Form 45-106F1 Report of Exempt Distribution

IT IS AN OFFENCE TO MAKE A MISREPRESENTATION IN THIS REPORT

ITEM 1 - REPORT TYPE										
✓ New report										
Amended report If amer	nded, provide filing date	of report that is being am	ended (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										
✓ Issuer (other than an inves	stment fund)									
Underwriter										
ITEM 3 - ISSUER NAME AND OTH	HER IDENTIFIERS									
Provide the following information about the	e issuer, or if the issuer is an in	vestment fund, about the fund.								
Full legal name	Fundamental Application	ons Corp.								
Previous full legal name										
If the issuer's name changed in	the last 12 months, provide mo	ost recent previous legal name.								
Website	www.funappcorp.com		(if applicable)							
If the issuer has a legal entity identifier. pro	ovide below. Refer to Part B of t	he Instructions for the definition	of "legal entity identifier".							
Legal entity identifier										
ITEM 4 - UNDERWRITER INFORM	IATION									
If an underwriter is completing the report, p	orovide the underwriter's full le	gal name and firm National Reg	istration Database (NRD) number.							
Full legal name										
Firm NRD number	Firm NRD number (if applicable)									
If the underwriter does not have a firm NRD number, provide the 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 corresponds to the issuer's primary business activity. For more information on finding the NAICS industry code go to Statistics Canada 's NAICS industry search tool . NAICS industry code 5 4 1 5 1 4
If the issuer is in the mining industry , indicate the stage of operations. This does not apply to issuers that provide services to issuers operating in the mining industry. Select the category that best describes the issuer's stage of operations. Exploration Development Production
b) Number of employees
Number of employees:
c) SEDAR profile number
Does the issuer have a SEDAR profile? ☐ No ☑ Yes If yes, provide SEDAR profile number 0 0 0 3 6 3 0 9 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.
L AII L AB L BC L MB L NB L NL L 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 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 manager informaiton										
Full legal name										
Firm NRD number	(if applicable)									
If the investment fund ma	If the investment fund manager does not have a firm NRD number, provide the head office contact information of the investment fund manager.									
Street address										
Municipality	Province/State Province/State									
Country	Postal code/Zip code									
Telephone number	Website (if applicable)									
b) Type of investment	t fund									
Type of investment fund tha	nt most accurately identifies the issuer (select only one) .									
☐ Money market	☐ Equity ☐ Fixed income									
☐ Balanced	Alternative strategies 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										
	ive Investment of Transferable Securities funds (UCITs Funds) are investment funds regulated by the European Union (EU) ve 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 format	· L L L									
d) Reporting issuer st	YYYY MM DD MM DD tatus of the investment fund									
, 1	orting issuer in any jurisdication of Canada? No Yes									
	of Canada in which the investment fund is a reporting issuer.									
All 🔲	AB BC MB NB NL NT									
□ NS □	NU ON PE QC SK TT									
e) Public listing status	s of the investment fund									
If the investment fund has a	a 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.										
Exchage name	s									
f) Net asset value (NA	AV) of the investment fund									
Select the NAV range of the investment fund as of the date of the most recent NAV calculation (Canadian \$).										
\$0 to under \$5M	\$5M to under \$25M \$25M to under \$100M									
\$100M to under \$500	DM \$500M to under \$1B \$1B or over Date of NAV calculation: YYYY MM DD									

rem 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.									
a) Currency									
Select the currency or currencies in which the distribution was made. All dollar amounts provided in the report must be in Canadian dollars.									
✓ Canadian dollar US dollar Euro Other (describe)									
b) Distribution date(s)									
State the distribution start and end dates. If the report is being filed for securities distributed on only one distribution date, provide the distribution date as both the start and end dates. If the report is being filed for securities distributed on a continuous basis, include the start and end dates for the distribution period covered by the report.									
Start date 2016 11 29									
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 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 CUSIP number

Receiption of security

Number of levent Highest price Total amount

Security code	CUSIP number (if applicable)	Description of security	Number of securities	Single or lowest price	Highest price	Total amount
UBS	36080U10 0	Units consisting of one (1) common share and one-half (1/2) common share purchase warrant		0.1100	0.1100	68,609.97
CMS	36080U10 0	Common shares	909,090.00	0.1100	0.1100	99,999.90

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.

Security code				Underlying security code																										Conversion ratio	Describe other items (if applicable)
							Lowest	Highest																							
W	' N	Т	. (С	M	S	0.3000	0.3000	2018-11-29		311,863 common share purchase warrants, each convertible into a common share of the issuer at an exercise price of \$0.30 until November 29, 2018																				

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 purchasers	Total amount (Canadian \$)
British Columbia	NI 45-106 2.3 [Accredited investor]	2	40,009.97
Alberta	NI 45-106 2.3 [Accredited investor]	1	22,000.00
UHENEC	NI 45-106 2.5 [Family, friends and business associates]	1	6,600.00

British Columbia	2	99,999.90	
	168,609.87		
	Total number of unique purchasers ²	6	

²In 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. If an issuer located outside of Canada completes a distribution in a jurisdiction of Canada, include net proceeds for that jurisdiction of Canada only. For jurisdictions within Canada, state the province or territory, otherwise state the country.

