Form 45-106F1 Report of Exempt Distribution

ITEM 1 - REPORT TYPE					
□ New report					
Amended report If amended, provide filing date of report that is being amended 2018 01 04 (YYYY-MM-DD)					
ITEM 2 - PARTY CERTIFYING THE REPORT					
Indicate the party certifying the report (select only one). For guidance reg Instrument 81-106 Investment Fund Continuous Disclosure and the comp	_	vestment fund, refer to section 1.1 of National			
☐ Investment fund issuer					
Issuer (other than an investment fund)					
☐ Underwriter					
Item 3 - Issuer Name and Other Identifiers					
Provide the following information about the issuer, or if the issuer is an in	vestment fund, about the fund.				
Full legal name The Green Organic Du	tchman Holdings Ltd.				
Previous full legal name					
If the issuer's name changed in the last 12 months, provide most	recent previous legal name.				
Website https://tgod.ca	(if applicab	le)			
If the issuer has a legal entity identifier provide below. Refer to Part B of	the Instructions for the definition	of "legal entity identifier".			
Legal entity identifier					
If two or more issuers distributed a single security, provide the full legal n	ame(s) of the co-issuer(s) other th	nan the issuer named above.			
Full legal name(s) of co-issuer(s)	(if applicabl	le)			
Item 4 - Underwriter Information					
If an underwriter is completing the report, provide the underwriter's full le	egal 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 head of	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 in your reasonable judgment most closely corresponds to the issuer's primary business activity.				
NAICS industry code 5 5 1 1 1 3				
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				
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 ✓ Yes If yes, provide SEDAR profile number 0 0 0 4 0 6 4 4				
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 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	ITEM 6 - INVESTMENT FUND ISSUER INFORMATION					
If the issuer is an inves	tment fund, provide the following information.					
a) Investment fund ma	anager 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 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)					
	h of the following apply to the investment fund .					
	n other investment fund issuers					
☐ Is a UCITs Fund¹						
¹ Undertaking for the Collec (EU) directives that allow co	tive Investment of Transferable Securities funds (UCITs Funds) are investment funds regulated by the European Union ollective investment schemes to operate throughout the EU on a passport basis on authorization from one member state.					
c) Date of formation a	nd financial year-end of the investment fund					
Date of format	tion Financial year-end 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 T					
e) Public listing status of the investment fund						
If the investment fund has a	CUSIP number, provide below (first 6 digits only)					
CUSIP number						
If the investment fund is publicly listed, provide the name of the exchange on which the investment fund's securities primarily trade. Provide only the name of an exchange and not a trading facility such as, for example, an automated trading system.						
Exchange name						
f) Net asset value (NAV) 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 S500M to under \$1B S1B 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.

	caute 2 of the reports									
a)	Currency									İ
Sele	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)									İ
as l	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 da	2017	12	15	End date	2017	12	15		
		YYYY	MM	DD		YYYY	MM	DD		

c) Detailed purchaser information

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

d) Types of 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 \$		
8	Securit code	, ,	CUSIP number (if applicable)	Description of security	Number of securities	Single or lowest price	Highest price	Total amount
L	В	S		Units, each consisting of one common share and one-half of one share purchase warrant. Each whole warrant is exercisable to purchase one common share until the Expiry Date.	6,807,623.00	1.6500		11,232,577.95

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.

ex	onvertibe change curity o	able		derlyi			se price idian \$)	Expiry date (YYYY- MM-DD)	Conversion ratio	Describe other items (if applicable)
						Lowest	Highest			
W	N	Т	С	M	S	3.0000		2021-02-28	1:1	Expiry date is the earlier of 36 months form the date the Issuer's common shares are listed for trading on a national Canadian or U.S. securities exchange or trading system and Feb. 28, 2021, whichever is earlier.

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 invitation.

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

Province or country	Exemption relied on	Number of unique ^{2g} purchasers	Total amount (Canadian \$)
Alberta	NI 45-106 2.3 [Accredited investor]	20	1,218,030.00

