Form 45-106F1 Report of Exempt Distribution

BCSC EDER Reference Number 9283355

ITEM 1 - REPORT TYPE										
✓ New report										
☐ Amended report If amer	nded, provide filing date	of report that is being ar	nended	(YYYY-MM-DD)						
ITEM 2 - PARTY CERTIFYING THE	ITEM 2 - PARTY CERTIFYING THE REPORT									
Indicate the party certifying the report (select only one). For guidance regarding whether an issuer is an investment fund, refer to section 1.1 of National Instrument 81-106 Investment Fund Continuous Disclosure and the companion policy to NI 81-106.										
Investment fund issuer										
✓ Issuer (other than an inves	tment fund)									
Underwriter	unoni rana)									
_										
ITEM 3 - ISSUER NAME AND OT										
Provide the following information about th		vestment fund, about the fund.								
Full legal name	Il legal name GlobeX Data Ltd.									
Previous full legal name										
If the issuer's name changed in the	e last 12 months, provide most	recent previous legal name.								
Website	www.globexdatagroup.	com (if applica	ble)							
If the issuer has a legal entity identifier, pro	ovide below. Refer to Part B of t	he Instructions for the definitio	n of "legal entity identifier".							
Legal entity identifier										
If two or more issuers distributed a single s	ecurity, provide the full legal no	ame(s) of the co-issuer(s) other	than the issuer named above	2.						
Full legal name(s) of co-issuer(s)		(if applica	ble)							
ITEM A. HANDEDWEITED INFORM	MATION									
ITEM 4 - UNDERWRITER INFORM										
If an underwriter is completing the report,	provide the underwriter's full le	gal name and firm NRD numb	er.	٦						
Full legal name										
Firm NRD number		(if applicable)								
If the underwriter does not have a firm NR	D number, provide the head off	ice contact information of the ι	ınderwriter.							
Street address										
Municipality		Province/State	rovince/State							
Country		Postal code/Zip code								
Telephone number		Website		(if applicable)						

If the issuer is an investment fund, do not complete item 5. Proceed to Item 6. a	Item 5 - Issuer Information
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	If the issuer is an investment fund, do not complete Item 5. Proceed to Item 6.
All CS industry code	a) Primary industry
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 Number of employees V 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 5 1 0 8 If the issuer does not have SEDAR profile complete item 5(d) - (h). d) Head office address Province/State Municipality Postal code/Zip code Country Postal code/Zip code Country Telephone number Date of formation and financial year-end Date of formation and financial year-end Province/State Postal code/Zip code Telephone number Phase of formation and financial year-end Amount Postal code/Zip code Telephone number Province/State Amount Province/State Amount Province/State Province/State Postal code/Zip code Telephone number Province/State Amount Province/State Province/State Postal code/Zip code Telephone number Province/State Postal code/Zip code Telephone number Province/State Postal code/Zip code Telephone number Province/State Amount Province/State Amount	
mining industry. Select the category that best describes the issuer's stage of operations. Exploration Development Production	NAICS industry code 5 1 1 2 1 0
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	mining industry. Select the category that best describes the issuer's stage of operations.
Mortgages Real estate Commercial/business debt Consumer debt Private companies Cryptoassets	
Cryptoassets b) Number of employees Number of employees:	
Number of employees:	
c) SEDAR profile number Does the issuer have a SEDAR profile? No Yes If yes, provide SEDAR profile number 0 0 0 4 5 1 0 8 If the issuer does not have SEDAR profile complete item 5(d) - (h). d) Head office address Street address Municipality Country Postal code/Zip code Telephone number e) Date of formation and financial year-end Date of formation Financial year-end 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. MB NB NB NL NT	b) Number of employees
Does the issuer have a SEDAR profile? No	Number of employees: ✓ 0 - 49 ☐ 50 - 99 ☐ 100 - 499 ☐ 500 or more
If yes, provide SEDAR profile number 0 0 0 4 5 1 0 8 If the issuer does not have SEDAR profile complete item 5(d) - (h). d) Head office address Street address Municipality Country Postal code/Zip code Telephone number Date of formation and financial year-end YYYY MM DD Financial year-end MM DD Financial year-end 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. All AB BC MB NB NB NL NT	c) SEDAR profile number
If the issuer does not have SEDAR profile complete item 5(d) - (h). d) Head office address Street address Province/State Postal code/Zip code Country Telephone number e) Date of formation and financial year-end Date of formation Tyyyy MM DD Financial year-end 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. All AB BC MB NB NB NL NT	Does the issuer have a SEDAR profile?
d) Head office address Street address	No ✓ Yes If yes, provide SEDAR profile number 0 0 0 4 5 1 0 8
Street address	
Municipality Postal code/Zip code Telephone number e) Date of formation and financial year-end Date of formation Financial year-end 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. All AB BC MB NB NB NL NT	d) Head office address
Country Telephone number Date of formation and financial year-end Date of formation Financial year-end 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. All AB BC MB NB NL NT	Street address Province/State
e) Date of formation and financial year-end Date of formation Financial year-end YYYYY MM DD Financial year-end 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. All AB BC MB NB NB NL NT	Municipality Postal code/Zip code
Date of formation	Country Telephone number
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. All AB BC MB NB NL NT	e) Date of formation and financial year-end
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. All AB BC MB NB NL NT	
If yes, select the jurisdictions of Canada in which the issuer is a reporting issuer. All AB BC MB NB NL NT	f) Reporting issuer status
AII AB BC MB NB NL NT	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.
NS NU ON PE QC SK YT	AII AB BC MB NB NL NT
	NS NU ON PE QC SK YT
g) Public listing status	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	Exchange name
h) Size of issuer's assets	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 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						
Country	Postal code/Zip code						
Telephone number	Website (if applicable)						
b) Type of investment	fund						
Type of investment fund tha	it most accurately identifies the issuer (select only one) .						
Money market	☐ Equity ☐ Fixed income ☐ Balanced						
Alternative strate	gies Cryptoasset Other (describe)						
Indicate whether one or bot	h of the following apply to the investment fund .						
Invests primarily in	n other investment fund issuers						
☐ Is a UCITs Fund¹							
	tive Investment of Transferable Securities funds (UCITs Funds) are investment funds regulated by the European Union of 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 forma	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	s 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 on							
-	AV) of the investment fund						
	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.

