# Form 45-106F1 Report of Exempt Distribution

BCSC EDER Reference Number 10047117

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.										
☐ Investment fund issuer	the companion policy to WOT 100.									
✓ 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										
Full legal name First Phosphate (	e Corp.									
Previous full legal name First Potash Corp	orp.									
If the issuer's name changed in the last 12 months, provid	vide most recent previous legal name.									
Website https://firstphosph	phate.com/ (if applicable)									
If the issuer has a legal entity identifier. provide below. Refer to Pa	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	ıll legal name(s) of the co-issuer(s) other than the issuer named above.									
Full legal name(s) of co-issuer(s)	(if applicable)									
ITEM 4 - UNDERWRITER INFORMATION										
If an underwriter is completing the report, provide the underwriter	er's full legal name and firm NRD number.									
Full legal name										
Firm NRD number	(if applicable)									
If the underwriter does not have a firm NRD number, provide the h	e head office contact information of the underwriter.									
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 2 1 2 2 2 2
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
Does the issuer have a SEDAR profile?
No
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 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 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 investment fund, provide the following information.								
a) Investment fund manager 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 strateg	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								
<sup>1</sup> Undertaking for the Collec (EU) directives that allow c	tive Investment of Transferable Securities funds (UCITs Funds) are investment funds regulated by the European Union collective 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 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 YT							
e) Public listing status	s of the investment fund							
If the investment fund has a	CUSIP number, provide below (first 6 digits only)							
	CUSIP number							
	blicly listed, provide the name of the exchange on which the investment fund's securities primarily trade. Provide only the not a trading facility such as, for example, an automated trading system.							
Exchange on an exchange and h								
-	AV) of the investment fund							
	investment fund as of the date of the most recent NAV calculation (Canadian \$).							
\$0 to under \$5M	s5M to under \$25M s25M to under \$100M							
\$100M to under \$500	DM \$500M to under \$1B \$1B 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.

Jerre	schedule 1 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									
b)	Distribution date(s)									
as b	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	2022	12	22	End date	2022	12	22		
		YYYY	ММ	DD		YYYY	ММ	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 \$	
	code	,	CUSIP number (if applicable)	Description of security	Number of securities	Single or lowest price	Highest price	Total amount
U	N	Т		Units consisting of (1) common share in the capital of the corporation and one-half of one common share purchase warrant.	3,647,362.00	0.3500		1,276,576.70
F	Т	U		Flow-Through Units consisting of (1) common share in the capital of the corporation and one-half of one common share purchase warrant.	1,472,000.00	0.4000		588,800.00

### 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		Underlying security code																																	Expiry date (YYYY- MM-DD)	Conversion ratio	Describe other items (if applicable)
						Lowest	Highest																																
W	Z	Т	С	M	S	0.5000		2025-12-31	1:1	Each whole warrant entitles the holder to purchase one common share at a price of \$0.50, subject to accelerated expiry.																													
W	N	Т	С	М	S	0.5000		2025-12-31	1:1	Each whole warrant entitles the holder to purchase one common share at a price of \$0.50, subject to accelerated expiry.																													

## 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 <sup>2</sup> purchasers	Total amount (Canadian \$)					
British Columbia	NI 45-106 2.3 [Accredited investor]	9	246,699.45					
British Columbia	NI 45-106 2.5 [Family, friends and business associates]	2	37,975.00					
Ontario	NI 45-106 2.3 [Accredited investor]	4	120,250.50					
Ontario	NI 45-106 2.5 [Family, friends and business associates]	8	202,100.15					
Québec	NI 45-106 2.3 [Accredited investor]	24	499,215.75					
Québec	NI 45-106 2.5 [Family, friends and business associates]	5	137,679.35					
Austria	NI 45-106 2.3 [Accredited investor]	1	8,750.00					
Bahamas	NI 45-106 2.3 [Accredited investor]	1	59,999.80					
Cyprus	NI 45-106 2.3 [Accredited investor]	2	63,000.00					
Germany	NI 45-106 2.3 [Accredited investor]	9	206,999.80					
Switzerland	NI 45-106 2.3 [Accredited investor]	2	16,550.80					
United Kingdom	NI 45-106 2.3 [Accredited investor]	1	266,156.10					
	Total dollar amount of securities distributed							
	Total number of unique purchasers <sup>2</sup> b							

<sup>&</sup>lt;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.

## 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	

<sup>&</sup>lt;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)

<sup>&</sup>lt;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.

