# Form 45-106F1 Report of Exempt Distribution

ITEM 1 – REPORT TYPE		
✓ New report		
	filing date of report that is being	g amended (YYYY-MM-
Amended report in amended, provide	Thing date of report that is being	DD)
ITEM 2 – PARTY CERTIFYING THE REPO	RT	
Indicate the party certifying the report (select only one). For guidan		n investment fund, refer to section 1.1 of National
Instrument 81-106 Investment Fund Continuous Disclosure and the	companion policy to NI 81-106.	
Investment fund issuer		
✓ Issuer (other than an investment fund)		
Underwriter		
ITEM 3 – ISSUER NAME AND OTHER IDE	ENTIFIERS	
Provide the following information about the issuer, or if the issuer is		
Full legal name Auxico Resources	Canada Inc.	
Previous full legal name N/A  If the issuer's name changed in the last 12 months, provi	de most recent previous legal name.	
Website http://www.auxico		oplicable)
If the issuer has a legal entity identifier, provide below. Refer to Par	t B of the Instructions for the definit	ion of "legal entity identifier".
Legal entity identifier N/A		
If two or more issuers distributed a single security, provide the full l	legal name(s) of the co-issuer(s) other	er than the issuer named above.
Full legal name(s) of co-issuer(s) N/A	(if ap	pplicable)
ITEM 4 – UNDERWRITER INFORMATION		
	Call I and a supplemental Community	L
If an underwriter is completing the report, provide the underwriter's	s futt tegat name ana firm NKD num	per.
Full legal name N/A		
Firm NRD number	(if applicable)	
If the underwriter does not have a firm NRD number, provide the he	ad 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 2 1 2 3 9 8
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 $0 0 0 4 2 2 6 8$ If the issuer does not have a 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 jurisdiction of Canada?  No  Yes
If yes, select the jurisdictions of Canada in which the issuer is a reporting issuer.
All AB BC MB NB NL NT NS NU ON PE OC SK YT
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 FUND ISSUER INFORMATION
If the issuer is an investment fund, provide the following information.
a) Investment fund manager information
Full legal name N/A
Firm NRD Number (if applicable)
If the investment fund manager does not have a firm NRD number, provide the head office contact information of the investment fund manager.  Street Address
Municipality Province/State
Country Postal code/Zip code
Telephone number Website (if applicable)
b) Type of investment fund
Type of investment fund that most accurately identifies the issuer (select only one).
Money market Equity Fixed income Balanced
Alternative strategies Cryptoasset Other (describe)
Indicate whether one or both of the following apply to the investment fund.
Invests primarily in other investment fund issuers
Is a UCITs Fund <sup>1</sup>
<sup>1</sup> Undertaking for the Collective Investment of Transferable Securities funds (UCITs Funds) are investment funds regulated by the European Union (EU) directives that allow collective investment schemes to operate throughout the EU on a passport basis on authorization from one member state.
c) Date of formation and financial year-end of the investment fund
Date of formation Financial year-end MM DD MM DD
d) Reporting issuer status of the investment fund
Is the investment fund a reporting issuer in any jurisdiction of Canada?  No  Yes
If yes, select the jurisdictions of Canada in which the investment fund is a reporting issuer.
☐ All ☐ AB ☐ BC ☐ MB ☐ NB ☐ NL ☐ NT
NS NU ON PE QC SK YT
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 \$500M \$500M to under \$1B \$1B or over Date of NAV calculation: YYYY M 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. Currency Select the currency or currencies in which the distribution was made. All dollar amounts provided in the report must be in Canadian dollars. Canadian dollar US dollar Euro Other (describe) 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 Start date 2020 10 23 End date 2020 10 23 DD DD YYYY MM YYYY Detailed purchaser information Complete Schedule 1 of this form for each purchaser and attach the schedule to the completed report. 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	\$		
		code	CUSIP number (if applicable)			Single or lowest price	Highest price	Total amount
С	V	D	05334L109	Convertible Debentures	2,788,000	\$1.00	\$1.00	\$2,788,000
To	tal:				2,788,000			\$2,788,000

#### 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.

		nvertib hangea			Jnderly			ise price adian \$)	Expiry date (YYYY-MM-	Conversion ratio	Describe other terms (if applicable)
	security code		security code			Lowest	Highest	DD)			
	U	В	S				\$0.20	\$0.20	2023-10-23	1:1	
	W	N	Т	С	М	S	\$0.25	\$0.25	2023-10-23	1:1	Holder has the option to convert into common shares of Central America Nickel Inc. at a conversion price of \$1.00 per share, instead of converting into shares of the Issuer.

