# Form 45-106F1 Report of Exempt Distribution

IT IS AN OFFENCE TO MAKE A MISREPRESENTATION IN THIS REPORT

Item 1 - Report Type							
New report	ovide filing date of report that is being	amended (YYYY-MM-DD)					
ITEM 2 - PARTY CERTIFYING THE REPOR	Т						
	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	tous Disclosure and the companion policy to M	51-100.					
<ul> <li>✓ Issuer (other than an investment full</li> </ul>	und)						
ITEM 3 - ISSUER NAME AND OTHER IDE							
Provide the following information about the issuer, or		nd.					
Full legal name Super	Nova Petroleum Corp.						
Previous full legal name							
If the issuer's name changed in the last 12	? months, provide most recent previous legal na	ne.					
Website		(if applicable)					
If the issuer has a legal entity identifier, provide below	v. Refer to Part B of the Instructions for the defir	tion of "legal entity identifier".					
Legal entity identifier							
ITEM 4 - UNDERWRITER INFORMATION							
If an underwriter is completing the report, provide the	punderwriter's full legal name and firm Nationa	Registration Database (NRD) number					
Full legal name							
Firm NRD number	(if applicable)						
If the underwriter does not have a firm NRD number,	provide the head office contact information of t	ne underwriter.					
Street address							
Municipality	Province/St	ite					
Country	Postal code/Zip co	de					
Telephone number	Web	ite (if applicable)					

ITEM 5 - ISSUER INFORMATION
If the issuer is an investment fund, do not complete Item 5. Proceed to Item 6.
a) Primary industry
Provide the issuer's North American Industry Classification Standard (NAICS) code (6 digits only) that corresponds to the issuer's primary business activity. For more information on finding the NAICS industry code go to <b>Statistics Canada's NAICS industry search tool.</b>
NAICS industry code 2 1 2 2 9 9
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.          Image: The stage of the
Is the issuer's primary business to invest all or substantially all of its assets in any of the following? If yes, select all that apply.           Image: Im
b) Number of employees
Number of employees: 🔽 0 - 49 🗌 50 - 99 🗌 100 - 499 🔲 500 or more
c) SEDAR profile number
Does the issuer have a SEDAR profile?
NoYesIf yes, provide SEDAR profile number00033678
If the issuer does not have SEDAR profile complete item 5(d) - (h).
d) Head office address
Street address Province/State
Municipality Postal code/Zip code
Country Telephone number
e) Date of formation and financial year-end
Date of formation     Financial year-end       YYYY     MM       DD
f) Reporting issuer status
Is the issuer a reporting issuer in any jurisdication of Canada? 🔲 No 🗌 Yes
If yes, select the jurisdictions of Canada in which the issuer is a reporting issuer.
g) Public listing status
If the issuer has a CUSIP number, provide below (first 6 digits only)
CUSIP number
If the issuer is publicly listed, provide the names of all exchanges on which its securities are listed. Include only the names of exchanges for which the issuer has applied for and received a listing, which excludes, for example, automated trading systems.
Exchange name(s):
h) Size of issuer's assets
Select the size of the issuer's assets for its most recent financial year-end (Canadian \$). If the issuer has not existed for a full financial year, provide the size of the issuer's assets at the distribution end date.
□ \$0 to under \$5M □ \$5M to under \$25M □ \$25M to under \$100M
□ \$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 ma	inager information					
Full legal name						
Firm NRD number	(if applicable)					
If the investment fund man	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 that	most accurately identifies the issuer (select only one) .					
Money market	Equity Fixed income					
Balanced	Alternative strategies Other (describe)					
Indicate whether one or both	of the following apply to the investment fund .					
Invests primarily in	other investment fund issuers					
Is a UCITs Fund <sup>1</sup>						
<sup>1</sup> Undertaking for the Collectiv directives that allow collective	re Investment of Transferable Securities funds (UCITs Funds) are investment funds regulated by the European Union (EU) e investment schemes to operate throughout the EU on a passport basis on authorization from one member state.					
	nd financial year-end of the investment fund					
Date of formati						
	YYYY MM DD MM DD					
d) Reporting issuer sta	atus of the investment fund					
	orting issuer in any jurisdication of Canada? 🔲 No 🗌 Yes					
If yes, select the jurisdictions of All	of Canada in which the investment fund is a reporting issuer.           AB         BC         MB         NL         NT					
e) Public listing status	NU         ON         PE         QC         SK         YT           of the investment fund					
	CUSIP number, provide below (first 6 digits only)					
.,	CUSIP number					
If the investment fund is publicly listed, provide the names of all exchanges on which its securities are listed. Include only the names of exchanges for						
which the issuer has applied for and received a listing, which excludes, for example, automated trading systems.						
Exchange name						
f) Net asset value (NA	V) of the investment fund					
-	nvestment fund as of the date of the most recent NAV calculation (Canadian \$).					
\$0 to under \$5M	S5M to under \$25M \$25M to under \$100M					
\$100M to under \$500						
	YYYY MM DD					