Alberta	NI 45-106 2.5 [Family, friends and business associates]	1	1,650.00
British Columbia	NI 45-106 2.3 [Accredited investor]	39	1,164,553.50
British Columbia	NI 45-106 2.5 [Family, friends and business associates]	2	13,249.50
British Columbia	NI 45-106 2.9(1) [Offering memorandum] (BC, NL)	2	20,014.50
Manitoba	NI 45-106 2.3 [Accredited investor]	1	115,500.00
New Brunswick	NI 45-106 2.3 [Accredited investor]	18	503,877.00
New Brunswick	NI 45-106 2.5 [Family, friends and business associates]	1	4,950.00
Nova Scotia	NI 45-106 2.3 [Accredited investor]	7	97,251.00
Ontario	NI 45-106 2.3 [Accredited investor]	89	3,135,617.10
Ontario	NI 45-106 2.5 [Family, friends and business associates]	17	370,814.40
Ontario	NI 45-106 2.9(2.1) [Offering memorandum] (AB, SK, ON, QC, NB, NS)	15	145,289.10
Québec	NI 45-106 2.3 [Accredited investor]	20	1,287,735.90
Québec	NI 45-106 2.5 [Family, friends and business associates]	11	123,218.70
Saskatchewan	NI 45-106 2.3 [Accredited investor]	1	14,850.00
Australia	NI 45-106 2.9(1) [Offering memorandum] (BC, NL)	1	9,900.00
Austria	NI 45-106 2.3 [Accredited investor]	2	10,890.00
Barbados	NI 45-106 2.3 [Accredited investor]	1	99,825.00
Bermuda	NI 45-106 2.3 [Accredited investor]	2	115,500.00
Bulgaria	NI 45-106 2.3 [Accredited investor]	1	82,500.00
Cayman Islands	NI 45-106 2.3 [Accredited investor]	1	33,000.00
Denmark	NI 45-106 2.3 [Accredited investor]	1	19,800.00
Finland	NI 45-106 2.3 [Accredited investor]	1	9,900.00
France	NI 45-106 2.3 [Accredited investor]	1	9,900.00
Germany	NI 45-106 2.3 [Accredited investor]	4	62,040.00
Hong Kong	NI 45-106 2.3 [Accredited investor]	3	617,100.00
Japan	NI 45-106 2.3 [Accredited investor]	1	11,550.00
Monaco	NI 45-106 2.3 [Accredited investor]	1	34,980.00
Netherlands	NI 45-106 2.3 [Accredited investor]	1	165,000.00
Norway	NI 45-106 2.3 [Accredited investor]	1	7,425.00
Saudi Arabia	NI 45-106 2.3 [Accredited investor]	1	8,250.00
Spain	NI 45-106 2.3 [Accredited investor]	1	99,000.00
Sweden	NI 45-106 2.3 [Accredited investor]	12	236,610.00
Taiwan, Province Of China	NI 45-106 2.3 [Accredited investor]	1	16,500.00
Thailand	NI 45-106 2.3 [Accredited investor]	2	206,250.00
United Arab Emirates	NI 45-106 2.3 [Accredited investor]	1	24,750.00
United Kingdom	NI 45-106 2.3 [Accredited investor]	2	148,500.00
United States	NI 45-106 2.3 [Accredited investor]	47	945,278.40

New Brunswick	NI 45-106 2.9(2.1) [Offering memorandum] (AB, SK, ON, QC, NB, NS)	3	31,298.85
Sweden	NI 45-106 2.9(1) [Offering memorandum] (BC, NL)	2	10,230.00
	11,232,577.95		
	Total number of unique purchasers ^{2b}	338	

^{2a} 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	

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)
1.	Offering Memorandum	2017-10-20	Y	2017-11-27
2.	Investor Presentation	2017-09-12	Y	2017-11-27

^{2b} 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 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 wi the distribution. Complete additional copies of this page if more than one person was, or will be, compensated.	h
Indicate whether any compensation was paid, or will be paid, in connection with the distribution.	
No ✓ Yes If yes, indicate number of persons compensated. 13	

a) Name of person comp	pensated and regi	stration status						
Indicate whether the person co	mpensated is a regis	trant.	✓ No	Yes				
If the person compensated is a	n individual, provide	the name of the indivi	dual.					
Full legal name of indi	vidual							
		Family name	Fir	st given name		Secondary given names		
If the person compensated is n	ot an individual, prov	ride the following infor	mation.					
Full legal name	of non-individual	Regent Park Secu	ırities Ltd.					
F	Firm NRD number				(if appli	cable)		
Indicate whether the person co	mpensated facilitate	d the distribution throu	ıgh a funding poi	rtal or an intern	— net-based p	ortal. Ves		
b) Business contact info	rmation							
If a firm NRD number is not pr	ovided in Item 8 (a),	provide the business co	ontact informatio	n of the person	being com	pensated.		
Street address	2 Gloucester Gat	e Lodges, Outer Cir	cle, Regents F	ark				
Municipality	London			Provinc	ce/State			
Country	United Kingdom	Kingdom Postal code/Zip code NW14HA						
Email address	matt.hocker@rps	ec.co.uk		Telephone	number	442032867507		
c) Relationship to issuer	or investment fun	d manager	1					
Indicate the person's relationsh the Instructions and the meani	ng of "control" in sec	tion 1.4 of NI 45-106 f		of completing th	is section.	ning of "connected" in Part B(2) of er than an investment fund)		
Director or officer of	the investment fund	or investment fund ma	anager 🔲	Employee of t	he issuer c	or investment fund manager		
✓ None of the above			_					
d) Compensation details								
Provide details of all compensa Canadian dollars. Include cash	tion paid, or to be pa commissions, securit uch as clerical, printin	es-based compensation g, legal or accounting	n, gifts, discounts services. An issue	s or other comp er is not require	ensation. D d to ask for	ribution. Provide all amounts in to not report payments for services details about, or report on, internal		
Cash commissions p	aid			Securit	y code 1	Security code 2 Security code 3		
Value of all securiti distributed as compensation	52.6	94.40	Security codes		B S			
Describe	terms of warrants, o	otions or other rights	half of one sh	are purchase ereof to purch	e warrant. ase one c	e common share and one- Each whole warrant entitles common share at a price of 021.		
Other compensation	on ⁵	Describe						
Total compensation pa	aid 52,6	94.40						
Check box if the pe	erson will or may rec	eive any deferred con	npensation (desc	cribe the terms	below)			
⁴ Provide the aggregate value additional securities of the iss rights exercisable to acquire a ⁵ Do not include deferred comp	uer. Indicate the sec additional securities o	urity codes for all sect						

