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 22 (YYYY-MM-DD)					
ITEM 2 - PARTY CERTIFYING TH	e Report				
Indicate the party certifying the report (se		arding whether an	issuer is an inv	estment fund, refer to secti	on 1.1 of National
Instrument 81-106 Investment Fund Cont	inuous Disclosure and the comp	anion policy to NI	81-106.		
Investment fund issuer					
✓ Issuer (other than an inves	stment fund)				
Underwriter					
Item 3 - Issuer Name and Ot	HER IDENTIFIERS				
Provide the following information about t	he issuer, or if the issuer is an in	vestment fund, ab	out the fund.		
Full legal name	The Green Organic Du	tchman Holdir	ngs Ltd.		
Previous full legal name					
If the issuer's name changed in th	ne last 12 months, provide most	recent previous leg	gal name.		
Website	https://tgod.ca	(if applicable)			
If the issuer has a legal entity identifier <u>.</u> pi	rovide below. Refer to Part B of t	he Instructions for] the definition (of "legal entity identifier".	
Legal entity identifier]		
If two or more issuers distributed a single	security, provide the full legal no	ame(s) of the co-is] suer(s) other th	an the issuer named above	<u>.</u>
Full legal name(s) of co-issuer(s)	-		(if applicable		
ITEM 4 - UNDERWRITER INFORM	MATION				
If an underwriter is completing the report,	provide the underwriter's full le	gal name and firn	n NRD number.		_
Full legal name					
Firm NRD number (if applicable)					
If the underwriter does not have a firm NRD number, provide the head office contact information of the underwriter.					
Street address					
Municipality		Pro	ovince/State		
Country		Postal co	de/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	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.

Schedule 1 of the report.									
a) Currency	a) Currency								
Select the currency or currencies in which the distribution was made. All dollar amounts provided in the report must be in Canadian dollars. Canadian dollar									
b) Distribution date(s)									
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	2018	01	12	End date	2018	01	12		
	YYYY	ММ	DD		YYYY	ММ	DD	•	

c) Detailed purchaser information

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

d) Types of securities distributed

Provide the following information for all distributions reported on a per security basis. Refer to Part A(12) of the Instructions for how to indicate the security code. If providing the CUSIP number, indicate the full 9-digit CUSIP number assigned to the security being distributed.

				Canadian \$		
Security code	CUSIP number (if applicable)	Description of security	Number of securities	Single or lowest price	Highest price	Total amount
J B :	5	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.	8,914,484.00	1.6500		14,708,898.60

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	М	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 jurisdiction.

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

Province or country	Exemption relied on	Number of unique ²⁸ purchasers	Total amount (Canadian \$)
Alberta	NI 45-106 2.3 [Accredited investor]	9	527,653.50

