# Form 45-106F1 Report of Exempt Distribution

IT IS AN OFFENCE TO MAKE A MISREPRESENTATION IN THIS REPORT

ITEM 1 - REPORT TYPE							
<ul> <li>New report</li> <li>Amended report If amended, provide filing date of report that is being amended (YYYY-MM-DD)</li> </ul>							
ITEM 2 - PARTY CERTIFYING THE R	Report						
Indicate the party certifying the report (select of National Instrument 81-106 Investment Fund				n 1.1 of			
Investment fund issuer							
✓ Issuer (other than an investmed and in	nent fund)						
Underwriter							
ITEM 2 ICCUED NAME AND OTHE							
ITEM 3 - ISSUER NAME AND OTHE Provide the following information about the is		vestment fund, about the fund					
	Canadian Mining Corp.						
Previous full legal name							
If the issuer's name changed in the	e last 12 months, provide mo	ost recent provious legal name					
Website	e last 12 months, provide mo		(if applicable)				
If the issuer has a legal entity identifier₂ provia Legal entity identifier	de below. Refer to Part B of th	ne instructions for the definition	of legal entity identifier .				
Item 4 - Underwriter Informa <sup>-</sup>	TION						
If an underwriter is completing the report, pro	wide the underwriter's full leg	gal name and firm National Reg	istration Database (NRD) nu	mber.			
Full legal name							
Firm NRD number		(if applicable)					
If the underwriter does not have a firm NRD n	number, provide the head off	ice contact information of the ur	nderwriter.				
Street address							
Municipality		Province/State					
Country		Postal code/Zip code					
Telephone number		Website		(if applicable)			

ITEM 5 - ISSUER INFORMATION
If the issuer is an investment fund, do not complete Item 5. Proceed to Item 6.
a) Primary industry
Provide the issuer's North American Industry Classification Standard (NAICS) code (6 digits only) that corresponds to the issuer's primary business activity. For more information on finding the NAICS industry code go to <b>Statistics Canada's NAICS industry search tool.</b>
NAICS industry code 2 1 2 2 0
If the issuer is in the <b>mining industry</b> , indicate the stage of operations. This does not apply to issuers that provide services to issuers operating in the mining industry. Select the category that best describes the issuer's stage of operations.          If the issuer is in the <b>mining industry</b> , indicate the stage of operations.         If the issuer is in the <b>mining industry</b> , indicate the stage of operations.         If the issuer is in the <b>mining industry</b> .         If the issuer is in the <b>mining industry</b> .         If the issuer is in the <b>mining industry</b> .         If the issuer is in the <b>mining industry</b> .         If the issuer is in the <b>mining industry</b> .         If the issuer is in the <b>mining industry</b> .         If the issuer is in the <b>mining industry</b> .         If the issuer is in the <b>mining industry</b> .         If the issuer is in the <b>mining industry</b> .         If the issuer is industry.         <
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         Commerial/business debt         Consumer debt         Private companies
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       4       2       8       8       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
f) Reporting issuer status
Is the issuer a reporting issuer in any jurisdication of Canada? No Yes
If yes, select the jurisdictions of Canada in which the issuer is a reporting issuer.
g) Public listing status
If the issuer has a CUSIP number, provide below (first 6 digits only)
If the issuer is publicly listed, provide the names of all exchanges on which its securities are listed. Include only the names of exchanges for which the issuer has applied for and received a listing, which excludes, for example, automated trading systems.
Exchange name(s):
h) Size of issuer's assets
Select the size of the issuer's assets for its most recent financial year-end (Canadian \$). If the issuer has not existed for a full financial year, provide the size of the issuer's assets at the distribution end date.
□ \$0 to under \$5M □ \$5M to under \$25M □ \$25M to under \$100M
\$100M to under \$500M \$500M to under \$1B \$1B or over