a) Name of person comp	pensated and regis	stration status							
Indicate whether the person co	mpensated is a regist	rant.	✓ No		Yes				
If the person compensated is a	n individual, provide i	the name of the indivi	dual.						
Full legal name of indi	vidual Byrne		Seamus			N	1urphy		
		Family name	Fir	st given na	ame		Secondary given names		
If the person compensated is n	ot an individual, prov	ide the following infor	rmation.						
Full legal name	of non-individual								
F	Firm NRD number					(if appli	cable)		
Indicate whether the person co	Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal. Ves								
b) Business contact info	rmation								
If a firm NRD number is not pr	ovided in Item 8 (a), p	provide the business co	ontact informatio	n of the p	erson be	ing com	pensated.		
Street address	2682 Rothesay R	oad							
Municipality	Rothesay			Pr	ovince/	State	New Brunswick		
Country	Canada			Postal co	ode/Zip	code	E2H2K9		
Email address	seamus.byrne@h	alifaxcitrus.ca		Teleph	none nu	mber	9024415757		
c) Relationship to issuer	or investment fund	d manager							
Indicate the person's relationsh the Instructions and the meani	ng of "control" in sect	tion 1.4 of NI 45-106 f		f complet	ting this s	section.	ning of "connected" in Part B(2) of er than an investment fund)		
<u> </u>		-				,	·		
Director or officer of	the investment fund o	or investment fund ma	anager	Employe	ee of the	issuer c	or investment fund manager		
✓ None of the above									
d) Compensation details	3								
Canadian dollars. Include cash	commissions, securiti Ich as clerical, printin	es-based compensatic g, legal or accounting	on, gifts, discounts services. An issue	s or other er is not re	compens equired to	sation. D o ask for	ribution. Provide all amounts in To not report payments for services Todetails about, or report on, internal		
Cash commissions pa	aid			[9	Security co	nde 1	Security code 2 Security code 3		
Value of all securition distributed as compensation	51.5	93.85	Security codes		U B	S			
Describe	terms of warrants, op	otions or other rights	half of one sh	are purc ereof to p	chase w	arrant. e one c	e common share and one- Each whole warrant entitles common share at a price of 021.		
Other compensation	on ⁵	Describe							
Total compensation pa	51,59	93.85							
Check box if the pe	erson will or may rece	eive any deferred con	npensation (desc	ribe the t	erms bel	ow)			
⁴ Provide the aggregate value additional securities of the iss rights exercisable to acquire a ⁵ Do not include deferred comp	uer. Indicate the secundational securities of	urity codes for all sect							

a) Name of person com	pensated and regis	stration status						
Indicate whether the person co	mpensated is a regist	rant.	✓ No)		Yes		
If the person compensated is a	n individual, provide	the name of the inc	dividual.					
Full legal name of indi	vidual Nerell		Ande	ers				
		Family name	•	Firs	t given n	name	<u> </u>	Secondary given names
If the person compensated is n	ot an individual, prov	ide the following ir	formation.					
Full legal name	e of non-individual							
F	Firm NRD number						(if appl	licable)
Indicate whether the person co	mpensated facilitated	I the distribution th	rough a fun	ding port	tal or ar	n interne	et-based p	oortal. Ves
b) Business contact info	rmation							
If a firm NRD number is not pr	ovided in Item 8 (a), p	provide the busines	s contact inf	formation	of the	person l	being com	npensated.
Street address	81/80 Land & Hoเ	use, Seewalee 1						
Municipality	Chalong Muang				F	Province	e/State	Phuke
Country	Thailand			Р	ostal o	code/Zi	p code	83130
Email address	anerell@hotmail.d	com			Telep	hone n	number	66876706628
c) Relationship to issuer	or investment fun	d manager						
the Instructions and the mean	ing of "control" in sect	tion 1.4 of NI 45-10		rposes of	comple	eting thi	s section.	nning of "connected" in Part B(2) of
Connect with the iss	uer or investment fun	id manager		Ш	Insider	of the is	ssuer (oth	ner than an investment fund)
Director or officer of	the investment fund	or investment fund	manager		Employ	ee of th	ne issuer o	or investment fund manager
None of the above								
d) Compensation details	3							
Canadian dollars. Include cash	commissions, securiti uch as clerical, printin	es-based compenso g, legal or account	ation, gifts, a ing services.	liscounts An issuer	or othe r is not	r compe required	nsation. E I to ask fo	tribution. Provide all amounts in Do not report payments for services r details about, or report on, internal
Cash commissions p				·		Security		Security code 2 Security code 3
Value of all securiti distributed as compensation	16.7	54.40	Security	codes		U E		decumy code 2
Describe	terms of warrants, or	otions or other righ	ts					
Other compensation	on ⁵	Describ	half of the ho	one sha lder thei	are pui reof to	rchase purcha	warrant.	e common share and one- Each whole warrant entitles common share at a price of 2021.
Total compensation pa	aid 46,75	54.40						
Check box if the pe	erson will or may rec	eive any deferred	compensation	on (descr	ribe the	terms b	elow)	
⁴ Provide the aggregate value additional securities of the iss rights exercisable to acquire a ⁵ Do not include deferred com	uer. Indicate the second additional securities o	urity codes for all s						ghts exercisable to acquire <u>ling</u> options, warrants or other