Alberta	NI 45-106 2.9(2.1) [Offering memorandum] (AB, SK, ON, QC, NB, NS)	15	104,020.95
British Columbia	NI 45-106 2.3 [Accredited investor]	13	257,494.05
British Columbia	NI 45-106 2.5 [Family, friends and business associates]	2	9,999.00
British Columbia	NI 45-106 2.9(1) [Offering memorandum] (BC, NL)	38	799,177.50
New Brunswick	NI 45-106 2.3 [Accredited investor]	6	806,198.25
New Brunswick	NI 45-106 2.9(2.1) [Offering memorandum] (AB, SK, ON, QC, NB, NS)	5	37,499.55
Newfoundland and Labrador	NI 45-106 2.9(1) [Offering memorandum] (BC, NL)	1	49,999.95
Nova Scotia	NI 45-106 2.3 [Accredited investor]	2	11,949.30
Nova Scotia	NI 45-106 2.9(2.1) [Offering memorandum] (AB, SK, ON, QC, NB, NS)	1	6,200.70
Ontario	NI 45-106 2.3 [Accredited investor]	48	2,790,956.85
Ontario	NI 45-106 2.5 [Family, friends and business associates]	9	218,044.20
Ontario	NI 45-106 2.9(2.1) [Offering memorandum] (AB, SK, ON, QC, NB, NS)	101	1,082,269.65
Prince Edward Island	NI 45-106 2.3 [Accredited investor]	2	99,499.95
Québec	NI 45-106 2.3 [Accredited investor]	17	604,345.50
Québec	NI 45-106 2.5 [Family, friends and business associates]	13	122,695.65
Saskatchewan	NI 45-106 2.3 [Accredited investor]	3	310,374.90
Saskatchewan	NI 45-106 2.9(2.1) [Offering memorandum] (AB, SK, ON, QC, NB, NS)	1	10,000.65
Australia	NI 45-106 2.3 [Accredited investor]	1	24,750.00
Aruba	NI 45-106 2.3 [Accredited investor]	1	6,659.40
China	NI 45-106 2.3 [Accredited investor]	3	84,414.00
Denmark	NI 45-106 2.3 [Accredited investor]	1	19,800.00
France	NI 45-106 2.9(1) [Offering memorandum] (BC, NL)	1	6,600.00
Estonia	NI 45-106 2.3 [Accredited investor]	1	16,470.30
Germany	NI 45-106 2.9(1) [Offering memorandum] (BC, NL)	4	82,899.30
Japan	NI 45-106 2.3 [Accredited investor]	2	9,900.00
Netherlands	NI 45-106 2.3 [Accredited investor]	1	49,500.00
Norway	NI 45-106 2.3 [Accredited investor]	1	23,100.00
Poland	NI 45-106 2.9(1) [Offering memorandum] (BC, NL)	1	6,105.00
Sweden	NI 45-106 2.3 [Accredited investor]	3	49,830.00
Thailand	NI 45-106 2.3 [Accredited investor]	2	268,999.50
United Kingdom	NI 45-106 2.3 [Accredited investor]	1	26,895.00
United Kingdom	NI 45-106 2.9(1) [Offering memorandum] (BC, NL)	2	14,249.40
United States	NI 45-106 2.3 [Accredited investor]	144	6,165,396.60

Bahamas	NI 45-106 2.9(1) [Offering memorandum] (BC, NL)	1	4,950.00
	14,708,898.60		
	Total number of unique purchasers ^{2b}	456	

^{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 with the distribution. Complete additional copies of this page if more than one person was, or will be, compensated.									
Indicate whether any compensation was paid, or will be paid, in connection with the distribution.									
No ✓ Yes If yes, indicate number of persons compensated. 12									