## 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 purchasers <sup>2a</sup>	Total amount (Canadian \$)
Bahamas	NI 45-106 s.2.3	3	\$180,000
Panama	NI 45-106 s.2.3	1	\$70,000
Switzerland	NI 45-106 s.2.3	1	\$88,000
United Kingdom	NI 45-106 s.2.3	3	\$2,120,000
United States	NI 45-106 s.2.3	3	\$330,000
	Total dollar amount of secu	rities distributed	\$2,788,000
	Total number of unique purchasers <sup>2b</sup>	11	

<sup>&</sup>lt;sup>2a</sup>In calculating the number of unique purchasers per row, count each purchaser only once. Joint purchasers may be counted as one purchaser.

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

g) Net proceeds to the investment rund by jurisdiction			1 1	in in I with a large and the same
If the issuer is an investment fund, provide the net proceeds to the in resides. <sup>3</sup> If an issuer located outside of Canada completes a distribution For jurisdictions within Canada, state the province or territory, other	tion in a jurisdict	ion of Canada, include n		
Province or country		Net proceeds (Canadian \$)		
			7	
			7	
			7	
Total net proceeds to the investment fund			7	
<sup>3</sup> "Net proceeds" means the gross proceeds realized in the jurisdiction occurred during the distribution period covered by the report.	on from the distri	butions for which the rep	ort is being filed,	less the gross redemptions that
h) Offering materials – This section applies only in Sa	askatchewan, C	ontario, Québec, New 1	Brunswick and	Nova Scotia.
If a distribution has occurred in Saskatchewan, Ontario, Québec, Ne		-		
are required under the prospectus exemption relied on to be filed with				·
In Ontario, if the offering materials listed in the table are required to electronic version of the offering materials that have not been previous	.,		Securities Comm	ussion (OSC), attach an
Description	Date of docume		Previously filed with or delivered	Date previously filed or delivered
Description	(YYY	Y-MM-DD)	to regulator? (Y/N)	(YYYY-MM-DD)
1. N/A			, ,	
2.				
3.				
ITEM 8 – COMPENSATION INFORMATION	N			
Provide information for each person (as defined in NI 45-106) to what distribution. Complete additional copies of this page if more than of			ovide, any comp	ensation in connection with the
Indicate whether any compensation was paid, or will be paid, in con-	_			
No ✓ Yes If yes, indicate nu			3	
a) Name of person compensated and registration statu	us			
Indicate whether the person compensated is a registrant.				
✓ No Yes				
If the person compensated is an individual, provide the name of the	individual.		T	
Full legal name of individual Bertin		Guy-Philippe		
Family name		First given name	Secondary g	given names
If the person compensated is not an individual, provide the following	g information.			
Full legal name of non-individual				
Firm NRD number		(if applica		
Indicate whether the person compensated facilitated the distribution  No Yes	ı through a fundii	ng portal or an internet-b	pased portal.	
b) Business contact information				
If a firm NRD number is not provided in Item 8(a), provide the busin  Street address 107 Whitelands House	ness contact infor	mation of the person bei	ng compensated.	
City Cheltenham Terrace		Province/State		
Country United Kingdom		Postal code/Zip code	SW3 4RA	
Email address gpbertin@gmail.com		Telephone number	33663663555	5
c) Relationship to issuer or investment fund manager	•			
Indicate the person's relationship with the issuer or investment fund Instructions and the meaning of "control" in section 1.4 of NI 45-10				connected" in Part $B(2)$ of the
2 describe that the meaning of control in section 1.7 of N1 45-10				

Insider of the issuer (other than an investment fund)

