Form 45-106F1 Report of Exempt Distribution (Non-investment fund issuer)

IT IS AN OFFENCE TO MAKE A MISREPRESENTATION IN THIS REPORT

ITEM 1 – REPORT TYPE							
✓ New report							
Amended report If amended, provide	e Submission ID of report that is	being amended:	(Example: EDR1234567890-123)				
ITEM 2 – PARTY CERTIFYING T	HE REPORT						
Indicate the party certifying the report (sel National Instrument 81-106 Investment Fu		-					
☑ Issuer (Other than an investment fund)							
Underwriter							
ITEM 3 – ISSUER NAME AND O	THER IDENTIFIERS						
Provide the following information about th	e issuer, or if the issuer is an in	nvestment fund, about the fund					
Full legal name							
Alexandra Capital Corp.							
Previous full legal name If the issuer's nai	me changed in the last 12 mont	ths, provide most recent previo	us legal name.				
Website (if applicable)							
alexandracapitalcorp.com							
If the issuer has a legal entity identifier, pr	rovide below. Refer to Part B of	the Instructions for the definiti	on of "legal entity identifier".				
Legal entity identifier							
ITEM 4 – UNDERWRITER INFOR	RMATION						
If an underwriter is completing the report, property for the report, provided the report of the report of the report, provided the report of the report of the report, provided the report of the repo	provide the underwriter's full leg	gal name and firm National Reg	istration Database (NRD) number.				
Tuillegal Hame							
Does the Underwriter's Firm have an NRD Number? Firm NRD number							
No Yes	Number: Tim NIZD III	umbei					
If the underwriter does not have a firm NR	RD number, provide the head off	fice contact information of the ι	nderwriter.				
Street address	Municipality	Province/State	Postal/ZIP code				
Country	Telephone number	Website (if applicable)					

ITEM 5 - ISSUER INFORMATION			
a) Primary industry			
Provide the issuer's North American Indus activity. For more information on finding th NAICS industry code			orresponds to the issuer's primary business stry search tool .
If the issuer is in the mining industry , ince the mining industry. Select the category the Exploration Development Produc	at best describes the issue		hat provide services to issuers operating in
Is the issuer's primary business to invest a ☐ Mortgages ☐ Real estate ☐ Commer	-		* * *
b) Number of employees			
✓ 0 - 49	or more		
c) SEDAR profile number			
Does the issuer have a <u>SEDAR</u> profile ? ☐ No ☑ Yes	If yes, provide SEDAR pro	file number:	
d) Head office address		If the issuer does not h	nave a SEDAR profile, complete Item 5(d) – (h).
Street address	Municipality	Province/State	Postal/ZIP code
]		
Country	Telephone number		
e) Date of formation and financial yea	r-end		
Date of formation	Financial year-end		
July 0. 10 mails.	- manerar year ema		
f) Reporting issuer status			
Is the issuer a reporting issuer in any juriso	diction of Canada?		
If yes, select the jurisdictions of Canada in ☐ AII ☐ AB ☐ BC ☐ MB ☐ NS ☐ NU ☐ ON ☐ PE	NB NL	ting issuer. NT YT	
g) Public listing status			
Does the issuer have a CUSIP number? No Yes	CUSIP number (provide t	first 6 digits only)	
the issuer has applied for and received a li	_		de only the names of exchanges for which s.
Exchange names: Not Applicable Toro	onto Stock Exchange	TSX Venture Exchange	Canadian Securities Exchange
Aequitas Neo Exchange Aus	tralian Securities Exchange	Deutsche Boerse	Euronext
London Stock Exchange Nas	daq	New York Stock Exchange	Shanghai Stock Exchange
Shenzhen Stock Exchange Stock	ck Exchange Of Hong Kong	Tokyo Stock Exchange	OTHER
If other, describe:			
h) Size of issuer's assets			
Select the size of the issuer's assets for its the size of the issuer's assets at the distrib	-	end (Canadian \$). If the issuer ha	s not existed for a full financial year, provide
	1 to under \$25M	\$25M to under \$100M	
\$100M to under \$500M \$50	0M to under \$1B	\$1B or over	

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, which should be disclosed in Item 8. The information provided in Item 7 must reconcile with the information provided in Schedule 1 of the report.

	_		
a١	Cur	ren	CV

Select the currency or currencies in which the distribution was m	ade. 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	End Date		
2018-05-18	2018-05-18		

c) Detailed purchaser information

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

BCN 2016-04 Schedule 1 Template to Form 45-106F1.XLSX - 44 KB

d) Types of securities distributed

Provide the following information for all distributions that take place in a jurisdiction of Canada on a per security basis. Refer to Part A of the Instructions for how to indicate the security code. If providing the CUSIP number, indicate the full 9-digit CUSIP number assigned to the security being distributed.