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 indiv	vidual							
		Family name	Fir	st given name	Secondary given names			
If the person compensated is n	ot an individual, prov	vide the following infor	mation.					
Full legal name	of non-individual	Regent Park Secu	rities Ltd.					
F	irm NRD number			(if	applicable)			
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	b) Business contact information							
If a firm NRD number is not pr	ovided in Item 8 (a),	provide the business co	ontact informatio	n of the person being	compensated.			
Street address	2 Gloucester Gat	e Lodges, Outer Cir	cle, Regents F	ark ark				
Municipality	London			Province/Sta	ate			
Country	United Kingdom			Postal code/Zip co	de NW14HA			
Email address	matt.hocker@rps	ec.co.uk		Telephone numb	per 442032867507			
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	the investment fund	or investment fund ma		Employee of the ice	suer or investment fund manager			
_	ine invesiment iunu	or investment fund ma	anagei	Employee of the iss	der of investment fund manager			
✓ None of the above								
d) Compensation details								
Canadian dollars. Include cash	commissions, securit Ich as clerical, printir	ies-based compensationg, legal or accounting	n, gifts, discounts services. An issue	or other compensati er is not required to a	e distribution. Provide all amounts in on. Do not report payments for services sk for details about, or report on, internal			
Cash commissions pa	aid		·	Security code	1 Security code 2 Security code 3			
Value of all securition	12 C	89.55	Security codes		S S Security code 2			
Describe	terms of warrants, o	ptions or other rights	of one share holder thereo	purchase warrant.	Each whole warrant entitles the common share at a price of 28, 2021.			
Other compensation	on ⁵	Describe						
Total compensation pa	aid 12,0	89.55						
Check box if the pe	erson will or may rec	eive any deferred con	npensation (desc	ribe the terms below)			
	uer. Indicate the sec additional securities (urity codes for all sect			er rights exercisable to acquire acluding 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	Ye	s			
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	Murphy		
		Family name	Firs	st given name		Secondary given names		
If the person compensated is n	ot an individual, prov	ide the following infor	mation.					
Full legal name	Full legal name of non-individual							
F	Firm NRD number				(if appl	icable)		
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal. V No Yes								
b) Business contact info	rmation							
If a firm NRD number is not pr	ovided in Item 8 (a), բ	provide the business co	ontact information	n of the perso	on being com	pensated.		
Street address	2682 Rothesay R	oad						
Municipality	Rothesay			Provi	ince/State	New Brunswick		
Country	Canada		F	Postal code	e/Zip code	E2H2K9		
Email address	seamus.byrne@h	alifaxcitrus.ca		Telephon	e number	9024415757		
c) Relationship to issuer	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 ma	anager \square	Employee o	of the issuer o	or investment fund manager		
✓ None of the above			ў <u>Ш</u>	, ,		Ç		
d) Compensation details								
Provide details of all compensa Canadian dollars. Include cash	tion paid, or to be pai commissions, securiti uch as clerical, printin	es-based compensatio g, legal or accounting	n, gifts, discounts services. An issue	or other con r is not requi	npensation. D ired to ask for	tribution. Provide all amounts in Oo not report payments for services r details about, or report on, internal		
Cash commissions pa	aid			Secu	urity code 1	Security code 2 Security code 3		
Value of all securition distributed as compensation	16.3	59.75	Security codes	U	B S			
Describe	terms of warrants, op	otions or other rights	of one share	ourchase was to purchase	arrant. Eac se 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	16,35	59.75						
Check box if the pe	erson will or may reco	eive any deferred con	npensation (desc	ribe 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 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	Ye	es				
If the person compensated is an individual, provide the name of the individual.									
Full legal name of indi	vidual Nerell		Anders						
		Family name	First	given name)	Secondary	given name	s	
If the person compensated is not an individual, provide the following information.									
Full legal name of non-individual									
F	Firm NRD number				(if appl	icable)			
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 information									
If a firm NRD number is not pr	ovided in Item 8 (a), p	provide the business o	contact information	of the pers	son being com	npensated.			
Street address	81/80 Land & Hou	ise, Seewalee 1							
Municipality	Chalong Muang			Prov	rince/State	Phuke			
Country	Thailand		P	ostal code	e/Zip code	83130			
Email address	anerell@hotmail.c	com	Ī	Telephor	ne number	6687670662	28		
c) Relationship to issue	c) Relationship to issuer or investment fund manager								
Indicate the person's relationship with the issuer or investment fund manager (select all that apply). Refer to the meaning of "connected" in Part B(2) of the Instructions and the meaning of "control" in section 1.4 of NI 45-106 for the purposes of completing this section. Connect with the issuer or investment fund manager Insider of the issuer (other than an investment fund) Director or officer of the investment fund or investment fund manager Employee of the issuer or investment fund manager									
✓ None of the above									
d) Compensation details	3								
Provide details of all compensa Canadian dollars. Include cash incidental to the distribution, so allocation arrangements with t	commissions, securiti uch as clerical, printin he directors, officers o	es-based compensati g, legal or accounting	on, gifts, discounts o g services. An issuer	or other con is not requ	mpensation. L uired to ask fo	Do not report pa	yments for s	services	
Cash commissions p	aid			Sec	curity code 1	Security code 2	Security of	code 3	
Value of all securiti distributed as compensation	11 2	73.10	Security codes	U	BS				
Describe	terms of warrants, op	otions or other rights	25,014 Units, 6 half of one sha the holder ther \$3.00 per shar	are purchareof to pur	ase warrant. rchase one	Each whole vocuments	varrant en	titles	
Other compensation	on ⁵	Describe							
Total compensation p	aid 41,21	73.10							
Check box if the p	erson will or may reco	eive any deferred co	mpensation (descri	ibe the terr	ns below)				
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 sed						her	