ITEM 7 - INFORMATION	ABOUT THE DISTRIBUTI	ON				
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.						
a) Currency						
Select the currency or currencies	in which the distribution was mo	nde. All dollar am	ounts provided ii	n the report mus	t be in Canadiar	n dollars.
Canadian dollar	US dollar Eu	ro 🗌 O	ther (describe)	)		
b) Distribution date(s)						
as both the start and end dates distribution period covered by t		curities distribute	d on a continuou	s basis, include	the start and end	
Star	date 2017 11 2 YYYY MM DI		End date	2017	11 29 MM DD	
c) Detailed purchaser info	ormation					
Complete Schedule 1 of thi	form for each purchaser a	ind attach the	schedule to th	he completed	report.	
d) Types of securities dis						
Instructions for how to indicat	ion for all distributions that take e the security code. If providing th cluded in item 7d must reconcile	he CUSIP number	, indicate the full	l 9-digit CUSIP n	number assigned	to the security being
<u>risked Questions.</u>					Canadian \$	6
Security code CUSIP number (if applicable)	Description of security		Number of securities	Single or lowest price	Highest price	Total amount
						350,000.00
	nvertible/exchangeable sec					
	ions) were distributed, provide th onversion ratio and describe any					xchangeable securities
Security Underlying security code	Exercise price (Canadian \$) Lowest Highest	Expiry date (YYYY- MM-D	Conversi	ion	ibe other items (if a	applicable)
	ition by jurisdiction and exer					
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, in a foreign 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	Exemptio	n relied on		Number of purchasers	Total amou	int (Canadian \$)
Alberta	NI 45-106 2.3 [Accred	ited investor]		3		50,000.00
Alberta	NI 45-106 2.5 [Family, associates]	, friends and b	ousiness	1		15,000.00
British Columbia	NI 45-106 2.3 [Accred	ited investor]		11		200,000.00
Manitoba	NI 45-106 2.3 [Accred	ited investor]		3		50,000.00
Belize	NI 45-106 2.3 [Accred	ited investor]		1		20,000.00

Ontario	NI 45-106 2.3 [Accredited investor]	1	15,000.00
Total dollar amount of securit			350,000.00
	Total number of unique purchasers <sup>2</sup>	20	
	Total number of unique purchasers <sup>2</sup>		

<sup>2</sup>In calculating the total number of unique purchasers to which the issuer distributed securities, count each purchaser only once, regardless of whether the issuer distributed multiple types of securities to, and relied on multiple exemptions for, that purchaser.

## g) Net proceeds to the investment fund by jurisdiction

If the issuer is an investment fund, provide the net proceeds to the investment fund for each jurisdiction of Canada and foreign jurisdiction where a purchaser resides.<sup>3</sup> If an issuer located outside of Canada completes a distribution in a jurisdiction of Canada, include net proceeds for that jurisdiction of Canada only. For jurisdictions within Canada, state the province or territory, otherwise state the country.