				Canadian \$		
Security code	CUSIP number	Number of securities	Single or lowest price	Highest price	Total amount	
UBS	01479Q102	2,035,550.0000	0.4000	0.4000	814,220.0000	
Description of security: Units consisting of one common share and one-half of one share purchase warrant. Each whole warrant entitles the holder to a						

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.

Not Applicable

Security code	Underlying security	Exercis (Canad		Expiry date (YYYY-MM-DD)	Conversion ratio
code	code	Lowest	Highest	(TTTT-WIW-DD)	
WNT	CMS	0.6000	0.6000	2019-05-18	0.5
Describe oth					

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 of Canada, state the province or territory, otherwise state country.

Province or country	Exemption relied on	Number of purchasers	Total amount (Canadian \$)
British Columbia	NI 45-106 2.3 [Accredited investor]	6	169,000.0000
Ontario	NI 45-106 2.3 [Accredited investor]	4	75,000.0000
Thailand	NI 45-106 2.3 [Accredited investor]	1	20,000.0000
New Brunswick	NI 45-106 2.3 [Accredited investor]	1	5,000.0000
Alberta	NI 45-106 2.3 [Accredited investor]	7	170,000.0000
Saint Kitts and Nevis	NI 45-106 2.3 [Accredited investor]	1	100,000.0000
United States Minor Outlying Islar	NI 45-106 2.3 [Accredited investor]	25	275,220.0000
	Total dollar amount of securiti	es distributed	814,220.0000

lotal dollar amount or securities distributed	814,220.0000
Total number of unique purchasers ² 45	

² 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.

ITEM 7 - INFORMATION ABOUT THE DISTRIBUTION

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.

√ Not Applicable

	Description	Date of document or other material	Previously filed with or delivered to regulator?	Previously filed Submission ID	Filename
1.			\square Y \square N		

ITEM 8 - COMPENSATION	N INFORMATIO	ON						
Provide information for each pers connection with the distribution.		•						
Indicate whether any compensation was paid, or will be paid, in connection with the distribution. ☐ No ☑ Yes								
PERSON 1								
a) Name of person compensat	ted and registration	n status						
Indicate whether the person com ✓ No ☐ Yes	pensated is a regisi	trant.						
If the person compensated is an Family name	•	he full legal name of t en name	the individual. Secondary given nan	mes				
If the person compensated is not	an individual, provi	de the following inforr						
Full legal name of non-individual Lakeview Capital Solutions Inc.			Firm NRD nu	umber <i>(if applicable)</i>				
Indicate whether the person com ✓ No ☐ Yes	pensated facilitated	the distribution throu	gn a funding portal or an in	ternet-based portal.				
b) Business contact information	on							
If a firm NRD number is not provi	ided in Item 8(a). pi	rovide the business c	ontact information of the pe	erson being compensated.				
Street address	Municip		Province/State	Postal/ZIP code				
372 Okaview Road	Kelowna	a	British Columbia	V1W 4K3				
Country	Telepho	ne number	Email address					
Canada	6047256	965	tasso@314finance.com					
c) Relationship to issuer or in	vestment fund ma	nager						
Indicate the person's relationship Part B(2) of the Instructions and Connected with the issuer or in	the meaning of "co	ntrol" in section 1.4 of	NI 45-106 for the purpose		1.			
Insider of the issuer (other tha	n an investment fun	d)	✓ None of the above					
Director or officer of the invest	ment fund or investr	ment fund manager						
d) Compensation details								
Provide details of all compensation in Canadian dollars. Include cast for services incidental to the distraction about, or report on, internal allocations.	h commissions, sec ribution, such as cle	urities-based comper erical, printing, legal o	nsation, gifts, discounts or our accounting services. An i	other compensation. Do no issuer is not required to as	t report payments k for details			
Cash commissions paid	6,960.0000							
Value of all securities	0.0000	Security code1 WN	T Security code2	Security code	3			
✓ distributed as compensation ⁴		Describe terms of wa	arrants, options or other rigi	hts				
		Finders Warrants to	purchase additional commo	on shares for \$0.40 per find	ers warrant share			
☐ Other compensation ⁵		Describe						
Total compensation Paid	6,960.0000							
				,				
Check box if the person will o	or may receive any o	dererred compensatio	n (describe the terms below	v)				