ITEM 6 - INVESTMENT	Fund Issuer Information						
If the issuer is an investi	If the issuer is an investment fund, provide the following information.						
a) Investment fund ma	inager information						
Full legal name							
Firm NRD number	(if applicable)						
If the investment fund man	ager does not have a firm NRD number, provide the head office contact information of the investment fund manager.						
Street address							
Municipality	Province/State						
Country	Postal code/Zip code						
Telephone number	Website (if applicable)						
b) Type of investment	fund						
Type of investment fund that	most accurately identifies the issuer (select only one) .						
Money market	Equity Fixed income						
Balanced	Alternative strategies Other (describe)						
Indicate whether one or both	of the following apply to the investment fund .						
Invests primarily in	other investment fund issuers						
Is a UCITs Fund <sup>1</sup>							
<sup>1</sup> Undertaking for the Collectiv directives that allow collective	re Investment of Transferable Securities funds (UCITs Funds) are investment funds regulated by the European Union (EU) e investment schemes to operate throughout the EU on a passport basis on authorization from one member state.						
	nd financial year-end of the investment fund						
Date of formati							
	YYYY MM DD MM DD						
d) Reporting issuer sta	atus of the investment fund						
	orting issuer in any jurisdication of Canada? 🔲 No 🗌 Yes						
If yes, select the jurisdictions of All	of Canada in which the investment fund is a reporting issuer.           AB         BC         MB         NL         NT						
e) Public listing status	NU         ON         PE         QC         SK         YT           of the investment fund						
	CUSIP number, provide below (first 6 digits only)						
.,	CUSIP number						
If the investment fund is publicly listed, provide the names of all exchanges on which its securities are listed. Include only the names of exchanges for							
which the issuer has applied for and received a listing, which excludes, for example, automated trading systems.							
Exchange name							
f) Net asset value (NA	V) of the investment fund						
Select the NAV range of the investment fund as of the date of the most recent NAV calculation (Canadian \$).							
\$0 to under \$5M	S5M to under \$25M \$25M to under \$100M						
\$100M to under \$500							
	YYYY MM DD						

ITEM 7 - INFORMATION A	BOUT THE DISTRIBUTI	ON					
If an issuer located outside of Canada completes a distribution in a jurisdiction of Canada, include in Item 7 and Schedule 1 information about purchasers resident in that jurisdiction of Canada only. Do not include in Item 7 securities issued as payment of commissions or finder's fees, which should be disclosed in Item 8. The information provided in Item 7 must reconcile with the information provided in Schedule 1 of the report.							
a) Currency							
Select the currency or currencies ir	which the distribution was ma	ide. All dol	lar amounts	provided i	in the report mu	ist be in Canadian	dollars.
✓ Canadian dollar	US dollar Eur	O	Other (	describe	2)		
b) Distribution date(s)							
State the distribution start and er as both the start and end dates. I distribution period covered by the	f the report is being filed for sec e report.			continuol	us basis, include		
Start o	tate 2017 08 04 YYYY MM DE			End date	e 2017 YYYY	08 04 MM DD	
c) Detailed purchaser infor	mation						
Complete Schedule 1 of this	form for each purchaser a	nd attac	h the sche	dule to t	he completed	l report.	
d) Types of securities distri							
Provide the following informatio Instructions for how to indicate t distributed. The information incl <u>Asked Questions.</u>	the security code. If providing th	he CUSIP n	umber, indic	ate the ful	ll 9-digit CUSIP	number assigned	to the security being
						Canadian \$	
Security CUSIP number (if applicable)	Description of security		Numbe securi		Single or lowest price	Highest price	Total amount
UBS13637A101 sh co sh of	A101 Units, consisting of one common share and one share purchase warrant. Each warrant is exercisable to acquire one common share at \$0.25 per share for a two year period. 50% of the Units subject to an 8 month hold. 0.2500 0.2						2,199,736.00
	vertible/exchangeable secu						
If any rights (e.g. warrants, optio were distributed, provide the cor							changeable securities
Security Underlying security code	Exercise price (Canadian \$) Lowest Highest		ry date MM-DD)	Convers ratio		ribe other items (if a	applicable)
W N T C M S	1.0000 1.0000	2019	-08-04	1:1			
		nption			I		
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	Exemptio	n relied on			Number of purchasers	Total amou	nt (Canadian \$)
British Columbia	NI 45-106 2.3 [Accred	ited inve	stor]		. 83	3	1,749,500.00
British Columbia	NI 45-106 2.5 [Family, associates]	friends	and busin	ess	2	2	22,500.00
Germany	Distributions to purcha jurisdiction (BC, AB, N		tside of loo	cal	2	2	100,000.00
Australia	Distributions to purcha jurisdiction (BC, AB, N		tside of lo	cal	2	1	62,736.00