a) Name of person comp	pensated and regis	tration status						
Indicate whether the person co	mpensated is a regist	rant.	✓ No		Yes			
If the person compensated is a	n individual, provide i	he name of the indivi	dual.					
Full legal name of indiv	vidual Biertumple		Jens					
		Family name	•	First given na	ame	Secondary given names		
If the person compensated is n	ot an individual, prov	ide the following infor	rmation.					
Full legal name	of non-individual							
F	irm NRD number				(if app	plicable)		
Indicate whether the person co	mpensated facilitated	the distribution thro	ugh a funding	portal or an	internet-based	portal. Ves		
b) Business contact info	rmation							
If a firm NRD number is not pr	ovided in Item 8 (a), ¡	provide the business co	ontact informa	tion of the p	person being co	mpensated.		
Street address	Korporationsweg	14						
Municipality	Wilen bei Wollera	u		Pi	rovince/State			
Country	Switzerland	rland Postal code/Zip code 8832						
Email address	jes@lightstreamc	apital.net	j	Teleph	hone number	41788104323		
c) Relationship to issuer	or investment fund	d manager	-					
Indicate the person's relationsh the Instructions and the meani						raning of "connected" in Part B(2) of		
Connect with the issu	uer or investment fun	d manager		Insider	of the issuer (ot	ther than an investment fund)		
Director or officer of	the investment fund o	or investment fund ma	anager [Employe	ee of the issuer	or investment fund manager		
None of the above								
d) Compensation details	,							
Canadian dollars. Include cash	commissions, securiti Ich as clerical, printin	es-based compensatic g, legal or accounting	on, gifts, discou services. An is	nts or other suer is not r	compensation. equired to ask f	istribution. Provide all amounts in Do not report payments for services for details about, or report on, internal		
Cash commissions pa					Security code 1	Security code 2 Security code 3		
Value of all securition distributed as compensation	10.3	68.00	Security codes		U B S	Security code 2 Security code 3		
Describe	terms of warrants, op	otions or other rights	half of one the holder	share pure thereof to p	chase warran	ne common share and one- t. Each whole warrant entitles common share at a price of 2021.		
Other compensation	nn ⁵	Describe						
Total compensation pa	49,30	68.00						
Check box if the pe	erson will or may reco	eive any deferred con	npensation (de	escribe the t	terms below)			
⁴ Provide the aggregate value additional securities of the iss rights exercisable to acquire a ⁵ Do not include deferred comp	uer. Indicate the secundational securities of	irity codes for all sec				ights exercisable to acquire <u>ding</u> options, warrants or other		

a) Name of person comp	pensated and regis	stration status					
Indicate whether the person co	mpensated is a regist	rant.	☐ No	\checkmark	Yes		
If the person compensated is a	n individual, provide i	the name of the indivi	dual.				
Full legal name of indi	vidual Lucas		Derek				
		Family name	F	First given na	ame		Secondary given names
If the person compensated is n	ot an individual, prov	ide the following infor	mation.				
Full legal name	of non-individual						
F	Firm NRD number				(if	applio	cable)
Indicate whether the person co	mpensated facilitated	the distribution throu	ıgh a funding p	ortal or an	internet-ba	sed po	ortal. Ves
b) Business contact info	rmation						
If a firm NRD number is not pr	ovided in Item 8 (a), p	provide the business co	ontact informat	ion of the p	person being	comp	pensated.
Street address	3962 Borden Stre	et, Ste. 101					
Municipality	Victoria			Р	rovince/Sta	ate	British Columbia
Country	Canada			Postal c	ode/Zip co	de	V8P3H8
Email address	derek.lucas@sun	life.com		Telepl	hone numb	oer	2503851471
c) Relationship to issuer	or investment fund	d manager					
the Instructions and the meani	ng of "control" in sect	tion 1.4 of NI 45-106 f		of comple	ting this sec	tion.	ning of "connected" in Part B(2) of
Connect with the issu	uer or investment fun	d manager		Insider	or the issue	(otne	er than an investment fund)
Director or officer of	the investment fund of	or investment fund ma	anager	Employ	ee of the iss	uer o	r investment fund manager
None of the above							
d) Compensation details	3						
	commissions, securiti Ich as clerical, printin	es-based compensatio g, legal or accounting	n, gifts, discour services. An iss	nts or other uer is not r	compensati equired to a	ion. Do sk for	ribution. Provide all amounts in o not report payments for services details about, or report on, internal
Cash commissions p	aid				Security code	1	Security code 2 Security code 3
Value of all securition distributed as compensation	3 0	60.00	Security codes			S	3000000
Describe	terms of warrants, op	otions or other rights	of one share	e purchase of to purc	se warrant. chase one	Each comr	common share and one-half n whole warrant entitles the mon share at a price of 021.
Other compensation	on ⁵	Describe					
Total compensation pa	3,96	60.00					
Check box if the pe	erson will or may rece	eive any deferred con	npensation (de	scribe the	terms below	')	
⁴ Provide the aggregate value additional securities of the iss rights exercisable to acquire a ⁵ Do not include deferred comp	uer. Indicate the secundational securities of	urity codes for all sect					

