Form 45-106F1 Report of Exempt Distribution

BCSC EDER Reference Number 9181616

ITEM 1 - REPORT TYPE								
✓ New report								
☐ Amended report If amended								
ITEM 2 - PARTY CERTIFYING THE RE	PORT							
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	s Disclosure and the compl	amon policy to tvi	07 700.					
✓ Issuer (other than an investme	ent fund)							
Underwriter	in rana,							
ITEM 3 - ISSUER NAME AND OTHER								
Provide the following information about the issu			out the fund.					
	ion Nutraceuticals In	C.						
Previous full legal name								
If the issuer's name changed in the last	If the issuer's name changed in the last 12 months, provide most recent previous legal name.							
Website (if applicable)								
If the issuer has a legal entity identifier. provide	below. Refer to Part B of t	he Instructions for	the definition o	of "legal entity identifier".				
Legal entity identifier								
If two or more issuers distributed a single securi	ity, provide the full legal no	nme(s) of the co-is:	suer(s) other th	an the issuer named above	?.			
Full legal name(s) of co-issuer(s)			(if applicable	e)				
ITEM A LINDEDWOLTED INCODMAT								
ITEM 4 - UNDERWRITER INFORMAT								
If an underwriter is completing the report, provi	ide the underwriter's full le	gal name and firm	NRD number.		1			
Full legal name								
Firm NRD number (if applicable)								
If the underwriter does not have a firm NRD number, provide the head office contact information of the underwriter.								
Street address								
Municipality		Pro	vince/State					
Country		Postal cod	de/Zip code					
Telephone number			Website		(if applicable)			

ITEM 5 - ISSUER INFORMATION
If the issuer is an investment fund, do not complete Item 5. Proceed to Item 6.
a) Primary industry
Provide the issuer's North American Industry Classification Standard (NAICS) code (6 digits only) that in your reasonable judgment most closely corresponds to the issuer's primary business activity.
NAICS industry code 1 1 1 9 9 9
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
c) SEDAR profile number
Does the issuer have a SEDAR profile?
No
If the issuer does not have SEDAR profile complete item 5(d) - (h).
d) Head office address
Street address Province/State
Municipality Postal code/Zip code
Country Telephone number
e) Date of formation and financial year-end
Date of formation Financial year-end MM DD MM DD
f) Reporting issuer status
Is the issuer a reporting issuer in any jurisdication of Canada? No Yes
If yes, select the jurisdictions of Canada in which the issuer is a reporting issuer.
AII AB BC MB NB NL NT
NS NU ON PE QC SK YT
g) Public listing status
If the issuer has a CUSIP number, provide below (first 6 digits only)
CUSIP number
If the issuer is publicly listed, provide the name of the exchange on which the issuer's equity securities primarily trade. Provide only the name of an exchange and not a trading facility such as for example, an automated trading system.
exchange and not a trading facility such as, for example, an automated trading system. Exchange name
h) Size of issuer's assets
, 5.25 355461 5 466616

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 inves	tment fund, provide the following information.						
a) Investment fund ma	anager information						
Full legal name							
Firm NRD number	(if applicable)						
If the investment fund mand	ager does not have a firm NRD number, provide the head office contact information of the investment fund manager.						
Street address							
Municipality	Province/State						
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							
¹ 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 a	nd financial year-end of the investment fund						
Date of forma	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 jurisdication of Canada? No Yes							
If yes, select the jurisdictions	s of Canada in which the investment fund is a reporting issuer.						
AII	AB BC MB NB NL NT						
☐ NS ☐	NU ON PE QC SK T						
e) Public listing status of the investment fund							
If the investment fund has a CUSIP number, provide below (first 6 digits only)							
CUSIP number							
If the investment fund is publicly listed, provide the name of the exchange on which the investment fund's securities primarily trade. Provide only the name of an exchange and not a trading facility such as, for example, an automated trading system.							
Exchange name							
-	AV) of the investment fund						
Select the NAV range of the investment fund as of the date of the most recent NAV calculation (Canadian \$).							
\$0 to under \$5M	\$5M to under \$25M \$25M to under \$100M						
\$100M to under \$500	DM S500M to under \$1B S1B or over Date of NAV calculation:						
	YYYY MM DD						

ITEM 7 - INFORMATION ABOUT THE DISTRIBUTION

If an issuer located outside of Canada completes a distribution in a jurisdiction of Canada, include in Item 7 and Schedule 1 information about purchasers resident in that jurisdiction of Canada only. Do not include in Item 7 securities issued as payment of commissions or finder's fees in connection with the distribution, which must be disclosed in Item 8. The information provided in Item 7 must reconcile with the information provided in Schedule 1 of the report.

a) (Curren	су
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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.