	Total number of unique purchasers <sup>2</sup>	108	
	Total dollar amount of secu	urities distributed	2,199,736.0
Saskatchewan	NI 45-106 2.3 [Accredited investor]	2	62,500.0
Ontario	NI 45-106 2.3 [Accredited investor]	5	62,500.0
Alberta	NI 45-106 2.3 [Accredited investor]	7	75,000.0
Switzerland	Distributions to purchasers outside of local jurisdiction (BC, AB, NB)	2	50,000.0
United Kingdom	Distributions to purchasers outside of local jurisdiction (BC, AB, NB)	1	15,000.0

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

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

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

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

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

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

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

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

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

ITEM 8 - 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. <b>Complete additional copies of this page if more than one person was, or will be, compensated.</b>
Indicate whether any compensation was paid, or will be paid, in connection with the distribution.
No       ✓ Yes       If yes, indicate number of persons compensated.       8
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   Betnar   Jim
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. 🗹 No 🗌 Ye
b) Business contact information
If a firm NRD number is not provided in Item 8 (a), provide the business contact information of the person being compensated.
Street address 1205-288 Ungless Way,
Municipality Port Moody Province/State British Columbia
Country Canada Postal code/Zip code V3H 0C9
Email address Telephone number
c) Relationship to issuer or investment fund manager
Indicate the person's relationship with the issuer or investment fund manager (select all that apply). Refer to the meaning of "connected" in Part B(2) of the Instructions and the meaning of "control" in section 1.4 of NI 45-106 for the purposes of completing this section.
Connect with the issuer or investment fund manager Insider of the issuer (other than an investment fund)
Director or officer of the investment fund or investment fund manager Employee of the issuer or investment fund manager
None of the above
d) Compensation details
Provide details of all compensation paid, or to be paid, to the person identified in Item 8(a) in connection with the distribution. Provide all amounts in Canadian dollars. Include cash commissions, securities-based compensation, gifts, discounts or other compensation. Do not report payments for services incidental to the distribution, such as clerical, printing, legal or accounting services. An issuer is not required to ask for details about, or report on, internal allocation arrangements with the directors, officers or employees of a non-individual compensated by the issuer.
Cash commissions paid       17,080.00       Security codes       Security code 1       Security code 2       Security code 3
Value of all securities distributed as compensation <sup>4</sup>
Describe terms of warrants, options or other rights
Other compensation <sup>5</sup> Describe
Total compensation paid 17,080.00
Check box if the person will or may receive any deferred compensation (describe the terms below)
<sup>4</sup> Provide the aggregate value of all securities distributed as compensation, <u>excluding</u> options, warrants or other rights exercisable to acquire additional securities of the issuer. Indicate the security codes for all securities distributed as compensation, <u>including</u> options, warrants or other
rights exercisable to acquire additional securities of the issuer.

a) Name of person compensated and registration status	
Indicate whether the person compensated is a registrant. V No Yes	
If the person compensated is an individual, provide the name of the individual.	
Full legal name of individual   Sangha   Jagdeep	
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. 🚺 No	Yes
b) Business contact information	
If a firm NRD number is not provided in Item 8 (a), provide the business contact information of the person being compensated.	
Street address 612 Nicola Avenue	
Municipality Coquitlam Province/State British Columbia	
Country Canada Postal code/Zip code V3J 7T7	
Email address Telephone number	
c) Relationship to issuer or investment fund manager	
Indicate the person's relationship with the issuer or investment fund manager (select all that apply). Refer to the meaning of "connected" in Pa	rt
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 manage	r
✓ 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 amo 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 on, internal allocation arrangements with the directors, officers or employees of a non-individual compensated by the issuer.	r
Cash commissions paid 10,050.00 Security codes Security code 1 Security code 2 Security code 2	code 3
Value of all securities distributed as compensation <sup>4</sup>	
Describe terms of warrants, options or other rights	
Other compensation <sup>5</sup> Describe	
Total compensation paid 10,050.00	
Check box if the person will or may receive any deferred compensation (describe the terms below) <sup>4</sup> Provide the aggregate value of all securities distributed as compensation, <u>excluding</u> options, warrants or other rights exercisable to acquire additional securities of the issuer. Indicate the security codes for all securities distributed as compensation, <u>including</u> options, warrants or other security codes for all securities distributed as compensation.	

