requires information to be provided about control persons.

#### **ITEM 10 - CERTIFICATION**

Provide the following certification and business contact information of an officer, director or agent of the issuer or underwriter. If the issuer or underwriter is not a company, an individual who performs functions similar to that of a director or officer may certify the report. For example, if the issuer is a trust, the report may be certified by the issuer's trustee. If the issuer is an investment fund, a director or officer of the investment fund manager (or, if the investment fund manager is not a company, an individual who performs similar functions) may certify the report if the director or officer has been authorized to do so by the investment fund.

The certification may be delegated, but only to an agent that has been authorized by an officer or director of the issuer or underwriter to prepare and certify the report on behalf of the issuer or underwriter. If the report is being certified by an agent on behalf of the issuer or underwriter, provide the applicable information for the agent in the boxes below.

*If the individual completing and filing the report is different from the individual certifying the report, provide the name and contact details for the individual completing and filing the report in Item 11.* 

The signature on the report must be in typed form rather than handwritten form. The report may include an electronic signature provided the name of the signatory is also in typed form.

Securities legislation requires an issuer or underwriter that makes a distribution of securities under certain prospectus exemptions to file a completed report of exempt distribution.

By completing the information below, I certify, on behalf of the issuer/underwriter/investment fund manager, to the securities regulatory authority or regulator, as applicable, that I have reviewed this report and to my knowledge, having exercised reasonable diligence, the information provided in this report is true and, to the extent required, complete.

Name of Issuer/ investment fund manager/agent	Hemlo Explorers Inc.				
Full legal name	HOWLETT Brian		an		
	Family name	First given name		Secondary given names	
Title	President and Chief Executive Officer				
Telephone number	+1 (647) 227-3035	Email address brian@hemloex		explorers.ca	
Signature	"Brian Howlett"	Date	2024 YYYY	11 05 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	SILVA	Eni	
	Family name	First given name	Secondary given names
Title	Law Clerk		
Name of company	CASSELS BROCK & BLACKWEL	L LLP	
Telephone number		Email address esil	va@cassels.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.

Schedules 1 and 2 may contain personal information of individuals and details of the distribution(s). The information in Schedules 1 and 2 will not be placed on the public file of any securities regulatory authority or regulator. However, freedom of information legislation may require the securities regulatory authority or regulator to make this information available if requested.

By signing this report, the issuer/underwriter confirms that each individual listed in Schedule 1 or 2 of the report who is resident in a jurisdiction of Canada:

- a) has been notified by the issuer/underwriter of the delivery to the securities regulatory authority or regulator of the information pertaining to the individual as set out in Schedule 1 or 2, that this information is being collected by the securities regulatory authority or regulator under the authority granted in securities legislation, that this information is being collected for the purposes of the administration and enforcement of the securities legislation of the local jurisdiction, and of the title, business address and business telephone number of the public official in the local jurisdiction, as set out in this form, who can answer questions about the security regulatory authority's or regulator's indirect collection of the information, and
- b) has authorized the indirect collection of the information by the securities regulatory authority or regulator.