End date 2020 07 10

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 \$	
5	Securi code	,	CUSIP number (if applicable)	Description of security	Number of securities	Single or lowest Highest price Total am		Total amount
L	В	S	68629J	Each unit consists of one common share and one share purchase warrant.	20,000,000.00	0.1500		3,000,000.00

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.

exc	nvertib hange curity o	able		derlyii urity c			se price adian \$)	Expiry date (YYYY- MM-DD)	Conversion ratio	Describe other items (if applicable)	
						Lowest	Highest				
W	N	Т	С	М	S	0.4000		2022-07-10		Subject to an accelerated expiry if the 10-day volume weighted average price of the Issuer's common shares is greater than \$0.80 per share. The Issuer will give notice to the holders and the warrants will expire 30 days thereafter.	

f) Summary of the distribution by jurisdiction and exemption

State the total dollar amount of securities distributed and the number of purchasers for each jurisdiction of Canada and foreign jurisdiction where a purchaser resides and for each exemption relied on in Canada for that distribution. However, if an issuer located outside of Canada completes a distribution in a jurisdiction of Canada, include distributions to purchasers resident in that jurisdiction of Canada only.

This table requires a separate line item for: (i) each jurisdiction where a purchaser resides, (ii) each exemption relied on in the jurisdiction where a purchaser resides, if a purchaser resides in a jurisdiction of Canada, and (iii) each exemption relied on in Canada, if a purchaser resides in a foreign jurisdiction.

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

Province or country	Exemption relied on	Number of unique ²⁸ purchasers	Total amount (Canadian \$)
Barbados	NI 45-106 2.3 [Accredited investor]	2	126,250.05
Alberta	NI 45-106 2.3 [Accredited investor]	4	130,000.20
British Columbia	NI 45-106 2.3 [Accredited investor]	25	910,579.80

British Columbia	NI 45-106 2.5 [Family, friends and business associates]	1	9,999.90
Nova Scotia	NI 45-106 2.3 [Accredited investor]	2	105,000.00
Ontario	NI 45-106 2.3 [Accredited investor]	23	1,240,474.35
Cayman Islands	Distributions to purchasers outside of local jurisdiction (BC, AB, NB)	1	9,999.90
Cayman Islands	NI 45-106 2.3 [Accredited investor]	1	101,250.00
Mexico	NI 45-106 2.3 [Accredited investor]	1	153,945.75
New Zealand	NI 45-106 2.3 [Accredited investor]	1	10,000.05
Panama	NI 45-106 2.3 [Accredited investor]	1	52,500.00
United States	Distributions to purchasers outside of local jurisdiction (BC, AB, NB)	1	150,000.00
	3,000,000.00		

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

g) Net proceeds to the investment fund by jurisdiction

If the issuer is an investment fund, provide the net proceeds to the investment fund for each jurisdiction of Canada and foreign jurisdiction where a purchaser resides.³ 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)

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

Provide information for each person (as defined in NI 45-106) to whom the issuer directly provides, or will provide, any compensation in connection with the distribution. Complete additional copies of this page if more than one person was, or will be, compensated. Indicate whether any compensation was paid, or will be paid, in connection with the distribution. No Yes If yes, indicate number of persons compensated.	ITEM 8 - COMPENSATION INFORMATION						
No ✓ Yes If yes, indicate number of persons compensated.	Indicate whether any compensation was paid, or will be paid, in connection with the distribution.						
	No ✓ Yes If yes, indicate number of persons compensated. 3						

a) Name of person compen	sated and regis	tration s	tatus										
Indicate whether the person comp	ensated is a regist	rant.		☐ No		\checkmark	Yes						
If the person compensated is an individual, provide the name of the individual.													
Full legal name of individu	ual												
		amily nam	ne		First	given na	ame		Se	econdary	given n	ames	
If the person compensated is not a	ın individual, provi	de the fol	lowing info	rmation.									
Full legal name of	non-individual	Mackie	Research	Capital C	Corporat	tion							
Firm	NRD number	3	0 7	0				(if ap	plicable)				
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal. V No Yes													
b) Business contact information	ation												
If a firm NRD number is not provid	ded in Item 8 (a), p	rovide the	e business c	ontact info	rmation	of the p	oerson	being co	ompensate	d.			
Street address													
Municipality						Р	rovino	e/State	•				
Country					Po	ostal c	ode/Z	ip code	•				
Email address	mail address Telephone number												
c) Relationship to issuer or	investment fund	d manag	er										_
Indicate the person's relationship with the Instructions and the meaning of				-					-	"connect	ed" in I	Part E	3(2) of
Connect with the issuer	or investment fun	d manage	er		☐ Ir	nsider (of the	ssuer (d	other than a	an inves	tment t	fund)	
Director or officer of the	investment fund o	or investm	ent fund m	anager		Employ	ee of t	he issue	er or invest	ment fur	nd man	nager	
✓ 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 c	nmissions, securitions as clerical, printing	es-based c g, legal or	compensation accounting	on, gifts, di services. A	scounts o An issuer	or other is not r	comp equire	ensation d to ask	. Do not re	port pay	ments	for se	ervices
Cash commissions paid	4,19	99.69					Securit	y code 1	Security	code 2	Secu	rity co	ode 3
Value of all securities distributed as compensation ⁴				Security co	odes	,	W	N T					
Describe terms of warrants, options or other rights 27,997 broker warrants exercisable at \$0.15 per share for a period of 1 year from the date of issuance.													
Other compensation ⁵			Describe										
Total compensation paid													
Check box if the person										. ,,			
⁴ Provide the aggregate value of a additional securities of the issuer, rights exercisable to acquire addi ⁵ Do not include deferred compen.	Indicate the secuitional securities o	ırity codes	s for all sec										er