rights exercisable to acquire additional securities of the issuer. <sup>5</sup>Do not include deferred compensation.

a) Name of person com	pensated and registratior	n status					
Indicate whether the perso	on compensated is a registrar	nt.	🗌 No	$\checkmark$	] Yes		
If the person compensated is	an individual, provide the no	ame of the indi	vidual.				
Full legal name of indiv	vidual						
	Family nam	e	Fir	st given name	Se	condary given na	mes
If the person compensated	is not an individual, provide	the following ir	nformation.				
Full legal nam	e of non-individual Ray	mond James					
F	Firm NRD number 8	2 4	0		(if ap	plicable)	
Indicate whether the persor	n compensated facilitated the	distribution th	rough a fui	nding portal	or an internet-bo	ised portal.	🖌 No 🗌 Yes
b) Business contact info	ormation						
If a firm NRD number is not	provided in Item 8 (a), provic	le the business	contact info	ormation of	the person being	compensated.	
Street address	2100- 925 West Georga	Street					
Municipality	Vancouver				Province/State	British Co	lumbia
Country	Canada			Postal	code/Zip code	V6C 3L2	
Email address				Tele	phone numbe	60465980	00
c) Relationship to issue	r or investment fund man	ager					
Indicate the person's relation	-		-		•	-	nnected" in Part
B(2) of the Instructions and t	-		45-106 for				
	uer or investment fund mana	-			er of the issuer (c		,
	the investment fund or inves	tment fund ma	anager		byee of the issue	er or investment	tund manager
✓ None of the above							
d) Compensation details							
Provide details of all compen Canadian dollars. Include cas							
services incidental to the distion on, internal allocation arrang							etails about, or report
			yees of a m	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	i compensatea D	, the issuer.	
Cash commissions p	· · · · · · · · · · · · · · · · · · ·	S	Security coo	les	Security code 1	Security code	2 Security code 3
Value of all securiti distributed					W N T		
compensatio							
Describe	terms of warrants, options o	r other rights	14,000 w	arrants ex	ercise price \$1	.00 for 2 year	S.
Other compensation	on <sup>5</sup>	Describe					
Total compensation pa	aid 3,500.00						
Check box if the pe	erson will or may receive an	y deferred com	pensation	(describe th	e terms below)		
<sup>4</sup> Provide the aggregate value							
additional securities of the is rights exercisable to acquire			curities dis	INDUTED AS C	compensation, <u>in</u>	<u>ciuaing</u> options	, warrants or other