١.	_	
a)	Currency	1
a	Ouricity	

Select the currency or currencies in which the distribution was made. All dollar amounts provided in the report must be in Canadian dollars.

✓ Canadian dollar US dollar □ Euro □ Other (describe)

b) Distribution date(s)

State the distribution start and end dates. If the report is being filed for securities distributed on only one distribution date, provide the distribution date as both the start and end dates. If the report is being filed for securities distributed on a continuous basis, include the start and end dates for the distribution period covered by the report.

Start date 2020 10 27

YYYY MM DD

End date 2020 10 27

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
U B S	379581	Common Shares and Warrants	2,504,182.00	0.1200	0.1200	300,501.84

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.

	exch	nvertib nangea urity c	able		nderlyi curity c	•		se price adian \$)	Expiry date (YYYY- MM-DD)	Conversion ratio	Describe other items (if applicable)		
					Lowest	Highest							
	W	N	Т	С	М	S	0.1500	0.1500	2022-10-27	1:1			

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 ² purchasers	Total amount (Canadian \$)				
Québec	NI 45-106 2.5 [Family, friends and business associates]	1	4,999.92				
Ontario	NI 45-106 2.5 [Family, friends and business associates]	1	2,499.96				
British Columbia	NI 45-106 2.5 [Family, friends and business associates]	1	18,000.00				
British Columbia	NI 45-106 2.3 [Accredited investor]	6	151,002.00				
Switzerland	NI 45-106 2.3 [Accredited investor]	2	123,999.96				
	300,501.84						
	Total number of unique purchasers ² b 11						

^{2a} In calculating the number of unique purchasers per row, count each purchaser only once. Joint purchasers may be counted as one purchaser.

2b	In calculating the total number of unique purchasers to which the issuer distributed securities, count each purchaser only once, regardless of whe	ether
	the issuer distributed multiple types of securities to, and relied on multiple exemptions for, that purchaser	

g) Net proceeds to the investment fund by jurisdiction

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

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

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

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

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

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

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

TEM 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, indica	te numb	er of perso	ns comp	ensate	d.	2	2				
a) Name of person compe	ensated and regis	tration st	tatus									
Indicate whether the person com	pensated is a registi	ant.		☐ No		\checkmark	Yes					
If the person compensated is an	individual, provide t	he name d	of the individ	dual.								
Full legal name of indivi	dual											
	ı	amily nam	е	•	First	given na	ame		Se	condary g	iven nam	nes
If the person compensated is not	•		-	mation.								
Full legal name	of non-individual	PI Finar	ncial Corp.									
Fi	m NRD number	5	2 9	0				(if app	licable)			
Indicate whether the person con	pensated facilitated	the distril	bution throu	gh a fund	ing porta	ıl or an	interne	t-based រុ	oortal.] No	✓ Yes
b) Business contact inform	nation											
If a firm NRD number is not pro	vided in Item 8 (a), p	rovide the	business co	ntact info	rmation	of the p	erson b	eing con	npensatea	!.		
Street address												
Municipality						Pr	rovince	e/State				
Country				Postal code/Zip code								
Email address						Telepl	hone n	umber				
c) Relationship to issuer of	or investment fund	l manage	er									
Indicate the person's relationship the Instructions and the meaning									aning of "	connecte	d" in Pa	rt B(2) of
Connect with the issue	er or investment fund	d manage	er		☐ li	nsider d	of the is	suer (oth	ner than a	ın investı	ment fur	nd)
Director or officer of the	e investment fund c	r investm	ent fund ma	nager		Employe	ee of th	e issuer	or investr	nent fund	d manaç	ger
✓ None of the above												
d) Compensation details												
Provide details of all compensations and compensations and compensations are incidental to the distribution, such allocation arrangements with the	ommissions, securitie h as clerical, printing directors, officers of	es-based c g, legal or r employe	ompensatio accounting	n, gifts, dis services. A	scounts o n issuer	r other is not re	compei equired	nsation. I to ask fo	Do not rep	ort payn	nents fo	r services
Cash commissions pai	d 4,32	20.00					Security	code 1	Security	code 2	Security	/ code 3
Value of all securities distributed as compensation			5	Security co	odes		ОТ	Н				
Describe to	rms of warrants, op	tions or o	ther rights									
Other compensation	5		Describe									
Total compensation pai	d 4,32	20.00										
Check box if the per	son will or may rece	ive any d	eferred con	npensatior	ı (descril	oe the t	erms b	elow)				
⁴ Provide the aggregate value o additional securities of the issu- rights exercisable to acquire ad ⁵ Do not include deferred compa	er. Indicate the secu ditional securities of	rity codes	ร for all secu									