a) Name of person comp	pensated and regis	stration status				
Indicate whether the person co	mpensated is a regist	rant.	✓ No	Yes	5	
If the person compensated is a	n individual, provide	the name of the indivi	dual.			
Full legal name of indi	vidual Kreutzer		Donovan			
		Family name	Firs	st given name	<u>'</u>	Secondary given names
If the person compensated is n	ot an individual, prov	ide the following infor	mation.			
Full legal name	of non-individual					
F	Firm NRD number				(if appli	cable)
Indicate whether the person co	mpensated facilitated	the distribution throu	ıgh a funding por	tal or an inter	rnet-based p	ortal. Ves
b) Business contact info	rmation					
If a firm NRD number is not pr	ovided in Item 8 (a), p	provide the business co	ontact information	n of the perso	n being com	pensated.
Street address	251195 Welland \	Vay				
Municipality	Calgary			Provir	nce/State	Alberta
Country	Canada		F	Postal code/	Zip code	T3R1L3
Email address				Telephone	e number	
c) Relationship to issuer	or investment fun	d manager				
the Instructions and the meani	ng of "control" in sect	tion 1.4 of NI 45-106 f		f completing t	this section.	ning of "connected" in Part B(2) of
Connect with the issu	uer or investment fun	nd manager		Insider of the	e issuer (oth	er than an investment fund)
Director or officer of	the investment fund	or investment fund ma	anager	Employee of	f the issuer o	or investment fund manager
None of the above						
d) Compensation details						
Canadian dollars. Include cash	commissions, securiti Ich as clerical, printin	es-based compensatio g, legal or accounting	n, gifts, discounts services. An issue	or other com r is not requir	pensation. D red to ask for	ribution. Provide all amounts in to not report payments for services details about, or report on, internal
Cash commissions pa			·		rity code 1	Security code 2 Security code 3
Value of all securition	70	86.00	Security codes	U	B S	Security code 2 Security code 3
Describe	terms of warrants, op	otions or other rights	of one share	ourchase wa to purchas	arrant. Eac e one com	common share and one-half h whole warrant entitles the mon share at a price of 021.
Other compensation	on ⁵	Describe				
Total compensation pa	7,98	86.00				
Check box if the pe	erson will or may rec	eive any deferred con	npensation (desc	ribe the terms	s below)	
⁴ Provide the aggregate value additional securities of the iss rights exercisable to acquire a ⁵ Do not include deferred comp	uer. Indicate the secondditional securities o	urity codes for all sect				

a) Name of person comp	pensated and regis	stration status							
Indicate whether the person co	mpensated is a regis	trant.	✓ No	Yes	s				
If the person compensated is a	n individual, provide	the name of the indivi	dual.						
Full legal name of indi	vidual								
		Family name	Fir	rst given name	<u>'</u>	Secondary given names			
If the person compensated is n	•								
Full legal name	of non-individual	Darringer Enterpr	ses Ltd.						
F	Firm NRD number				(if appli	cable)			
Indicate whether the person co	Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal.								
b) Business contact info	rmation								
If a firm NRD number is not pr	ovided in Item 8 (a),	provide the business c	ontact informatio	on of the perso	on being com	pensated.			
Street address	720 - 903 8th Ave	enue SW							
Municipality	Calgary			Provi	nce/State	Alberta			
Country	Canada			Postal code	e/Zip code	T2P0P7			
Email address	jjscott@postellen	ergy.com		Telephon	e number	4032326252			
c) Relationship to issuer	or investment fun	d manager	<u> </u>						
						ning of "connected" in Part B(2) of			
the Instructions and the meani	-		for the purposes o						
Connect with the issu	uer or investment für	nd manager	Ц	Insider of th	ie issuer (othe	er than an investment fund)			
Director or officer of	the investment fund	or investment fund ma	anager	Employee o	of the issuer o	r investment fund manager			
✓ None of the above									
d) Compensation details									
Canadian dollars. Include cash incidental to the distribution, su	commissions, securiti Ich as clerical, printin	es-based compensation g, legal or accounting	on, gifts, discount services. An issu	s or other con er is not requi	npensation. D ired to ask for	ribution. Provide all amounts in o not report payments for services details about, or report on, internal			
allocation arrangements with the		or employees of a non-	-individual comp	ensated by the	e issuer.				
Cash commissions pa	aid			Secu	urity code 1	Security code 2 Security code 3			
Value of all securition distributed as compensation	12/17	12.60	Security codes	U	B S				
Describe	terms of warrants, o	otions or other rights	half of one sh	nare purchasereof to purc	se warrant. chase one c	E common share and one- Each whole warrant entitles common share at a price of 021.			
Other compensation	on ⁵	Describe							
Total compensation pa	aid 134,7	12.60							
Check box if the pe	erson will or may rec	eive any deferred cor	npensation (desc	cribe the term	ns below)				
⁴ Provide the aggregate value additional securities of the iss rights exercisable to acquire a ⁵ Do not include deferred comp	uer. Indicate the sec additional securities o	urity codes for all sec							