TEM 8 - COMPENSATION INFORMATION									
Provide information for each person (as defined in NI 45-106) 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 ✓ Yes If yes, indicate number of persons compensated. 3									

a) Name of person compensated and registration status											
Indicate whether the person cor	Indicate whether the person compensated is a registrant.    No   Yes										
If the person compensated is an	individual, prov	ride the name	of the indivi	dual.							
Full legal name of indiv	idual										
	Family name								Secondary (	given names	;
If the person compensated is no	et an individual,	provide the fo	llowing infor	rmation.							
Full legal name	of non-individ	ual Canaco	cord Genui	ty Corp./C	orporation	on Car	naccor	d Gen	uity		
F	Firm NRD number 9 0 0 (if applicable)										
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal.											
b) Business contact infor	mation										
If a firm NRD number is not pro	ovided in Item 8	(a), provide th	ne business co	ontact infor	mation of	f the pe	rson be	ing con	npensated.		
Street address											
Municipality						Pro	vince/	State			
Country					Pos	stal cod	de/Zip	code			
Email address					T	elepho	ne nu	mber			
c) Relationship to issuer	or investment	fund manag	ger	J							
Indicate the person's relationshing the Instructions and the meaning Connect with the issue Director or officer of the contractions of the contraction of the contrac	er or investmen	section 1.4 o	f NI 45-106 † er	for the purp	oses of co	<i>mpletir</i> sider of	ng this s the issi	section. uer (oth	aning of "connectoner than an investor investment fun	tment fund)	)
✓ None of the above						, ,,,,,,					
d) Compensation details											
Provide details of all compensat Canadian dollars. Include cash of incidental to the distribution, sur allocation arrangements with the	commissions, sec ch as clerical, pro e directors, offic	urities-based inting, legal of ers or employe	compensation compensation	on, gifts, disc services. Ar	counts or issuer is	other co	ompens Juired to	ation. I o ask fo	Do not report payı	ments for s	ervices
Cash commissions pa	iid1	2,560.00				Se	ecurity co	ode 1	Security code 2	Security of	ode 3
Value of all securitie distributed as compensatio	-		;	Security co	des	W	N	Т			
Describe t	erms of warrant	s, options or o	other rights		e of \$0.5	50 until			ourchase one co 31, 2025, subject		nare
Other compensation	n <sup>5</sup>		Describe								
Total compensation pa	id 1	2,560.00									
Check box if the pe	rson will or may	receive any	deferred con	npensation	(describe	e the tei	rms bel	ow)			
<sup>4</sup> Provide the aggregate value of additional securities of the issu- rights exercisable to acquire at <sup>5</sup> Do not include deferred comp	ier. Indicate the dditional securit	security code	es for all sec	on, <u>excludir</u> urities distri	n <u>g</u> options buted as	s, warra compe	ants or c	other ri	ghts exercisable i ding options, warr	o acquire ants or oth	er

a) Name of person comp	ensated and re	gistration status							
Indicate whether the person co	mpensated is a reg	istrant.	☐ No	<b>✓</b>	Yes				
If the person compensated is an individual, provide the name of the individual.									
Full legal name of indiv	ridual								
		Family name	•	First given i	name		Secondary of	jiven names	,
If the person compensated is not an individual, provide the following information.									
Full legal name	of non-individua	PI Financial Cor	o./Corporatio	on Financiè	re PI				
Firm NRD number 5 2 9 0 (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 information									
If a firm NRD number is not pro	ovided in Item 8 (a	), provide the business	contact inforr	nation of the	person bei	ing con	npensated.		
Street address									
Municipality				F	Province/S	State			
Country			Ī	Postal	code/Zip	code			
Email address				Telep	ohone nui	mber			
c) Relationship to issuer	or investment fu	und manager							
Indicate the person's relationship with the issuer or investment fund manager (select all that apply). Refer to the meaning of "connected" in Part B(2) of the Instructions and the meaning of "control" in section 1.4 of NI 45-106 for the purposes of completing this section.  Connect with the issuer or investment fund manager  Insider of the issuer (other than an investment fund)  Director or officer of the investment fund or investment fund manager  Employee of the issuer or investment fund manager									
None of the above									
d) Compensation details									
Provide details of all compensation paid, or to be paid, to the person identified in Item 8(a) in connection with the distribution. Provide all amounts in Canadian dollars. Include cash commissions, securities-based compensation, gifts, discounts or other compensation. Do not report payments for services incidental to the distribution, such as clerical, printing, legal or accounting services. An issuer is not required to ask for details about, or report on, internal allocation arrangements with the directors, officers or employees of a non-individual compensated by the issuer.									
Cash commissions pa	aid 12	,080.080,			Security co	ode 1	Security code 2	Security co	ode 3
Value of all securitie distributed as compensatio			Security cod	les	WN	Т			
Describe terms of warrants, options or other rights  33,600 Compensation warrants to purchase one common share at a price of \$0.50 until December 31, 2025, subject to accelerated expiry.									
Other compensatio	n <sup>5</sup>	Describe							
Total compensation pa	12	,080.00							
Check box if the person will or may receive any deferred compensation (describe the terms below)									
<sup>4</sup> Provide the aggregate value of additional securities of the issurights exercisable to acquire as <sup>5</sup> Do not include deferred comp	uer. Indicate the se dditional securities	ecurity codes for all se	tion, <u>excludin</u> curities distrib	g options, wa buted as com	arrants or o	other rig	ghts exercisable t ding options, warra	o acquire ants or oth	er