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

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

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

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

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

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

Provide information for each person (as differed in MI 45-106) to when the issuer directly provides, or will private, or y compensation in connection with the distribution. Complete additional copies of this page if more than one person was, or will be, compensated. Indicate whether the any compensation was poid, or will be paid, in connection with the distribution. No Yes If yes, indicate number of persons compensated and registration status indicates whether the person compensated is a registrant. No Yes If the person compensated is a registrant. Full legal name of individual provide the name of the individual. Full legal name of individual provide the name of the individual. Full legal name of individual provide the following information. Full legal name of non-individual provide the following information. Full legal name of non-individual provide the following information. Full legal name of non-individual provide the following information. Full legal name of non-individual provide the following information. Full legal name of non-individual provide the following information. Full legal name of non-individual provide the following information. Full legal name of non-individual provide the following information. Full legal name of non-individual provide the following information. Full legal name of non-individual provide the following information. Full legal name of non-individual provide the following information. Full legal name of non-individual provide the following information. Full legal name of non-individual provide the following information. Full legal name of non-individual provide the following information. Full legal name of non-individual provide the following information. Full legal name of non-individual provide the following information. Full legal name of non-individual provide the following information. Full legal name of non-individual provide the following information. Full legal name of non-individual provide the following information. Full legal name of non-indi	TEM 8 - COMPENSATION INFORMATION
Name of person compensated and registration status Indicate whether the person compensated as registrant. No Yes If the person compensated is a registrant. No Yes If the person compensated is an individual, provide the name of the individual. Family name First given name Secondary given names If the person compensated is an an individual, provide the following information. Full legal name of individual PI Financial Corp. First given name Secondary given names If the person compensated is not an individual, provide the following information. Full legal name of non-individual PI Financial Corp. Firm NRD number Indicate whether the person compensated focilitated the distribution through of funding portal or an internet-based portal. No Yes	
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 PI Financial Corp. If the person compensated is not an individual, provide the following information. Full legal name of non-individual PI Financial Corp. If I Financial Corp. I Financial Corp. If I Financial Corp. I Financial Corp. If I Financial Corp. If I Financial Corp. I Financial Corp. If I Financial Corp. I Financial Corp. If I Financial Corp. I Financial	Indicate whether any compensation was paid, or will be paid, in connection with the distribution.
If the person compensated is a registrant.	No ✓ Yes If yes, indicate number of persons compensated. 1
If the person compensated is an individual Family name First given name Secondary given names If the person compensated is not an individual Family name First given name Secondary given names If the person compensated is not an individual Pi Financial Corp. Full legal name of non-individual Pi Financial Corp. Indicate whether the person compensated facilitated the distribution through a funding portal or an intermet-based portal. V \text{ Va Ves} Postal code/Zip code V \text{ Va Ves} Postal code/Zip code V \text{ Va Ves} Municipality Vancouver Province/State British Columbia Postal code/Zip code V VG SN1 Vancouver Postal code/Zip code V \text{ VG SN1 Vancouver Vancouver Postal code/Zip code V \text{ VG SN1 Vancouver Volume Vancouver Vanco	
Full legal name of individual Family name First given name Secondary given names First given name Secondary given names First given name First given name Secondary given names First given name Secondary given names Full legal name of non-individual PI Financial Corp. Film NRD number Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal. No	Indicate whether the person compensated is a registrant. No Yes
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 PI Financial Corp.	If the person compensated is an individual, provide the name of the individual.
Full legal name of non-individual PI Financial Corp. Firm NRD number	Full legal name of individual
Full legal name of non-individual PI Financial Corp. Firm NRD number	Family name First given name Secondary given names
Firm NRD number	
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	Full legal name of non-individual PI Financial Corp.
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 [1900 - 666 Burrard Street] Municipality Vancouver	Firm NRD number (if applicable)
Street address	Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal. Ves
Street address Municipality Country Canada Postal code/Zip code Frovince/State Postal code/Zip code Frovince/State Frovince/State Fritish Columbia Postal code/Zip code Frode Frode	b) Business contact information
Municipality Vancouver Province/State British Columbia Country Canada Postal code/Zip code V6C 3N1 Email address jipocke@pifinancial.com Telephone number 6046642900 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 8(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 800.80 Security codes Security codes Security code 1 Security code 2 Security code 3 Security codes Security codes or anon-individual compensation with the discretable as compensation. Whereby each common share purchase warrant is exercisable at a price of \$0.30 into a common share in the capital of the issuer until November 29, 2018 Other compensation and 800.80 Check box if the person will or may receive any deferred compensation (describe the terms below)	If a firm NRD number is not provided in Item 8 (a), provide the business contact information of the person being compensated.
Country Email address	Street address 1900 - 666 Burrard Street
Email address jlocke@pifinancial.com Telephone number 6046642900 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 8(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	Municipality Vancouver Province/State British Columbia
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	Country Canada Postal code/Zip code V6C 3N1
Indicate the person's relationship with the issuer or investment fund manager (select all that apply). Refer to the meaning of "connected" in Part 8(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 Employee of the issuer or investment fund manager The 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 800.80 Security codes Security code 1 Security code 2 Security code 3 Security codes Security code 1 Security code 3 Security code 3 Security code 1 Security code 3 Security code 3 Security code 4 Security code 5 Security code 5 Security code 6 Security code 7 Security code 8 Security code 9 Security c	Email address jlocke@pifinancial.com Telephone number 6046642900
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	c) Relationship to issuer or investment fund manager
Cash commissions paid 800.80 Value of all securities distributed as compensation 4 Describe terms of warrants, options or other rights compensation, whereby each common share purchase warrants is exercisable at a price of \$0.30 into a common share in the capital of the issuer until November 29, 2018 Other compensation paid 800.80 Check box if the person will or may receive any deferred compensation (describe the terms below)	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
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 Value of all securities distributed as compensation ⁴ Describe terms of warrants, options or other rights Other compensation ⁵ Describe Total compensation paid Check box if the person will or may receive any deferred compensation (describe the terms below)	
distributed as compensation ⁴ Describe terms of warrants, options or other rights Total compensation paid Check box if the person will or may receive any deferred compensation (describe the terms below)	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.
Compensation, whereby each common share purchase warrant is exercisable at a price of \$0.30 into a common share in the capital of the issuer until November 29, 2018 Other compensation Describe	distributed as
Total compensation paid 800.80 Check box if the person will or may receive any deferred compensation (describe the terms below)	compensation, whereby each common share purchase warrant is exercisable at a price of \$0.30 into a common share in the capital
Check box if the person will or may receive any deferred compensation (describe the terms below)	Other compensation ⁵ Describe
	Total compensation paid 800.80
⁴ Provide the aggregate value of all securities distributed as compensation excluding options, warrants or other rights exercisable to acquire	Check box if the person will or may receive any deferred compensation (describe the terms below)
⁴ Provide the aggregate value of all securities distributed as compensation, excluding options, warrants or other rights exercisable to acquire	
additional securities of the issuer. Indicate the security codes for all securities distributed as compensation, including options, warrants or other	⁴ Provide the aggregate value of all securities distributed as compensation, excluding options, warrants or other rights exercisable to acquire