a) Name of person comp	pensated and regis	stration status				
Indicate whether the person co	mpensated is a regist	rant.	✓ No		Yes	
If the person compensated is a	n individual, provide	the name of the indivi	dual.			
Full legal name of indiv	vidual Lowes		Tyler			Andrew
		Family name	•	First given na	ame	Secondary given names
If the person compensated is no	ot an individual, prov	ide the following infor	mation.			
Full legal name	of non-individual					
F	irm NRD number				(if ap	pplicable)
Indicate whether the person co	mpensated facilitated	I the distribution throu	igh a funding	portal or an	internet-based	d portal. Ves
b) Business contact info	rmation					
If a firm NRD number is not pr	ovided in Item 8 (a), p	provide the business co	ontact inform	ation of the p	person being co	ompensated.
Street address	Suite 904, 1189 N	lelville Street				
Municipality	Vancouver			Pi	rovince/State	British Columbia
Country	Canada			Postal c	ode/Zip code	V6E4T8
Email address	tyler@electraston	e.com		Teleph	none numbe	f 6043295097
c) Relationship to issuer	or investment fun	d manager				
the Instructions and the meani	ng of "control" in sect	tion 1.4 of NI 45-106 f		es of comple	ting this sectio	
Connect with the issu	uer or investment fun	d manager	L	Insider o	of the issuer (d	other than an investment fund)
Director or officer of	the investment fund	or investment fund ma	anager	Employe	ee of the issue	er or investment fund manager
None of the above						
d) Compensation details	3					
Canadian dollars. Include cash	commissions, securiti Ich as clerical, printin	es-based compensatio g, legal or accounting	n, gifts, discou services. An is	unts or other ssuer is not r	compensation compensation	distribution. Provide all amounts in Do not report payments for services for details about, or report on, internal
Cash commissions pa	aid				Security code 1	Security code 2 Security code 3
Value of all securition distributed as compensation	17 1	60.00	Security code		U B S	
Describe	terms of warrants, op	otions or other rights	half of one the holder	share pure thereof to p	chase warrai	one common share and one- nt. Each whole warrant entitles e common share at a price of , 2021.
Other compensation	on⁵	Describe				
Total compensation pa	17,10	60.00				
Check box if the pe	erson will or may rec	eive any deferred con	npensation (d	lescribe the t	terms below)	
⁴ Provide the aggregate value additional securities of the iss rights exercisable to acquire a ⁵ Do not include deferred comp	uer. Indicate the secondditional securities o	urity codes for all secu				rights exercisable to acquire uding options, warrants or other

a) Name of person com	pensated and regis	stration status							
Indicate whether the person co	ompensated is a regist	rant.	✓ No		Yes				
If the person compensated is a	n individual, provide i	the name of the indivi	idual.						
Full legal name of indi	vidual Powell		Tyler			R	loss		
		Family name		First given	name	<u>'</u>	Seconda	ary given na	ames
If the person compensated is n	ot an individual, prov	ide the following info	rmation.						
Full legal name	e of non-individual								
F	Firm NRD number					(if appli	cable)		
Indicate whether the person co	ompensated facilitated	the distribution thro	ugh a funding	portal or a	n internet-	based p	ortal.	✓ No	Yes
b) Business contact info	rmation								
If a firm NRD number is not provided in Item 8 (a), provide the business contact information of the person being compensated.									
Street address 2631 Terrace Avenue									
Municipality	North Vancouver			ı	Province/	State	British Col	umbia	
Country	Canada			Postal	code/Zip	code	V7R1B5		
Email address	tyler@powercapit	alpartners.com		Tele	phone nu	mber	77899480	50	
c) Relationship to issue	or investment fund	d 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 o	or investment fund m	anager [Emplo	yee of the	issuer c	or investment	fund man	ager
✓ None of the above			_	_					
d) Compensation details	<u> </u>								
Provide details of all compensa Canadian dollars. Include cash incidental to the distribution, so allocation arrangements with t	commissions, securiti uch as clerical, printin	es-based compensation g, legal or accounting	on, gifts, disco services. An i	unts or othe ssuer is not	er compens required to	sation. D o ask for	o not report p	ayments	for services
Cash commissions p	aid				Security co	ode 1	Security code	2 Secu	rity code 3
Value of all securiti distributed as compensati	7.0	20.00	Security code	es	U B	S			
,	terms of warrants, op	otions or other rights	of one sha	are purcha reof to pu	ise warra rchase or	nt. Eac ne com	common sh h whole wa mon share a	rant enti	tles the
Other compensation	on ⁵	Describe							
Total compensation p	aid 7,92	20.00							
Check box if the p	erson will or may rece	eive any deferred cor	mpensation (d	lescribe the	e terms bel	ow)			
⁴ Provide the aggregate value additional securities of the iss rights exercisable to acquire a ⁵ Do not include deferred com	ruer. Indicate the secu additional securities o	urity codes for all sec							