a) Name of person compe	ensated and registration status		
Indicate whether the person	compensated is a registrant.	o 🗌 Yes	
If the person compensated is a	n individual, provide the name of the individual.		
Full legal name of individ	dual		
	Family name	First given name S	econdary given names
If the person compensated is	not an individual, provide the following informati	on.	
Full legal name of	of non-individual ComverJ Pty Ltd.		
Fir	rm NRD number	(if a	pplicable)
Indicate whether the person c	compensated facilitated the distribution through c	funding portal or an internet-L	oased portal. 🗹 No 🗌 Yes
b) Business contact inforr	mation		
If a firm NRD number is not pr	rovided in Item 8 (a), provide the business contact	information of the person being	g compensated.
Street address 3	37 the Circus		
Municipality E	Burswood	Province/Stat	e Western Australia
Country A	Australia	Postal code/Zip cod	e 6100
Email address		Telephone numbe	er
c) Relationship to issuer c	or investment fund manager		
Indicate the person's relationsh	hip with the issuer or investment fund manager (s e meaning of "control" in section 1.4 of NI 45-106		
Connect with the issue	er or investment fund manager	Insider of the issuer	(other than an investment fund)
Director or officer of the	e investment fund or investment fund manager	Employee of the issu	er or investment fund manager
None of the above			
d) Compensation details			
Canadian dollars. Include cash services incidental to the distrib	tion paid, or to be paid, to the person identified ir commissions, securities-based compensation, gift bution, such as clerical, printing, legal or accounti ments with the directors, officers or employees of	s, discounts or other compensat ng services. An issuer is not requ	ion. Do not report payments for iired to ask for details about, or report
Cash commissions paid	id 14,310.52 Security	codes Security code ?	Security code 2 Security code 3
Value of all securities distributed as compensation	s s		
Describe te	erms of warrants, options or other rights		
Other compensation	<sup>5</sup> Describe		
Total compensation paid			
Check box if the pers	son will or may receive any deferred compensat	ion (describe the terms below)	
additional securities of the iss	of all securities distributed as compensation, <u>ex</u> suer. Indicate the security codes for all securities additional securities of the issuer.		

a) Name of person compen-	sated and registration	on status							
Indicate whether the person co	ompensated is a registro	int.	🗌 No	$\checkmark$	Yes				
If the person compensated is an i	individual, provide the r	name of the ind	ividual.						
Full legal name of individu	al								ĺ
	Family na	me	Firs	t given name	•	Secon	dary given r	ames	
If the person compensated is no	t an individual, provide	the following in	nformation.						
Full legal name of	non-individual Mac	kie Research	Capital Co	rporation					
Firm	NRD number 3	0 7	0			(if applic	cable)		
Indicate whether the person con	npensated facilitated th	ne distribution th	hrough a fun	ding portal	or an inter	net-based	l portal.	V N	o 🗌 Yes
b) Business contact informa	ation								
If a firm NRD number is not prov	ided in Item 8 (a), prov	ide the business	contact info	rmation of a	the person	being cor	mpensated.		
Street address									
Municipality			]		Province/	/State			
Country			1	Postal	code/Zip	code			
Email address			-	Tele	phone nu	ımber			
c) Relationship to issuer or	investment fund ma	nager							
Indicate the person's relationship B(2) of the Instructions and the n Connect with the issuer of Director or officer of the i	neaning of "control" in s	section 1.4 of Na	1 45-106 for a	the purpose.		eting this suer (othe	section. er than an i	nvestmen	t fund)
d) Compensation details									
Provide details of all compensation Canadian dollars. Include cash co services incidental to the distribut on, internal allocation arrangeme	mmissions, securities-b ion, such as clerical, pro	ased compensa inting, legal or c	tion, gifts, dis accounting se	scounts or o ervices. An is	other compe ssuer is not	ensation. required	Do not rep to ask for	ort payme	nts for
Cash commissions paid	33,862.50	2	Security cod	es	Security c	ode 1	Security coo	de 2 Sec	curity code 3
Value of all securities distributed as compensation⁴					W N	Т			
Describe term	is of warrants, options	or other rights	135,450	warrants, e	exercise p	orice of \$	\$1.00 for 2	2 years	
Other compensation <sup>5</sup>		Describe						· · · · · · · · · · · · · · · · · · ·	
Total compensation paid	33,862.50	i							
Check box if the person	n will or may receive a	ny deferred cor	npensation (	describe the	e terms be	low)			
<sup>4</sup> Provide the aggregate value of additional securities of the issue rights exercisable to acquire additional securities and the securities and	er. Indicate the security	codes for all se							