a) Name of person compensated and registration status											
Indicate whether the person comp	ensated is a registr	ant.		No	\checkmark	Yes					
If the person compensated is an individual, provide the name of the individual.											
Full legal name of individ	ual										
	F	amily name	I	Fir	rst given r	name		Seco	ndary g	iven names	3
If the person compensated is not o	an individual, provi	de the following	informati	ion.							
Full legal name of non-individual Canaccord Genuity Corp.											
Firm NRD number 9 0 0 (if applicable)						olicable)					
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal. Ves											
b) Business contact inform	ation										
If a firm NRD number is not provi	ded in Item 8 (a), p	rovide the busin	ess contac	ct informatio	on of the	person b	being cor	mpensated.			
Street address											
Municipality					F	Province	e/State				
Country					Postal o	code/Zi	p code				
Email address					Telep	ohone r	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											
✓ 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	sid 960.00 Security code 1 Security code 2 Sec					Security c	ode 3				
Value of all securities			Secu	rity codes							
distributed as compensation ⁴						·					
Describe terms of warrants, options or other rights											
Other compensation ⁵		Desc	ribe								
Total compensation paid	96	0.00									
Check box if the person will or may receive any deferred compensation (describe the terms below)											
⁴ Provide the aggregate value of a											
additional securities of the issuer rights exercisable to acquire add ⁵ Do not include deferred comper	litional securities of		i Securitie	s uistriduted	ı as com	pensatio	λΙΙ, <u>ΙΠCΙU</u>	<u>uiriy</u> options	, warra	aries or oth	·el
_ c not morado dolorios compen											

тем 9 - Directors, Execu	TIVE OFFICERS	AND PROMOT	ERS OF THE ISS	SUER					
If the issuer is an investment fund, do not complete Item 9. Procced to Item 10.									
Indicate whether the issuer is any o	f the following (select	t the one that appli	es - if more than one	applies, select onl	y one).				
✓ Reporting issuer in any juris	sdiction of Canada								
Foreign public issuer									
Wholly owned subsidiary of a reporting issuer in any jurisdiction of Canada ⁶									
Provide name of reporting issuer									
Wholly owned subsidiary of a foreign public issuer ⁶									
Provide name of foreign public issuer									
Issuer distributing only eligil	Issuer distributing only eligible foreign securities and the distribution is to permitted clients only ⁷								
If the issuer is at least one of the	above, do not comp	olete Item 9(a) – (d	c). Proceed to Item	10.					
⁶ An issuer is a wholly owned subsidiary of a reporting issuer or a foreign public issuer if all of the issuer's outstanding voting securities, other than securities that are required by law to be owned by its directors, are beneficially owned by the reporting issuer or the foreign public issuer, respectively. ⁷ Check this box if it applies to the current distribution even if the issuer made previous distributions of other types of securities to non-permitted clients. Refer to the definitions of "eligible foreign security" and "permitted client" in Part B(1) of the Instructions.									
If the issuer is none of the above, check this box and complete Item 9(a) - (c).									
a) Directors executive officer	e and promoters of	of the issuer							
a) Directors, executive officers and promoters of the issuer Provide the following information for each director, executive officer and promoter of the issuer. For locations within Canada, state the province or									
territory; otherwise state the country.							province		
Organization or company name	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 country		D	0	Р	
b) Promoter information									
If the promoter listed above is not an individual, provide the following information for each director and executive officer of the promoter. For locations within Canada, state the province or territory; otherwise state the country. For "Relationship to promoter", "D" – Director, "O" – Executive Officer.									
Organization or company name	Family name	First given name	Secondary given names	Residential jurisdiction of individual	jurisdiction of (select o		ationship to promoter one or both if applicable)		
				Province or country	r 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	Globex Data Ltd.							
Full legal name	Murphy							
	Family name	First given name	'	Seconda	ary given n	ames		
Title	Administrative Assistant							
Telephone number	604558430023	Email address	fmurphy@crossdavis.com					
Signature	Frances Murphy	Date 202		11	06			
			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.							
Same as individua	I certifying the report						
Full legal name				Title			
	Family name	First given name	Secondary given names				
Name of company							
Telephone number		Er	mail address				

Notice - Collection and use of personal information

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

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

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

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

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