a) Name of person com	pensated and regis	stration status								
Indicate whether the person co	mpensated is a regist	rant.	☐ No	\checkmark	Yes					
If the person compensated is a	n individual, provide i	the name of the indivi	idual.							
Full legal name of indi	vidual Cusano		Vito							
		Family name	F	rst given na	ime		Sec	ondary g	iven nan	nes
If the person compensated is n	ot an individual, prov	ide the following info	rmation.							
Full legal name	e of non-individual									
F	Firm NRD number				((if appli	cable)			
Indicate whether the person co	mpensated facilitated	the distribution thro	ugh a funding po	ortal or an	internet-b	based po	ortal.	√] No	Yes
b) Business contact info	rmation									
If a firm NRD number is not pr	ovided in Item 8 (a), p	provide the business c	ontact informati	on of the p	erson bei	ng com	pensated.			
Street address	86 Harwood Gate									
Municipality	Beaconsfield			Pr	ovince/S	State	Québec	C		
Country	Canada			Postal co	ode/Zip o	code	H9W3A	\3		
Email address	vito.cusano@td.co	om	1	Teleph	none nun	nber	514695	0464		
c) Relationship to issue	or investment fund	d 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 aboved) Compensation details	•									
Provide details of all compensa Canadian dollars. Include cash incidental to the distribution, so allocation arrangements with t	tion paid, or to be pai commissions, securiti Ich as clerical, printin he directors, officers o	es-based compensation g, legal or accounting	on, gifts, discoun services. An issu	ts or other er is not re ensated by	compenso equired to y the issue	ation. D ask for er.	o not repo details al	ort payr bout, or	nents fo report o	or services on, internal
·					Security co		Security c	ode 2	Securit	ry code 3
Value of all securiti distributed as compensation	61 1	75.40	Security codes		U B	S				
Describe	terms of warrants, op	otions or other rights	37,076 Units half of one s the holder th \$3.00 per sh	hare purd ereof to p	chase wa ourchase	arrant. e one c	Each whom	nole wa	arrant e	entitles
Other compensation	on ⁵	Describe								
Total compensation p	61,17	75.40								
Check box if the p	erson will or may rece	eive any deferred cor	mpensation (des	cribe the t	erms belo	ow)				
⁴ Provide the aggregate value additional securities of the iss rights exercisable to acquire a ⁵ Do not include deferred com	uer. Indicate the secu additional securities o	urity codes for all sec								

a) Name of person comp	ensated and regis	stration status								
Indicate whether the person co	mpensated is a regist	trant.	☐ No	✓	Yes					
If the person compensated is ar	n individual, provide	the name of the in	dividual.							
Full legal name of indiv	/idual									
		Family name	•	First given	name	Secondary given names				
If the person compensated is no	•	_								
Full legal name	of non-individual	BMO Nesbitt E	urns Inc.							
F	irm NRD number	2 5	8 0		(if ap	plicable)				
Indicate whether the person co	mpensated facilitated	d the distribution t	hrough a fund	ding portal or	an internet-based	portal. No 🗌	Yes			
b) Business contact info	b) Business contact information									
If a firm NRD number is not pro	ovided in Item 8 (a), p	provide the busine	ss contact info	ormation of th	e person being co	mpensated.				
Street address										
Municipality					Province/State					
Country				Postal	code/Zip code		一			
Email address				Tele	phone number		Ħ			
c) Relationship to issuer										
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 t	he investment fund	or investment fund	d manager	Emplo	oyee of the issue	r or investment fund manager				
✓ None of the above										
d) Compensation details										
Canadian dollars. Include cash o	commissions, securiti ch as clerical, printin	es-based compens g, legal or accoun	ation, gifts, d ting services.	iscounts or oth An issuer is no	er compensation t required to ask	istribution. Provide all amounts in Do not report payments for servi for details about, or report on, int	ices			
Cash commissions pa	aid				Security code 1	Security code 2 Security code	3			
Value of all securitie distributed as compensation	· · Q	00.25	Security of	odes	U B S					
•	terms of warrants, op	otions or other rigi	one sh holder	are purchase thereof to pu	e warrant. Eacl	common share and one-half n whole warrant entitles the mmon share at a price of 2021.	of			
Other compensatio	n ⁵	Descri	be							
Total compensation pa	nid 8	00.25								
Check box if the pe	erson will or may rec	eive any deferred	compensatio	n (describe th	e terms below)					
⁴ Provide the aggregate value of additional securities of the issurights exercisable to acquire a ⁵ Do not include deferred comp	uer. Indicate the sec dditional securities o	urity codes for all				rights exercisable to acquire <u>uding</u> options, warrants or other				