Province or country	Net proceeds (Canadian \$)
Total net proceeds to the investment fund	

<sup>3</sup>"Net proceeds" means the gross proceeds realized in the jurisdiction from the distributions for which the report is being filed, less the gross redemptions that occurred during the distribution period covered by the report.

### h) Offering materials - This section applies only in Saskatchewan, Ontario, Québec, New Brunswick and Nova Scotia.

If a distribution has occurred in Saskatchewan, Ontario, Québec, New Brunswick or Nova Scotia, complete the table below by listing the offering materials that are required under the prospectus exemption relied on to be filed with or delivered to the securities regulatory authority or regulator in those jurisdictions.

In Ontario, if the offering materials listed in the table are required to be filed with or delivered to the Ontario Securities Commission (OSC), attach an electronic version of the offering materials that have not been previously filed with or delivered to the OSC.

Des	Description Date of document or other material (YYYY-MM-DD)		Previously filed with or delivered to regulator? (Y/N)	Date previously filed or delivered (YYYY-MM-DD)		

ITEM 8 - COMPENSATIO	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 compension	sation was paid, or will be paid, in connection with the distribution.					
🗌 No 🗹 Yes	If yes, indicate number of persons compensated.					
a) Name of person comp	pensated and registration status					
Indicate whether the person	on compensated is a registrant. 🔲 No 🗹 Yes					
If the person compensated is	an individual, provide the name of the individual.					
Full legal name of indiv	<i>v</i> idual					
	Family name First given name Secondary given names					
If the person compensated is	is not an individual, provide the following information.					
Full legal name	of non-individual PI Financial Corp.					
F	irm NRD number 5 2 9 0 (if applicable)					
Indicate whether the person	n compensated facilitated the distribution through a funding portal or an internet-based portal. Ve	€S				
b) Business contact infor						
If a firm NRD number is not p	provided in Item 8 (a), provide the business contact information of the person being compensated.					
Street address		1				
Municipality	Province/State	]				
Country	Postal code/Zip code	1				
Email address	Telephone number	1				
c) Relationship to issuer	r or investment fund manager					
Indicate the person's relations	iship with the issuer or investment fund manager (select all that apply). Refer to the meaning of "connected" in Part he meaning of "control" in section 1.4 of NI 45-106 for the purposes of completing this section.					
Connect with the issu	uer or investment fund manager Insider of the issuer (other than an investment fund)					
Director or officer of the	the investment fund or investment fund manager Employee of the issuer or investment fund manager					
✓ None of the above						
d) Compensation details						
Canadian dollars. Include cash services incidental to the distri	sation paid, or to be paid, to the person identified in Item 8(a) in connection with the distribution. Provide all amounts in h commissions, securities-based compensation, gifts, discounts or other compensation. Do not report payments for ribution, such as clerical, printing, legal or accounting services. An issuer is not required to ask for details about, or report rements with the directors, officers or employees of a non-individual compensated by the issuer.					
Cash commissions pa	aid 2,700.00 Security codes Security code 1 Security code 2 Security code 3					
Value of all securitie distributed a compensatio	es as	]				
Describe t	terms of warrants, options or other rights	]				
Other compensation	on <sup>s</sup> Describe	]				
Total compensation pa	aid 2,700.00					
Check box if the pe	erson will or may receive any deferred compensation (describe the terms below)					
		]				
additional securities of the is	e of all securities distributed as compensation, <u>excluding</u> options, warrants or other rights exercisable to acquire ssuer. Indicate the security codes for all securities distributed as compensation, <u>including</u> options, warrants or other					
rights exercisable to acquire	e additional securities of the issuer.					