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 indiv	vidual Biertumple		Jens				
		Family name	F	irst 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 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), p	provide the business co	ontact informati	ion of the p	person bei	ng com	pensated.
Street address	Korporationsweg	14					
Municipality	Wilen bei Wollera	u		Р	rovince/S	State	
Country	Switzerland			Postal c	ode/Zip	code	8832
Email address	jes@lightstreamca	apital.net		Telepl	hone nur	mber	41788104323
c) Relationship to issuer	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 issu	uer or investment fun	d manager		Insider	of the issu	uer (othe	er than an investment fund)
Director or officer of	the investment fund o	or investment fund ma	anager	Employ	ee of the	issuer o	r investment fund manager
✓ None of the above							
d) Compensation details	.						
	commissions, securiti Ich as clerical, printin	es-based compensatic g, legal or accounting	n, gifts, discoun services. An issi	ts or other uer is not r	r compens required to	ation. D ask for	ribution. Provide all amounts in o not report payments for services details about, or report on, internal
Cash commissions pa			,		Security co		Security code 2 Security code 3
Value of all securition distributed as compensation	1/1/	24.30	Security codes		U B	S	Security code 2 Security code 3
·	L terms of warrants, op	otions or other rights	of one share	e purchas of to purc	se warrar chase on	nt. Eacl e comr	common share and one-half h whole warrant entitles the mon share at a price of 021.
Other compensation	n ⁵	Describe					
Total compensation pa	14,42	24.30					
Check box if the pe	erson will or may reco	eive any deferred con	npensation (des	scribe the	terms 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 secu					