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 n					given na	mes			
If the person compensated is not an individual, provide the following information.													
Full legal name of non-individual Scotia Capital Inc.													
Firm NRD number 3 4 6								(if appl	licable)				
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), p	provide the b	usiness c	ontact info	rmation of t	he pers	on bei	ing con	npensated.				
Street address													
Municipality						Prov	ince/S	State					
Country					Posta	al code	e/Zip	code					
Email address				1	Tel	ephon	ne nur	mber					
c) Relationship to issuer	or investment fun	d 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 t	he investment fund	or investmer	it fund m	anager	☐ Emp	olovee o	of the	issuer	or investm	nent fun	ıd man	ager	
None of the above					ш .	,						- 3 -	
d) Compensation details													
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					Sec	urity co	nde 1	Security of	rode 2	Secui	ity code	9.3
Value of all securitie	es and			Socurity of	odos	U	В	S	Jecunty (Jecui	ny couc	6.3
distributed as compensation	_{on⁴} 20,9	22.00		Security co	oues								
Describe terms of warrants, options or other rights 12,680 Units, each consisting of one common share and one-half of one share purchase warrant. Each whole warrant entitles the holder thereof to purchase one common share at a price of \$3.00 per share until February 28, 2021.													
Other compensatio	n ⁵		escribe										
Total compensation paid 20,922.00													
Check box if the person will or may receive any deferred compensation (describe the terms below)													
⁴ Provide the aggregate value of additional securities of the issu- rights exercisable to acquire a ⁵ Do not include deferred comp	uer. Indicate the secu dditional securities o	urity codes fo											

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 give	en name	е		Sec	ondary g	iven na	mes
If the person compensated is not an individual, provide the following information.												
Full legal name of non-individual PI Financial Corp.												
F	9	0				(if appli	cable)					
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), p	provide the busine	ess con	ntact infor	mation of t	he per	son bei	ng com	pensated.			
Street address												
Municipality						Prov	vince/S	State				
Country					Posta	al cod	le/Zip	code				
Email address					Te	lepho	ne nur	mber				
c) Relationship to issuer	or investment fun	d 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)												
<u> </u>	Director or officer of the investment fund or investment fund manager Employee of the issuer or investment fund manager											
✓ None of the above	ne investinent fana (or investment for	iu iliali	iagei		noyee	or trie i	issuei c	n invesim	ieni iun	u IIIaiia	igei
d) Compensation details		:	J 4:C:		0(-) :	4*-		41 4:-4		D	-11	
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					Sec	curity co	de 1	Security of	ode 2	Securi	ty code 3
Value of all securitie distributed as compensation	1 12	01.20	Se	ecurity co	des	U	В	S				
Describe terms of warrants, options or other rights 728 Units, each consisting of one common share and one-half of one share purchase warrant. Each whole warrant entitles the holder thereof to purchase one common share at a price of \$3.00 per share until February 28, 2021.												
Other compensatio	n ⁵	Desc	ribe									
Total compensation paid 1,201.20												
Check box if the person will or may receive any deferred compensation (describe the terms below)												
⁴ Provide the aggregate value of additional securities of the issu- rights exercisable to acquire a ⁵ Do not include deferred comp	uer. Indicate the secu dditional securities o	urity codes for all										

тем 9 - Directors, Execu	TIVE OFFICERS	AND PROMOT	ERS OF THE I SS	SUER						
If the issuer is an investment fund, do not complete 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 ⁶										
Provide name of reporting issuer										
Wholly owned subsidiary of a foreign public issuer ⁶										
Provide name of	foreign public issue	r						7		
Issuer distributing only eligil	ble foreign securities	and the distribution	on is to permitted clie	ents only ⁷				_		
If the issuer is at least one of the	above, do not comp	olete Item 9(a) – (d	c). Proceed to Item	10.						
⁶ 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. ⁷ Check this box if it applies to the current distribution even if the issuer made previous distributions of other types of securities to non-permitted clients. Refer to the definitions of "eligible foreign security" and "permitted client" in Part B(1) of the Instructions.										
If the issuer is none of the above, check this box and complete Item 9(a) - (c).										
a) Directors executive officer	e 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	Organization or company name Family name Family name First given name Secondary given names 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	D	0	Р			
b) Promoter information										
If the promoter listed above is not an individual, provide the following information for each director and executive officer of the promoter. For locations within Canada, state the province or territory; otherwise state the country. For "Relationship to promoter", "D" – Director, "O" – Executive Officer.										
Organization or company name Family name First given name Secondary given names Residential jurisdiction of individual Relationship to pron (select one or both if ap										
			Province or country D		0)			
c) Residential address of each 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	The Green Organic Dutchman Holdings Ltd.								
Full legal name	Stewart Anna								
	Family name	First given name	<u>'</u>	Seconda	ry given na	ames			
Title	General Counsel								
Telephone number	9053044201	Email address	astewa	rt@tgod.ca	l				
Signature	"Anna Stewart"	Date	2018	12	26				
			YYYY	ММ	DD				

TTEM 11- CONTACT PERSON									
		or the individual that the secu the individual certifying the	3 , ,	regulator m	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	mail 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.