to acquire additional securities of t 5 Do not include deferred compens	the issuer.	or an occurrice distri	oatea as com	pendulon, moluumg opue	no, warranto or other n	grito exercisable	
PERSON 2							
a) Name of person compensate	d and registration	n status					
Indicate whether the person compe	ensated is a regist	rant.					
If the person compensated is an in Family name	•	he full legal name of t en name		dary given names	_		
If the person compensated is not a Full legal name of non-individual	n individual, provi	de the following inforr	nation.	Firm NPD number (if any	oliophio)		
Canaccord Genuity Corp.				Firm NRD number (if app			
Indicate whether the person compe	ensated facilitated	the distribution throu	gh a funding _l		i portal.		
b) Business contact information	1						
If a firm NRD number is not provid	led in Item 8(a), pr	ovide the business c	ontact informa	ation of the person being o	compensated.		
Street address	Municip	ality	Province/Sta	ite Po	stal/ZIP code		
Country	Telepho	ne number	Email addres	SS			
c) Relationship to issuer or inve	estment fund ma	nager					
Indicate the person's relationship we Part B(2) of the Instructions and the Connected with the issuer or invalid Insider of the issuer (other than Director or officer of the investment).	ne meaning of "corvestment fund mar	ntrol" in section 1.4 of nager d)	NI 45-106 fo		ing this section.	'in	
d) Compensation details							
Provide details of all compensation in Canadian dollars. Include cash for services incidental to the distribution, or report on, internal allocates	commissions, sec bution, such as cle	urities-based comper erical, printing, legal o	nsation, gifts, or accounting	discounts or other compe services. An issuer is not	nsation. Do not report p required to ask for deta	payments ails	
Cash commissions paid	2,100.0000						
Value of all securities distributed as compensation ⁴	0.0000						
Other compensation ⁵		Describe					
Total compensation Paid	2,100.0000						
Check box if the person will or	may receive any o	deferred compensatio	n (describe th	ne terms below)			
⁴ Provide the aggregate value of al securities of the issuer. Indicate th to acquire additional securities of t	e security codes f						

 $^{5}\,\mathrm{Do}$ not include deferred compensation.

⁴ Provide the aggregate value of all securities distributed as compensation, excluding options, warrants or other rights exercisable to acquire additional

⁵ Do not include deferred compen	sation.						
PERSON 3							
a) Name of person compensat	ed and registration	on status					
Indicate whether the person comp No ✓ Yes	pensated is a regis	trant.					
f the person compensated is an i	-	-					
amily name	First giv	ren name	Se	condary given na	mes	\neg	
the person compensated is not	an individual, prov	ide the following info	ormation.				
ull legal name of non-individual					umber (if app	licable)	
laywood Securities Inc.				1630			
ndicate whether the person comp No Yes	oensated facilitated	I the distribution thro	ough a fund	ing portal or an in	ternet-based	portal.	
b) Business contact information	on						
f a firm NRD number is not provi	ded in Item 8(a), p	rovide the business	contact inf	ormation of the pe	erson being c	ompensated.	
treet address	Municip	ality	Province	/State	Pos	stal/ZIP code	
Country	Telepho	ne number	Email ac	Idress			
·							
c) Relationship to issuer or in							
Insider of the issuer (other than Director or officer of the investred) Compensation details		•	<u> </u>	None of the above			
Provide details of all compensation In Canadian dollars. Include cash For services incidental to the distration In about, or report on, internal alloca	n commissions, sec ribution, such as cl	curities-based comp erical, printing, lega	ensation, g Il or accoun	ifts, discounts or ting services. An	other comper issuer is not	nsation. Do not i required to ask	report payments for details
Cash commissions paid	6,600.0000	1					
Value of all securities	0.0000	Security code1 W	'NT	Security code2		Security code3	
distributed as		Describe terms of	warrants, o	۔ ptions or other rig	hts		
compensation ⁴		Finders Warrants	to purchase	additional comm	on shares for	\$0.40 per finde	rs warrant share
Other compensation ⁵		Describe					
Total compensation Paid	6,600.0000						
Check box if the person will o	r may receive any	deferred compensat	tion (describ	e the terms below	w)		
	, ,	·			,		
⁴ Provide the aggregate value of a securities of the issuer. Indicate to to acquire additional securities of ⁵ Do not include deferred compen	the security codes the issuer.						