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 an individual, provide the name of the individual.								
Full legal name of indi	Full legal name of individual Lucas Derek							
		Family name	Fir	st given nar	me	Secondary g	iven names	
If the person compensated is not an individual, provide the following information.								
Full legal name	Full legal name of non-individual							
F	Firm NRD number				(if app	licable)		
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal.								
b) Business contact information								
If a firm NRD number is not pr	ovided in Item 8 (a), p	provide the business c	ontact informatio	n of the pe	erson being con	npensated.		
Street address	3962 Borden Stre	et, Ste. 101						
Municipality	Victoria			Pro	ovince/State	British Colum	bia	
Country	Canada		- 	Postal co	de/Zip code	V8P3H8		
Email address	derek.lucas@sun	life.com		Teleph	one number	2503851471		
c) Relationship to issuer	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								
d) Compensation details	3							
Provide details of all compensa Canadian dollars. Include cash incidental to the distribution, so allocation arrangements with t	commissions, securiti uch as clerical, printin he directors, officers o	es-based compensation g, legal or accounting	on, gifts, discounts services. An issue	s or other o	compensation. I quired to ask fo	Do not report payn	ments for services	
Cash commissions p	aid			S	Security code 1	Security code 2	Security code 3	
Value of all securiti distributed as compensation	15.7	27.80	Security codes	L	J B S			
Describe	terms of warrants, op	otions or other rights	of one share	purchase f to purch	e warrant. Ead nase one com	common share ch whole warran nmon share at a 2021.	t entitles the	
Other compensation	on ⁵	Describe						
Total compensation pa	aid 15,72	27.80						
Check box if the po	erson will or may rece	eive any deferred cor	mpensation (desc	ribe the te	erms below)			
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 com	pensated and regi	stration status						
Indicate whether the person co	ompensated 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	Firs	t given name	Secondary given names			
If the person compensated is n	•							
Full legal name	e of non-individual	Darringer Enterpri	ses Ltd.					
F	Firm NRD number			(if ap	plicable)			
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	b) Business contact information							
If a firm NRD number is not p	rovided in Item 8 (a),	provide the business co	ontact information	n of the person being co	mpensated.			
Street address	720 - 903 8th Ave	enue SW						
Municipality	Calgary			Province/State	Alberta			
Country	Canada		F	Postal code/Zip code	T2P0P7			
Email address	jjscott@postellen	ergy.com		Telephone number	4032326252			
c) Relationship to issue	c) Relationship to issuer or investment fund manager							
Indicate the person's relationship with the issuer or investment fund manager (select all that apply). Refer to the meaning of "connected" in Part B(2) of								
the Instructions and the mean	ing of "control" in sec	tion 1.4 of NI 45-106 †	for the purposes of	completing this section	1.			
Connect with the iss	uer or investment fu	nd manager		Insider of the issuer (o	ther than an investment fund)			
Director or officer of	the investment fund	or investment fund ma	anager	Employee of the issue	r or investment fund manager			
✓ None of the above								
d) Compensation details	3							
					istribution. Provide all amounts in Do not report payments for services			
incidental to the distribution, so	uch as clerical, printir	g, legal or accounting	services. An issue	r is not required to ask p	for details about, or report on, internal			
allocation arrangements with t		or employees of a non-	individual compe	nsated by the issuer.				
Cash commissions p	laid			Security code 1	Security code 2 Security code 3			
Value of all securiti distributed as compensati	12 6	30.95	Security codes	UBS				
Describe	terms of warrants, o	ptions or other rights			ne common share and one-			
			the holder the	reof to purchase one	at. Each whole warrant entitles e common share at a price of			
	-		\$3.00 per sha	re until February 28,	2021.			
Other compensation		Describe						
Total compensation p	aid 43,6	30.95						
Check box if the p		eive any deferred con	npensation (desc	ribe the terms below)				
	erson will or may red	cive any deletted out						
	erson will or may rec	olve ally deletred cor						
⁴ Provide the aggregate value	of all securities distr	ibuted as compensation						
⁴ Provide the aggregate value	of all securities distr suer. Indicate the sec additional securities (ibuted as compensation			rights exercisable to acquire uding options, warrants or other			

Indicate whether the person compensated is a registrant. If the person compensated is an individual, provide the name of the individual. Full legal name of individual Phillips Greg Family name First given name Secondary given names If the person compensated is not an individual, provide the following information.						
Full legal name of individual Phillips Greg Family name First given name Secondary given names						
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						
Firm NRD number (if applicable)						
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal.						
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 550 Burrard Street, Suite 500 - Bentall Five						
Municipality Vancouver Province/State British Columbia						
Country Canada Postal code/Zip code V6C2B5						
Email address Greg.Phillips@RichardsonGMP.co Telephone number 6046400400						
c) Relationship to issuer or investment fund manager						
Indicate the person's relationship with the issuer or investment fund manager (select all that apply). Refer to the meaning of "connected" in Part B(2) of the Instructions and the meaning of "control" in section 1.4 of NI 45-106 for the purposes of completing this section. Connect with the issuer or investment fund manager Insider of the issuer (other than an investment fund) Director or officer of the investment fund or investment fund manager 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 Security code 1 Security code 2 Security code 3						
Value of all securities distributed as compensation ⁴ 4,088.70 Security codes U B S U						
Describe terms of warrants, options or other rights 2,478 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 compensation ⁵ Describe						
Total compensation paid 4,088.70						
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 rights exercisable to acquire additional securities of the issuer. ⁵ Do not include deferred compensation.						