⁵Do not include deferred compensation.

TEM 9 - DIRECTORS, EXECUT	IVE OFFICERS A	AND PROMO	TERS OF THE IS	SSUER				
If the issuer is an investment fund,	do not complete I	tem 9. Procced to	tem 10.					
Indicate whether the issuer is any of t	he following (select	all that apply).						
✓ Reporting issuer in any jurisd	iction of Canada							
Foreign public issuer								
Wholly owned subsidiary of a	reporting issuer in	any jurisdiction of	Canada ⁶					
Provide name	of reporting issuer							
Wholly owned subsidiary of a	foreign public issue	er ⁶						
Provide name of f	oreign public issuer							
Issuer distributing eligible for	eign securities only	to permitted clien	ts ⁷				J	
If the issuer is at least one of the a	bove, do not comp	olete Item 9(a) –	(c). Proceed to Ite	m 10.				
⁶ An issuer is a wholly owned subsidia securities that are required by law to a ⁷ Checck this box if it applies to the cu clients. Refer to the definitions of "elig	be owned by its dire rrent distribution ev	ectors, are benefic en if the issuer m	rially owned by the ade previous distri	reporting issuer butions of other t	or the foreig types of secu	ın publi	ic issuer, resp	ectively.
If the issuer is none of the a	bove, check this bo	ox and complete	Item 9(a) - (c).					
a) Directors, executive officers	and promoters of	f the issuer						
Provide the following information for territory; otherwise state the country						da, stat	te the province	? or
Organization or company name	Organization or company name First given or company name First given name First given name Secondary given names Number of non-individual or residentail jurisdiction of individual individual apply) Relationship to issuer (select all that apply)							
				Province o	r country	D	O P	
b) Promoter information								
If the promoter listed above is not an individual, provide the following information for each director and executive officer of the promoter. For locations within Canada, state the province or territory; otherwise state the country. For "Relationship to promoter", "D" – Director, "O" – Executive Officer.								
Organization or company name	First given reganization or company name Family name rame Family name Relationship to promoter names Residential jurisdiction of individual Relationship to promoter (select one or both if applicable))		
				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

Telephone number 6046122111

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	Moore	Bradley			
	Family name	First given name		Secondary given names	
Title	Chief Executive Officer/Director	or			
Name of issuer/underwriter/ investment fund manager	Fundamental Applications Cor	p .			
Telephone number	5145619091	Email address	bmoore@theforo.com		
Signature	Bradley Moore	Date	2016	12	08
		•	YYYY	MM	DD

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 Francis Janet Family name First given name Secondary given names Name of company Keystone Corporate Services Inc.

Notice - Collection and use of personal information

Email address janet@keystonecorp.ca

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.