a) Name of person compensated and registration status
Indicate whether the person compensated is a registrant. No Yes
If the person compensated is an individual, provide the name of the individual.
Full legal name of individual
Family name First given name Secondary given names
If the person compensated is not an individual, provide the following information.
Full legal name of non-individual 1085501 BC Ltd.
Firm NRD number (if applicable)
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal. 🗸 No 🗌 Yes
b) Business contact information
If a firm NRD number is not provided in Item 8 (a), provide the business contact information of the person being compensated.
Street address #9 2590 Panorama Drive
Municipality CoquitIam Province/State British Columbia
Country Canada Postal code/Zip code V3E 2W9
Email address Telephone number
c) Relationship to issuer or investment fund manager
<ul> <li>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.</li> <li>Connect with the issuer or investment fund manager</li> <li>Director or officer of the investment fund or investment fund manager</li> <li>Mone of the above</li> </ul>
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     14,000.00       Security codes     Security code 1       Security code 2     Security code 3
Value of all securities distributed as compensation <sup>4</sup>
Describe terms of warrants, options or other rights
Other compensation <sup>5</sup> Describe
Total compensation paid 14,000.00
Check box if the person will or may receive any deferred compensation (describe the terms below)
<sup>4</sup> Provide the aggregate value of all securities distributed as compensation, <u>excluding</u> options, warrants or other rights exercisable to acquire additional securities of the issuer. Indicate the security codes for all securities distributed as compensation, <u>including</u> options, warrants or other rights exercisable to acquire additional securities of the issuer. <sup>5</sup> Do not include deferred compensation.

a) Name of person compensated and registration status	
Indicate whether the person compensated is a registrant. 🔲 No 📝 Yes	
If the person compensated is an individual, provide the name of the individual.	
Full legal name of individual	
Family name First given name Secondary given names	
If the person compensated is not an individual, provide the following information.	
Full legal name of non-individual PI Financial Corp.	
Firm NRD number 5 2 9 0 (if applicable)	
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal. 🗹 No 🗌	Yes
b) Business contact information	
If a firm NRD number is not provided in Item 8 (a), provide the business contact information of the person being compensated.	
Street address 1900- 666 Burrard Street	
Municipality Vancouver Province/State British Columbia	
Country Canada Postal code/Zip code V6C 3N1	
Email address Telephone number	
c) Relationship to issuer or investment fund manager	
Indicate the person's relationship with the issuer or investment fund manager (select all that apply). Refer to the meaning of "connected" in Part B(2) of the Instructions and the meaning of "control" in section 1.4 of NI 45-106 for the purposes of completing this section.         □       Connect with the issuer or investment fund manager       □       Insider of the issuer (other than an investment fund)         □       Director or officer of the investment fund or investment fund manager       □       Employee of the issuer or investment fund manager         ✓       None of the above       □       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 amount 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.	
Security codes Security code 1 Security code 2 Security code	÷ 3
Value of all securities distributed as compensation <sup>4</sup>	
Describe terms of warrants, options or other rights 207,970 warrants, Exercise price of \$1.00 for 2 years	
Other compensation <sup>5</sup> Describe	4
Total compensation paid 51,992.50	
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 othe rights exercisable to acquire additional securities of the issuer.	ər

a) Name of person comp	pensated and registration sta	itus				
Indicate whether the person	n compensated is a registrant.		No	🖌 Yes		
If the person compensated is	an individual, provide the name	of the indivia	lual.			
Full legal name of indiv	vidual					
	Family name		First given	name	Seco	ndary given names
If the person compensated is	s not an individual, provide the fo	ollowing info	rmation.			
Full legal name	of non-individual Canaccor	d Genuity	Corp.			
Fi	irm NRD number 9 (	0 0			(if appl	icable)
Indicate whether the person	compensated facilitated the dist	ribution thro	ugh a funding p	ortal or an inter	rnet-base	ed portal. 🗹 No 🗌 Yes
b) Business contact infor	rmation					
If a firm NRD number is not p	provided in Item 8 (a), provide the	e business co	ntact informatio	on of the person	being co	ompensated.
Street address	609 Granville Street, Suite 2	200				
Municipality	Vancouver			Province	/State	British Columbia
Country	Canada		Р	ostal code/Zip	code	V7Y 1H2
Email address				Telephone nu	umber	
c) Relationship to issuer	or investment fund manager	 r				
-	ship with the issuer or investmen he meaning of "control" in sectior	-	-			-
	ier or investment fund manager				-	er than an investment fund)
Director or officer of the	he investment fund or investmer	nt fund mana	ager 🔲	Employee of the	e issuer (	or investment fund manager
None of the above			_			
d) Compensation details	;					
Canadian dollars. Include cash services incidental to the distri	h commissions, securities-based o	compensation legal or acco	n, gifts, discount ounting services	s or other comp . An issuer is no	ensation t require	d to ask for details about, or report
Cash commissions pa	aid 1,050.00	Sec	curity codes	Security	code 1	Security code 2 Security code 3
Value of all securitie distributed a compensatio	as		,	W N	Т	
Describe to	erms of warrants, options or oth	er rights 4	.200 Warrant	s with an exer	cise pri	ce \$1.00 for 2 years.
Other compensation	n <sup>5</sup>	Describe				
Total compensation pa	id 1,050.00					
Check box if the pe	erson will or may receive any def	erred compe	ensation (descri	be the terms be	elow)	
additional securities of the is	e of all securities distributed as o suer. Indicate the security codes additional securities of the issue	s for all secu				