a) Name of person compensated and registration status									
Indicate whether the person co	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 indiv	Full legal name of individual								
		Family name	Fir	st given name	Seco	ndary given names			
If the person compensated is no	If the person compensated is not an individual, provide the following information.								
Full legal name	Full legal name of non-individual RBC Dominion Securities Inc.								
F	irm NRD number	3 1 6	6 0		(if applicable)				
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal.									
b) Business contact information									
If a firm NRD number is not pro	ovided in Item 8 (a),	provide the business	contact informatio	n of the person be	ing compensated.				
Street address									
Municipality				Province/s	State				
Country				Postal code/Zip	code				
Email address				Telephone nu	mber				
c) Relationship to issuer or investment fund manager									
Indicate the person's relationship with the issuer or investment fund manager (select all that apply). Refer to the meaning of "connected" in Part B(2) of									
the Instructions and the meani	ng of "control" in sec	tion 1.4 of NI 45-106	for the purposes of	of completing this s	section.				
Connect with the issu	er or investment fur	nd manager		Insider of the issu	uer (other than an	investment fund)			
Director or officer of t	he investment fund	or investment fund n	nanager	Employee of the	issuer or investme	ent fund manager			
✓ None of the above									
d) Compensation details									
Provide details of all compensate Canadian dollars. Include cash of incidental to the distribution, su allocation arrangements with the	commissions, securiti ch as clerical, printin	ies-based compensat ng, legal or accountin	ion, gifts, discounts g services. An issue	s or other compens er is not required to	sation. Do not repo o ask for details ab	rt payments for services			
Cash commissions pa	aid			Security co	ode 1 Security co	ode 2 Security code 3			
Value of all securities	es	10.00	Security codes	U B	S				
distributed as compensation)11	340.20							
Describe t	erms of warrants, o	ptions or other rights	one share pu	rchase warrant.	Each whole war ne common shar				
Other compensatio	n ⁵	Describe							
Total compensation pa	nid 6	40.20							
Check box if the pe	erson will or may rec	eive any deferred co	empensation (desc	cribe the terms bel	low)				
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	curity codes for all se							

a) Name of person compensated and registration status													
Indicate whether the person co	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 indiv	Full legal name of individual												
		Family name		•	First give	en nan	ne		Sec	condary (given na	mes	
If the person compensated is not an individual, provide the following information.													
Full legal name of non-individual BMO Nesbitt Burns Inc.													
F	irm NRD number	2 5	8	0				(if appl	icable)				
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal.													
b) Business contact information													
If a firm NRD number is not pro	ovided in Item 8 (a), p	provide the busine	ess con	tact infor	mation of t	the pe	rson be	ing com	pensated.				
Street address													
Municipality						Pro	vince/	State					
Country					Post	al co	de/Zip	code					
Email address					Te	elepho	one nu	mber					
c) Relationship to issuer or investment fund manager													
Indicate the person's relationship with the issuer or investment fund manager (select all that apply). Refer to the meaning of "connected" in Part B(2) of the Instructions and the meaning of "control" in section 1.4 of NI 45-106 for the purposes of completing this section. Connect with the issuer or investment fund manager Insider of the issuer (other than an investment fund)													
Director or officer of t	he investment fund	or investment fun	d man	ager	—	nlovee	of the	iccuar	or investm	nent fun	d man:	aner	
✓ None of the above	ne investment tuna	or investment for	u man	agei	L	pioyec	or trie	issuei	or investin	ient iun	u man	agei	
d) Compensation details Provide details of all compensation		id to the nersen i	dontific	d in Itan	9(a) in co	nnocti	ion with	the dis	tribution	Drovido	all am	ounts in	
Canadian dollars. Include cash of incidental to the distribution, su allocation arrangements with the	commissions, securiti ch as clerical, printin	es-based compen g, legal or accour	sation, iting se	gifts, dis rvices. A	counts or o n issuer is r	ther c	ompens quired to	sation. L o ask fo	Do not rep	ort payı	ments f	or services	
Cash commissions pa	aid					Se	ecurity c	ode 1	Security of	code 2	Secur	ity code 3	
Value of all securitie distributed as compensation	1 1 5	98.85	Se	curity co	des	U	В	S					
•	erms of warrants, op	otions or other rig	c ł	one sha nolder th	s, each cre purchanereof to per share u	se wa purch	arrant. ase or	Each	whole wa mon sha	arrant e	entitles	the	
Other compensatio	n ⁵	Desci	ribe										
Total compensation pa	1,5	98.85											
Check box if the pe	erson will or may rec	eive any deferred	l comp	ensation	(describe	the te	rms bel	low)					
													ı
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											