a) Name of person comp	ensated and re	gistration status								
Indicate whether the person co	mpensated is a reg	istrant.	☐ No		<b>✓</b> \	Yes				
If the person compensated is an individual, provide the name of the individual.										
Full legal name of indiv	vidual									
		Family name	'	First	given nar	me		Secondary (	jiven names	;
If the person compensated is not an individual, provide the following information.										
Full legal name	of non-individua	EMD FINANCIA	AL INC. / LA	A FINAN	ICIÈRE	EMD	INC.			
Firm NRD number 3 6 4 8 0 (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 information										
If a firm NRD number is not pro	ovided in Item 8 (a	), provide the busines:	s contact info	rmation (	of the pe	erson be	ing con	npensated.		
Street address										
Municipality					Pro	ovince/	State			
Country				Po	ostal co	de/Zip	code			
Email address					Telepho	one nu	mber			
c) Relationship to issuer	or investment fu	und manager								
Indicate the person's relationship with the issuer or investment fund manager (select all that apply). Refer to the meaning of "connected" in Part B(2) of the Instructions and the meaning of "control" in section 1.4 of NI 45-106 for the purposes of completing this section.  Connect with the issuer or investment fund manager  Insider of the issuer (other than an investment fund)										
☐ Director or officer of the investment fund or investment fund manager ☐ Employee of the issuer or investment fund manager ☐ None of the above										
d) Compensation details										
Provide details of all compensation paid, or to be paid, to the person identified in Item 8(a) in connection with the distribution. Provide all amounts in Canadian dollars. Include cash commissions, securities-based compensation, gifts, discounts or other compensation. Do not report payments for services incidental to the distribution, such as clerical, printing, legal or accounting services. An issuer is not required to ask for details about, or report on, internal allocation arrangements with the directors, officers or employees of a non-individual compensated by the issuer.										
Cash commissions pa	16	,400.00			S	ecurity co	ode 1	Security code 2	Security of	ode 3
Value of all securitie distributed as compensation			Security c	odes	W	V N	Т			
Describe terms of warrants, options or other rights  36,000 Compensation warrants to purchase one common share at a price of \$0.50 until December 31, 2025, subject to accelerated expiry.										
Other compensatio	n <sup>5</sup>	Describ	е							
Total compensation paid 16,400.00										
Check box if the person will or may receive any deferred compensation (describe the terms below)										
<sup>4</sup> Provide the aggregate value of additional securities of the issurights exercisable to acquire a <sup>5</sup> Do not include deferred comp	uer. Indicate the se dditional securities	ecurity codes for all s	ation, <u>exclud</u> ecurities disi	l <u>ing</u> option tributed a	ns, warra s compe	ants or densation	other ri n, <u>includ</u>	ights exercisable t ding options, warr	o acquire ants or oth	er

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 <sup>6</sup>							
Provide name of reporting issuer										
Wholly owned subsidiary of a foreign public issuer <sup>6</sup>										
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 <sup>7</sup>				_		
If the issuer is at least one of the	above, do not comp	olete Item 9(a) – (d	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 b	oox and complete	Item 9(a) - (c).							
a) Directors executive officer	s and promoters of	of the issuer								
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.							province			
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 within Canada, state the province or										
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	First Phosphate Corp.					
Full legal name	Kurtz					
	Family name	First given name	•	Seconda	ary given na	mes
Title	CFO					
Telephone number	4162000657	Email address	bennett@	firstphos	sphate.co	m
Signature	Bennett Kurtz	Date	2022	12	31	
			YYYY	MM	DD	

ITEM 11- CONTACT F	PERSON				
. 3	ness contact information for this report, if different than t		3 )	regulator mo	ay contact with any questions
Same as individua	al certifying the report				
Full legal name				Title	
•	Family name	First given name	Secondary given names		_
Name of company					
Telephone number		Er	nail address		

#### Notice - Collection and use of personal information

The personal information required under this form is collected on behalf of and used by the securities regulatory authority or regulator under the authority granted in securities legislation for the purposes of the administration and enforcement of the securities legislation.

If you have any questions about the collection and use of this information, contact the securities regulatory authority or regulator in the local jurisdiction(s) where the report is filed, at the address(es) listed at the end of this form.

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

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

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