ITEM 9 - DIRECTC	RS, EXECUTI	VE OFFICERS A	ND PROMO	TERS OF THE I	SSUER					
If the issuer is an in	vestment fund,	do not complete Ite	em 9. Procced to	o Item 10.						
Indicate whether the	issuer is any of th	e following (select a	ll that apply).							
Reporting issu	ier in any jurisdio	ction of Canada								
Foreign public	issuer									
Wholly owned	subsidiary of a	reporting issuer in a	iny jurisdiction of	f Canada <sup>6</sup>						
	Provide name	of reporting issuer								
Wholly owned subsidiary of a foreign public issuer <sup>6</sup>										
Pro	ovide name of fo	reign public issuer								
Issuer distributing eligible foreign securities only to permitted clients <sup>7</sup>										
If the issuer is at lea	ist one of the al	oove, do not compl	ete Item 9(a) –	(c). Proceed to Ite	<i>m 10</i> .					
<sup>6</sup> An issuer is a wholly securities that are req <sup>7</sup> Check this box if it ap clients. Refer to the de	uired by law to b plies to the curre finitions of "eligi	e owned by its direc ent distribution even	ctors, are benefic of the issuer ma and "permitted	cially owned by the de previous distrib client" in Part B(1)	reporting issuer utions of other ty	or the foreig pes of secu	n publ	ic issue	er, respectively.	
a) Directors, exe	cutive officers a	and promoters of	the issuer							
Provide the following territory; otherwise s							da, stai	te the p	province or	
Organization or	Organization or company name	Family name	First given name	Secondary give names	Business location of non-individual or residentail jurisdiction of individual		Relationship to issuer (select all that apply)		that	
					Province o	r country	D	0	Р	
b) Promoter infor	mation									
If the promoter listed within Canada, state	l above is not an		-				-			
Organization or	company name	Family name	First given name		Secondary given names Residential		of (select one or both if			
					Province or country	D		C	)	
c) Residential ad	dress of each i	ndividual								
Complete Schedule	? of this form pr	oviding the full re	sidential addre	ss for each individ	lual listed in Ite	m 9(a) and	(b) an	d attac	:h to the	

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

## **ITEM 10 - CERTIFICATION**

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

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

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

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

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

I have read and understand this report; and

all of the information provided in this report is true.

Full legal name	Thurston	Brian	
	Family name	First given name	Secondary given names
Title	President		
Name of issuer/underwriter/ investment fund manager	Canadian Mining Corp.		
Telephone number	7789286565	Email address brian_tfo	c@hotmail.com
Signature	Brian Thurston	Date 2017	08 14
		YYYY	MM DD

### **ITEM 11- CONTACT PERSON**

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

Full legal name	Moulton	Veronica		Title Paralegal
-	Family name	First given name	Secondary given names	
lame of company	Canadian Mining Corp.			

#### 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 a) 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
- has authorized the indirect collection of the information by the securities regulatory authority or regulator. b)