a) Name of person comp	pensated and reg	istration status							
Indicate whether the person co	Indicate whether the person compensated is a registrant. No Ves								
If the person compensated is an individual, provide the name of the individual.									
Full legal name of indiv	Full legal name of individual								
		Family name	Fir	st given name	Secondary given names				
If the person compensated is not an individual, provide the following information.									
Full legal name	Full legal name of non-individual PI Financial Corp.								
F	irm NRD number	5 2 9	0	(if a	pplicable)				
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal. • No • Yes									
b) Business contact info	rmation								
If a firm NRD number is not pr	ovided in Item 8 (a),	provide the business	contact informatic	n of the person being o	compensated.				
Street address									
Municipality				Province/Stat	е				
Country			=	Postal code/Zip cod	e				
Email address				Telephone number	er				
c) Relationship to issuer or investment fund manager									
Indicate the person's relationship with the issuer or investment fund manager (select all that apply). Refer to the meaning of "connected" in Part B(2) of									
the Instructions and the meaning of "control" in section 1.4 of NI 45-106 for the purposes of completing this section.									
Connect with the issu	uer or investment fu	nd manager		Insider of the issuer (other than an investment fund)				
Director or officer of t	he investment fund	or investment fund n	nanager	Employee of the issu	er or investment fund manager				
None of the above									
d) Compensation details									
					distribution. Provide all amounts in				
					n. Do not report payments for services for details about, or report on, internal				
allocation arrangements with th					, , ,				
Cash commissions pa	aid			Security code 1	Security code 2 Security code 3				
Value of all securition distributed as compensation	15	711.30	Security codes	U B S					
•		pptions or other rights	9.522 Units.	each consisting of o	ne common share and one-half				
			of one share	purchase warrant. E	Each whole warrant entitles the ommon share at a price of				
				are until February 28					
Other compensation	n ⁵	Describe							
Total compensation pa	15,7	711.30							
Check box if the pe	erson will or may red	ceive any deferred co	mpensation (desc	cribe the terms below)					
⁴ Provide the aggregate value	of all securities disti	ributed as compensat	ion, <u>excluding</u> op	tions, warrants or othe	r rights exercisable to acquire				
	uer. Indicate the sec	curity codes for all sec			cluding options, warrants or other				
Do not include deferred comp									