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

a) Name of person compensated and registration status
Indicate whether the person compensated is a registrant. 🔲 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 Leede Jones Gable Inc.
Firm NRD number 5 7 7 0 (if applicable)
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal. 🗸 No 🗌 Ye
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 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 paid     3,300.00     Security codes     Security code 1     Security code 2     Security code 3
Value of all securities distributed as compensation <sup>4</sup>
Describe terms of warrants, options or other rights
Other compensation <sup>5</sup> Describe
Total compensation paid 3,300.00
Check box if the person will or may receive any deferred compensation (describe the terms below)
<sup>4</sup> Provide the aggregate value of all securities distributed as compensation, <u>excluding</u> options, warrants or other rights exercisable to acquire additional securities of the issuer. Indicate the security codes for all securities distributed as compensation, <u>including</u> options, warrants or other rights exercisable to acquire additional securities of the issuer. <sup>5</sup> Do not include deferred compensation.

a) Name of person compensated	and registration status			
Indicate whether the person compen	sated is a registrant.	No No	✓ Yes	
If the person compensated is an individ	ual, provide the name of the inc	lividual.		
Full legal name of individual				
	Family name	First given	name Second	ary given names
If the person compensated is not an ir	dividual, provide the following i	nformation.		
Full legal name of non-in	ndividual Mackie Research	Capital Corpora	ition	
Firm NRD	number 3 0 7	0	(if applica	able)
Indicate whether the person compense	ated facilitated the distribution t	hrough a funding p	oortal or an internet-based	portal. 🗸 No 🗌 Yes
b) Business contact information				
If a firm NRD number is not provided in	n Item 8 (a), provide the busines.	s contact informatio	on of the person being com	pensated.
Street address				
Municipality		]	Province/State	
Country		_ ] р	ostal code/Zip code	
Email address		]	Telephone number	
c) Relationship to issuer or inves		<u> </u>		· (# · #: D ·
Indicate the person's relationship with a B(2) of the Instructions and the meanin				
Connect with the issuer or inve	stment fund manager		Insider of the issuer (other	than an investment fund)
Director or officer of the investr	nent fund or investment fund m	anager 🗌	Employee of the issuer or	investment fund manager
✓ None of the above				
d) Compensation details				
Provide details of all compensation paid Canadian dollars. Include cash commiss services incidental to the distribution, su on, internal allocation arrangements wi	ions, securities-based compense ich as clerical, printing, legal or	ntion, gifts, discount accounting services	ts or other compensation. L 5. An issuer is not required t	Do not report payments for to ask for details about, or report
Cash commissions paid	900.00	Security codes	Security code 1 S	Security code 2 Security code 3
Value of all securities distributed as compensation <sup>4</sup>				
Describe terms of w	arrants, options or other rights			
Other compensation <sup>5</sup>	Describe			
Total compensation paid	900.00	L		
Check box if the person will o	pr may receive any deferred co	mpensation (descri	ibe the terms below)	
<sup>4</sup> Provide the aggregate value of all se- additional securities of the issuer. Indu- rights exercisable to acquire additiona <sup>5</sup> Do not include deferred compensatio	cate the security codes for all s I securities of the issuer.			

a) Name of person compensated and registration status	
Indicate whether the person compensated is a registrant. No Ves	
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 Canaccord Genuity Corp.	
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.	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	<u> </u>
Indicate the person's relationship with the issuer or investment fund manager (select all that apply). Refer to the meaning of "connected" in 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.	Ραπ
Connect with the issuer or investment fund manager Insider of the issuer (other than an investment fu	nd)
Director or officer of the investment fund or investment fund manager Employee of the issuer or investment fund mana	ger
✓ 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 ar Canadian dollars. Include cash commissions, securities-based compensation, gifts, discounts or other compensation. Do not report payments services incidental to the distribution, such as clerical, printing, legal or accounting services. An issuer is not required to ask for details about, on, internal allocation arrangements with the directors, officers or employees of a non-individual compensated by the issuer.	for
Cash commissions paid 7,200.00 Security code 1 Security code 2 Security	
Value of all securities Security codes Security code 1 Security code 2 Securit	ty code 3
distributed as compensation <sup>4</sup>	
Describe terms of warrants, options or other rights	
Other compensation <sup>5</sup> Describe	
Total compensation paid 7,200.00	
Check box if the person will or may receive any deferred compensation (describe the terms below)	
<sup>4</sup> Provide the aggregate value of all securities distributed as compensation, <u>excluding</u> options, warrants or other rights exercisable to acq additional securities of the issuer. Indicate the security codes for all securities distributed as compensation, <u>including</u> options, warrants or rights exercisable to acquire additional securities of the issuer. <sup>5</sup> Do not include deferred compensation.	