PERSON 4

Indicate whether the person competion of the person competion of the person competition of the	nsated is a regist	rant.					
If the person compensated is an ind	dividual, provide ti	he full legal name of ti	he individua	I.			
Family name	First give	en name	Secor	ndary given names			
If the person compensated is not an	n individual, provid	de the following inform	nation.				
Full legal name of non-individual				Firm NRD number (if	applicable)		
SP Wealth							
Indicate whether the person competed No Yes	nsated facilitated	the distribution throug	gh a funding	portal or an internet-ba	sed portal.		
b) Business contact information							
If a firm NRD number is not provide	ed in Item 8(a), pr	ovide the business co	ntact inforn	nation of the person bei	ng compensated.		
Street address	et address Municipality		Province/St	ate	Postal/ZIP code	1	
Royal Bank Plaza, South Tower, 20	00 Bay Toronto		Ontario		M5J 2J1		
Country	Telephor	ne number	Email addre	ess			
Canada	4169438	3097	schao@sp	wealth.ca			
c) Relationship to issuer or inve	stment fund ma	nager					
Indicate the person's relationship we Part B(2) of the Instructions and the Connected with the issuer or inversion of the issuer of the issuer of the investment of the invest	e meaning of "corestment fund man an investment fund ent fund or investment fund or investment fund or to be particular, such as cleon arrangements 2,400.0000	atrol" in section 1.4 of lager ager ager ager ager ager ager ager	NI 45-106 f Emp Nor iffied in Items sation, gifts r accounting icers or emp	or the purposes of composes of the issuer or in the of the above 8 (a) in connection with a discounts or other composervices. An issuer is ployees of a non-individual ecurity code2	the distribution. For pensation to a sual compensated in Security code	n. Provide all amount report payments for details by the issuer.	ts
Other compensation ⁵		Describe					
Total compensation Paid	2,400.0000						
Check box if the person will or n	may receive any d	leferred compensation	n (describe t	he terms below)			
⁴ Provide the aggregate value of all					er rights exercisal	ble to acquire ad	ditional
securities of the issuer. Indicate the to acquire additional securities of the 5 Do not include deferred compensations.	e security codes f ne issuer.						

TIEM 9 - DIRECTORS, EXECUTIVE OFFICERS				
Indicate whether the issuer is any of the following (select all t	that apply).			
Reporting issuer in any jurisdiction of Canada				
Foreign public issuer				
	diation of Canada 6			
Wholly owned subsidiary of a reporting issuer in any juris Provide name of reporting issuer	diction of Canada			
Trovide name of reporting issue:				
Wholly owned subsidiary of a foreign public issuer ⁶				
Provide name of foreign public issuer				
remains an energy passe today.				
Issuer distributing eligible foreign securities only to permi	tted clients 7			
If the issuer is at least one of the above, do not com		to Item 10		
⁶ An issuer is a wholly owned subsidiary of a reporting iss			curities, other than	
securities that are required by law to be owned by its dire				
Oheck this box if it applies to the current distribution everally. Refer to the definitions of "eligible foreign securit"			to non-permitted	
If the issuer is none of the above, check this box and	,	b(1) of the mandenons.		
<u> </u>				
a) Directors, executive officers and promoters of the iss	suer			
Provide the following information for each director, executive			ne province or	
territory, otherwise state the country. For "Relationship to iss	uer", "D" – Director, "O" – Execu	utive Officer, "P" – Promoter.		
	Family name	Business location of	Relationship to	
Individual? Organization or company name	First given name	non-individual or residential	issuer (select all that	
	Secondary given name	jurisdiction of individual	apply)	
YN			□D □O □P	
b) Promoter information				
If the promoter listed above is not an individual, provide the f				
within Canada, state the province or territory, otherwise state	the country. For "Relationship t	to promoter", "D" – Director, "O" – Execu	tive Officer.	
	Family name	Decidential jurisdiction	Relationship to	
Organization or company name	First given name	Residential jurisdiction of individual	promoter (select one or both	
	Secondary given name		if applicable)	
			□D □O	
c) Residential address of each individual				
Complete Schedule 2 of this form providing the full resid				
attach to the completed report. Schedule 2 also requires	information to be provided ab	oout control persons.		

ITEM 10 - CERTIFICATION

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

The certification may not be delegated to an agent or other individual preparing the report on behalf of the issuer or underwriter. If the individual completing and filing the report is different from the individual certifying the report, provide their name and contact details in Item 11.

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

IT IS AN OFFENCE TO MAKE A MISREPRESENTATION IN THIS REPORT

By completing the information below, I certify to the securities regulatory authority or regulator that:

- I have read and understand this report; and
- all of the information provided in this report is true.

Full legal name - Family name	First given name	Secondary given names	Title
Katsuris	Vivian		Director, President & Secretary
Name of issuer/underwriter		Telephone number	Email address
Alexandra Capital Corp.		604-729-2500	info@alexandracapitalcorp.com
Signature		Date	
Vivian Katsuris		2018-05-23	
ITEM 11 - CONTACT PER	SON		

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 th	e report				
Full legal name - Family name	First given name	Secondary given names	Title		
Pinsky	Max		Solicitor for the Issuer		
Name of company		Telephone number	Email address		
Max Pinsky Personal Law Corporation		604-689-9930	max@strategiclaw.ca		

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 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.

EDR1527102467-119
Submission ID
2018-05-23 16:04:10.963
Date