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 Powell		Tyler			Ross	
		Family name	•	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 a	pplicable)	
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal. V No Yes							
b) Business contact info	b) Business contact information						
If a firm NRD number is not pr	ovided in Item 8 (a), p	provide the business co	ontact inforn	nation of the p	person being (compensated.	
Street address	2631 Terrace Ave	enue					
Municipality	North Vancouver			Р	rovince/Stat	te British Columbia	
Country	Canada			Postal c	ode/Zip cod	le V7R1B5	
Email address	tyler@powercapit	alpartners.com		Telepl	hone numbe	7789948050	
c) Relationship to issuer	or investment fund	d manager	-				
the Instructions and the meani	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 issu	uer or investment fun	id manager		Insider	of the issuer ((other than an investment fund)	
Director or officer of	the investment fund of	or investment fund ma	anager	Employ	ee of the issu	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 compensatic g, legal or accounting	n, gifts, disc services. An	ounts or other issuer is not r	compensatio equired to ask	distribution. Provide all amounts in n. Do not report payments for services k for details about, or report on, internal	
Cash commissions pa					Security code 1	1 Security code 2 Security code 3	
Value of all securition	15.0	28.20	Security cod		U B S		
Describe	terms of warrants, op	otions or other rights	of one sh	are purchas	se warrant. E chase one c	ne common share and one-half Each whole warrant entitles the ommon share at a price of 8, 2021.	
Other compensation	on ⁵	Describe					
Total compensation pa	15,02	28.20					
Check box if the pe	erson will or may rece	eive any deferred con	npensation	(describe 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 sec				r rights exercisable to acquire <u>cluding</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 Cusano		Vito				
		Family name		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							
Firm NRD number (if applicable)							
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal. V No Yes							
b) Business contact information							
If a firm NRD number is not pr	ovided in Item 8 (a), ¡	provide the business co	ontact informa	tion of the p	person being con	npensated.	
Street address	1A - 6500 Trans-0	Canada Hwy, Suite	200				
Municipality	Pointe-Claire Province/State Québec			Québec			
Country	Canada Postal code/Zip code			H9R0A5			
Email address	vito.cusano@td.com Telephone number 5146950464			5146950464			
c) Relationship to issuer or investment fund manager							
Indicate the person's relationship with the issuer or investment fund manager (select all that apply). Refer to the meaning of "connected" in Part B(2) of the Instructions and the meaning of "control" in section 1.4 of NI 45-106 for the purposes of completing this section.							
Connect with the issu	uer or investment fun	d manager		Insider	of the issuer (oth	ner than an investment fund)	
Director or officer of	the investment fund o	or investment fund ma	anager	Employ	ee of the issuer	or investment fund manager	
✓ None of the above							
d) Compensation details	3						
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						Security and 2 Security and 2	
Value of all securition distributed as compensation	176	Security code 1 Security code 2 Security code 3 U B S				Security code 2 Security code 3	
Describe terms of warrants, options or other rights 10,679 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 compensation	on ⁵	Describe					
Total compensation pa	17,62	20.35					
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, <u>excluding</u> options, warrants or other rights exercisable to acquire additional securities of the issuer. Indicate the security codes for all securities distributed as compensation, <u>including</u> options, warrants or other rights exercisable to acquire additional securities of the issuer. ⁵ Do not include deferred compensation.							

тем 9 - Directors, Execu	TIVE OFFICERS	AND PROMOT	ERS OF THE I SS	SUER				
If the issuer is an investment fund	d, do not complete l	Item 9. Procced to	Item 10.					
Indicate whether the issuer is any o	f the following (select	t the one that appli	es - if more than one	applies, select onl	y one).			
✓ Reporting issuer in any juris	sdiction of Canada							
Foreign public issuer								
Wholly owned subsidiary of	a reporting issuer in	any jurisdiction of	Canada ⁶					
Provide name of reporting issuer								
Wholly owned subsidiary of	a foreign public issu	ıer ⁶						_
Provide name of foreign public issuer								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								
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. For "Relationship to issuer", "D" – Director, "O" – Executive Officer, "P" – Promoter.								
Organization or company name	Family name	First given name	Secondary given names	non-individ resident jurisdictio	Business location of non-individual or residentail jurisdiction of individual		Relationship to issuer (select all that apply)	
				Province or	Province or country		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	sdiction of (select on		onship to promoter the 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

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	3044201 Email address astewart@tgod.c						
Signature	"Anna Stewart"	Date 201		12	26			
			YYYY	ММ	DD			

ITEM 11- CONTACT PERSON								
Provide the following business contact information for the individual that the securities regulatory authority or regulator may contact with any questions regarding the contents of this report, if different than the individual certifying the report in Item 10.								
Same as individual certifying the report								
Full legal name				Title				
	Family name	First given name	Secondary given names					
Name of company								
Telephone number		En	nail address					

Notice - Collection and use of personal information

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

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

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

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

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