Ітем 9	- DIRECTORS, EXECUTIV	/E OFFICERS A	ND PROMO	TERS OF THE I	SSUER				
If the	issuer is an investment fund, a	lo not complete Ite	em 9. Procced to	o Item 10.					
Indicat	te whether the issuer is any of the	e following (select a	ll that apply).						
$\checkmark$	Reporting issuer in any jurisdic	tion of Canada							
	Foreign public issuer								
	Wholly owned subsidiary of a r	eporting issuer in a	iny jurisdiction of	f Canada <sup>6</sup>					
	Provide name o	of reporting issuer							
	Wholly owned subsidiary of a fe	oreign public issuer	r <sup>6</sup>						
	Provide name of for	eign public issuer							
	Issuer distributing eligible foreig	on securities only to	permitted clien	ts <sup>7</sup>					
If the	issuer is at least one of the ab	ove, do not compl	ete Item 9(a) –	(c). Proceed to Ite	m 10.				
securitie <sup>7</sup> Check	uer is a wholly owned subsidiary ies that are required by law to be this box if it applies to the curre Refer to the definitions of "eligib If the issuer is none of the abo	e owned by its direc nt distribution even ole foreign security'	ctors, are benefic if the issuer ma and "permitted	cially owned by the de previous distrib client" in Part B(1)	reporting issuer utions of other ty	or the foreig pes of secu	n publ	ic issue	er, respectively.
a) D	Virectors, executive officers a	nd promoters of	the issuer						
	de the following information for ory; otherwise state the country. I						da, sta	te the p	province or
ο	Organization or company nameFamily nameFirst given nameSecondary given nameBusiness location of non-individual or residentail jurisdiction of individualRelationship to issuer (select all that apply)								that
					Province o	r country	D	0	Р
b) P	romoter information		·						
	promoter listed above is not an n Canada, state the province or t		-				-		
0	rganization or company name	Family name	First given name	Secondary given names	Residential jurisdiction of individual	Relatio (select one			
					Province or country	D		C	)
c) R	esidential address of each ir	ndividual							
Compl	lete Schedule 2 of this form pro	oviding the full res	sidential addre	ss for each individ	lual listed in Ite	m 9(a) and	(b) an	d atta	h to the

completed report. Schedule 2 also requires information to be provided about control persons.

# ITEM 10 - CERTIFICATION

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

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

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

## IT IS AN OFFENCE TO MAKE A MISREPRESENTATION IN THIS REPORT

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

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

Full legal name	Wiese	Wolf	
	Family name	First given name	Secondary given names
Title	Chief Executive Officer		
Name of issuer/underwriter/ investment fund manager	Super Nova Petroleum Corp.		
Telephone number	6042218936	Email address wolf@g	oldendawnminerals.com
Signature	/s/ Wolf Wiese	Date 2017	12 07
		YYYY	MM DD

## **ITEM 11- CONTACT PERSON**

Provide the following business contact information for the individual that the securities regulatory authority or regulator may contact with any questions regarding the contents of this report, if different than the individual certifying the report in Item 10.

Same as individual certifying the report

Full legal name	MCLELLAN	LORI		Title Paralegal
	Family name	First given name	Secondary given names	
Name of company	Clark Wilson LLP			
Telephone number 6048917723 Email address LMCLELLAN@CWILSON.COM				

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

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

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

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

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

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