Director or officer of the	e investment fund	or investment fund	manager							
Employee of the issuer	or investment fund	d manager								
✓ None of the above										
d) Compensation details										
Provide details of all compensation Canadian dollars. Include cash con incidental to the distribution, such allocation arrangements with the d Cash commissions paid	nmissions, securiticas clerical, printing	es-based compensat g, legal or accountin	ion, gifts, disc 1g services. Ar	ounts or other com issuer is not requ	npensat iired to	tion. Do no ask for det	t report	paymen	nts for ser	vices
Value of all securities distributed as compensation <sup>4</sup>	-	Se	curity codes	Security code 1		Security coo	de 2	Secu	rity code 3	\$
Describe terr	ns of warrants, opt	ions or other rights								
Other compensation <sup>5</sup>	-	Describe								
Total compensation paid	\$268,800									
Check box if the person v	will or may receive	any deferred compo	ensation (desc	ribe the terms belo	ow)					
<sup>4</sup> Provide the aggregate value of all securities of the issuer. Indicate the acquire additional securities of the	security codes for issuer.									
<sup>5</sup> Do not include deferred compensa	tion.									
a) Name of person comp	pensated and regi	istration status								
Indicate whether the person compe	nsated is a registra	ınt.								
If the person compensated is an ind		e name of the indivi	dual.							
Full legal name of individu		Falk		Christian		G 1				
If the person compensated is not an		amily name		irst given name		Seconda	ry given	names		
Full legal name of		e the jollowing injoi	manon.							
	n NRD number			(if onn	olicable	.)				
Indicate whether the person compe		he distribution throu	gh a funding							
✓ No Yes	V			•		•				
b) Business contact info	rmation									
If a firm NRD number is not provid			ontact informa	ution of the person	being o	compensate	ed.			
Street address	Luzernerstrasse	_	7							
City	Küssnacht am I	Rigi	_	Province/Sta	ate S	Schwyz				
Country	Switzerland		Po	ostal code/Zip co	de 6	5403				
Email address	christian.falk@	covemin.com		Telephone numb	per 4	117986589	994			
c) Relationship to issuer	or investment fu	and manager								
Indicate the person's relationship v Instructions and the meaning of "co Connected with the issu	ontrol" in section I	1.4 of NI 45-106 for					f "conn	ected" i	n Part B(	2) of the
		•								
Insider of the issuer (of		,								
Director or officer of th			manager							
Employee of the issuer	or investment fund	ı manager								
✓ None of the above										
d) Compensation details		I and a second	4:C: 1: X:	0(-):		. 1:	· P	1 11		•
Provide details of all compensation Canadian dollars. Include cash con incidental to the distribution, such a allocation arrangements with the d	nmissions, securitic as clerical, printing	es-based compensat g, legal or accountin	ion, gifts, disc ig services. Ar	ounts or other com i issuer is not requ	npensat iired to	tion. Do no	t report	paymen	nts for ser	vices

Cash commissions paid	Nil											
Value of all securities distributed		Sa	curity codes	Sec	urity coo	de 1	Sec	curity co	de 2	Sec	curity co	de 3
as compensation <sup>4</sup>	_	Se	curity codes	W	N	T	С	M	S			
Describe ter	ms of warrants, opt	ions or other rights	250,000 f years.	inder's	warra	nts exe	ercisab	ole at \$	0.20 p	er shar	re for 3	3
Other compensation <sup>5</sup>	-	Describe										
Total compensation paid	Nil											
Check box if the person	will or may receive	any deferred compe	ensation (desc	cribe the	terms	below)						
<sup>4</sup> Provide the aggregate value of all securities of the issuer. Indicate the												
acquire additional securities of the		an seem mes aismo	uica as comp	Cristino	ri, iriciii	ums_o <sub>l</sub>	orions,	,, cer r cer	.15 07 01.	1107 1181	iis exer	cisable to
<sup>5</sup> Do not include deferred compenso	tion.											
a) Name of person com	pensated and regi	stration status										
Indicate whether the person compe	nsated is a registra	ent.										
✓ No Yes												
If the person compensated is an inc			dual.	CI. : .							7	
Full legal name of individual		Ebeling amily name	F	Christ First given	•			Second:	ary given	names		
If the person compensated is not as		-		nst givei	i ildilic			Second	ary given	names		
Full legal name of	_											
_	m NRD number				(if	applic	able)					
Indicate whether the person compe		he distribution throu	igh a funding	portal c				ortal.				
✓ No Yes	J		0 , 0	1			•					
b) Business contact info	ormation											
If a firm NRD number is not provid	led in Item 8(a), pro	ovide the business co	ontact inform	ation of	the per	son be	ing con	ıpensai	ed.			
Street address	Curtiusstrasse 1	.6										
City	Duisburg			Pr	ovince	/State						
Country	Germany		Po	ostal co	de/Zip	code	470	53				
Email address	christoph.ebelii	ng@covemin.com		Teleph	ione nu	ımber	491	77757	3555			
c) Relationship to issue	r or investment for	ınd manager	<u> </u>									
Indicate the person's relationship			iger (select al	ll that ap	oply). R	efer to	the me	aning o	of "conn	nected"	in Par	t B(2) of the
Instructions and the meaning of "c			the purposes	of comp	oleting t	his sec	tion.					
Connected with the iss		Ü										
Insider of the issuer (o		,										
Director or officer of the	ne investment fund	or investment fund	manager									
Employee of the issuer	or investment fund	l manager										
✓ None of the above												
d) Compensation details	3											
Provide details of all compensation Canadian dollars. Include cash con												
$incidental\ to\ the\ distribution,\ such$	as clerical, printing	g, legal or accountin	g services. A	n issuer	is not r	equire	d to ask					
allocation arrangements with the a	Nil	r employees of a non	-individual c	ompense	ated by	the iss	uer.					
zam commissions para		] 1		Sec	urity coo	le 1	Sec	curity co	de 2	Sec	curity co	de 3
37-1C -11 '-' 1' - '1' - 1				500				1	1	500	00	
Value of all securities distributed as compensation <sup>4</sup>	-	Se	curity codes	W	N	T	C	M	S			
as compensation <sup>4</sup>	-				- '		l			er shar	re for 3	3
as compensation <sup>4</sup>	ms of warrants, opt		250,000 f years.		- '		l			er shar	re for 3	}
as compensation <sup>4</sup>	ms of warrants, opt		250,000 f		- '		l			er shar	re for 3	3

Check box if the person will or may receive any deferred compensation (describe the terms below)	
<sup>4</sup> Provide the aggregate value of all securities distributed as compensation, <u>excluding</u> options, warrants or other rights exercisable to acquire additional	
securities of the issuer. Indicate the security codes for all securities distributed as compensation, <u>including</u> options, warrants or other rights exercisable to	
acquire additional securities of the issuer.	
<sup>5</sup> Do not include deferred compensation.	

ITEM 9 – DIRECTORS, EXECUTIVE OFFICERS AND PROMOTERS OF THE ISSUER
If the issuer is an investment fund, do not complete Item 9. Proceed to Item 10.
Indicate whether the issuer is any of the following (select the one that applies – if more than one applies, select only one).
Reporting issuer in any jurisdiction of Canada
Foreign public issuer
Wholly owned subsidiary of a reporting issuer in any jurisdiction of Canada <sup>6</sup>
Provide name of reporting issuer
Wholly owned subsidiary of a foreign public issuer <sup>6</sup>
Provide name of foreign public issuer
Issuer distributing only eligible foreign securities and the distribution is to permitted clients only <sup>7</sup>
If the issuer is at least one of the above, do not complete Item 9(a) – (c). Proceed to Item 10. <sup>6</sup> 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.
<sup>7</sup> 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 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. For "Relationship to issuer", "D" – Director, "O" – Executive Officer, "P" – Promoter.

Organization or company name	Family name	Family name  First given name  Secondary given names  Business location of non-individual or residential jurisdiction of individual  Province or country	• •	non-individual or residential jurisdiction	Relationship to issuer (select all that apply)			
			D	О	P			

## b) Promoter information

If the promoter listed above is not an individual, provide the following information for each director and executive officer of the promoter. For locations within Canada, state the province or territory, otherwise state the country. For "Relationship to promoter", "D" – Director, "O" – Executive Officer.

Organization or company name	Family name	First given name	Secondary given names	Residential jurisdiction of individual	Relationship to promoter (select one or both if applicable)	
				Province or country	D	О

#### 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 exempt 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/ Auxico Resources Canada Inc. investment fund manager/agent Full legal name Billings Mark Family name First given name Secondary given names Title President Telephone number 514.296.1641 Email address mark@marengomgt.com Signature "Mark Billings" Date 2020 10 29 YYYY DD MM 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 Consultant Full legal name Hamelin Lindsay Title Family name First given name Secondary given names Name of company Take It Public Services Inc. Telephone number 604.682.2928 Email address lindsay@takeitpublicservices.com Notice - Collection and use of personal information The personal information required under this form is collected on behalf of and used by the securities regulatory authority or regulator under the authority granted in securities legislation for the purposes of the administration and enforcement of the securities legislation. If you have any questions about the collection and use of this information, contact the securities regulatory authority or regulator in the local jurisdiction(s) where the report is filed, at the address(es) listed at the end of this form. The attached Schedules 1 and 2 may contain personal information of individuals and details of the distribution(s). The information in Schedules 1 and 2 will not be placed on the public file of any securities regulatory authority or regulator. However, freedom of information legislation may require the securities regulatory authority or regulator to make this information available if requested. By signing this report, the issuer/underwriter confirms that each individual listed in Schedule 1 or 2 of the report who is resident in a jurisdiction of Canada: has been notified by the issuer/underwriter of the delivery to the securities regulatory authority or regulator of the information pertaining to the individual as set out in Schedule 1 or 2, that this information is being collected by the securities regulatory authority or regulator under the authority granted in securities legislation, that this information is being collected for the purposes of the administration and enforcement of the securities legislation of the local jurisdiction, and of the title, business address and business telephone number of the public official in the local jurisdiction, as set out in this form, who can answer questions about the security regulatory authority's or regulator's indirect collection of the information, and

has authorized the indirect collection of the information by the securities regulatory authority or regulator.