a) Name of person comper	nsated and registr	ation status								
Indicate whether the person comp	ensated is a registra	nt.	☐ No	√	Yes					
If the person compensated is an individual, provide the name of the individual.										
Full legal name of individ	ual									
	Fa	mily name	Firs	st given na	me		Seco	ondary given	names	
If the person compensated is not a	an individual, provid	e the following info	rmation.							
Full legal name of	non-individual	Canaccord Genui	ty Corp.							
Firn	n NRD number	9 0 0			(if applic	cable)			
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal. V No Yes										
b) Business contact inform	ation									
If a firm NRD number is not provi	ded in Item 8 (a), pro	ovide the business c	ontact information	n of the p	erson beir	ng comp	ensated.			
Street address										
Municipality				Pr	ovince/S	tate				
Country			F	Postal co	ode/Zip c	ode				
Email address			1	Telephone number						
c) Relationship to issuer or	investment fund	manager								
Indicate the person's relationship the Instructions and the meaning							ning of "co	onnected" ir	Part I	B(2) of
Connect with the issuer			, , , , , , , , , ,	•	-		er than an	investmen	t fund)	
Director or officer of the	investment fund or	investment fund m	anager \square	Employe	e of the is	ssuer oi	r investm	ent fund ma	ınager	
None of the above			· <u> </u>							
d) Compensation details										
Provide details of all compensation Canadian dollars. Include cash cor incidental to the distribution, such allocation arrangements with the d	nmissions, securities as clerical, printing,	-based compensation legal or accounting	on, gifts, discounts services. An issue	or other or is not re	compensa equired to	ition. Do ask for	o not repo	ort payment	s for se	ervices
Cash commissions paid	3,000).01		8	Security cod	de 1	Security c	ode 2 Sec	curity co	ode 3
Value of all securities distributed as compensation ⁴			Security codes	V	V N	Т				
Describe teri	ms of warrants, option	ons or other rights	20,000 broker period of 2 ye					per share	for a	
Other compensation ⁵		Describe	portou of 2 yo		Tino date	01 100				
Total compensation paid										
Check box if the person	on will or may receiv	/e any deferred cor	mpensation (desc	ribe the te	erms belo	w)				
⁴ Provide the aggregate value of a additional securities of the issuer rights exercisable to acquire add. ⁵ Do not include deferred compensations.	r. Indicate the securi litional securities of t	ity codes for all sec	ion, <u>excluding</u> opti urities distributed	ions, wari as comp	rants or or ensation,	ther righ includir	hts exercing options	isable to act	quire or oth	er

a) Name of person compensated and registration status									
Indicate whether the person co	Indicate whether the person compensated is a registrant. No Yes								
If the person compensated is a	n individual, provide	the name of the indiv	dual.						
Full legal name of indiv	vidual								
		Family name	Firs	t given name		Secondary of	jiven names		
If the person compensated is no	ot an individual, pro	vide the following info	rmation.						
Full legal name	of non-individual	Slash Dam Holdir	ngs Ltd.						
F	Firm NRD number (if applicable)								
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal.									
b) Business contact information									
If a firm NRD number is not pr	ovided in Item 8 (a),	provide the business c	ontact informatior	of the perso	n being com	pensated.			
Street address	409-22 Leader L	ane							
Municipality	Toronto			Provi	nce/State	Ontario			
Country	Canada		j F	Postal code	/Zip code	M5E 0B2			
Email address				Telephon	e number				
c) Relationship to issuer	or investment fu	nd manager							
Indicate the person's relationship with the issuer or investment fund manager (select all that apply). Refer to the meaning of "connected" in Part B(2) of the Instructions and the meaning of "control" in section 1.4 of NI 45-106 for the purposes of completing this section. Connect with the issuer or investment fund manager Insider of the issuer (other than an investment fund)									
<u> </u>		-	_		,				
Director or officer of t	the investment fund	or investment fund m	anager	Employee o	f the issuer o	r investment fun	d 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 pa	aid			Secu	rity code 1	Security code 2	Security co	de 3	
Value of all securition distributed as compensation	150	600.30	Security codes	С	M S	W N T			
Describe terms of warrants, options or other rights 1,064,002 common shares and 1,064,002 broker warrants exercisable at \$0.40 per share for a period of 2 years from the date of issuance.									
Other compensation	on ⁵	Describe							
Total compensation paid									
Check box if the person will or may receive any deferred compensation (describe the terms below)									
⁴ Provide the aggregate value additional securities of the iss rights exercisable to acquire a ⁵ Do not include deferred comp	uer. Indicate the sea additional securities	curity codes for all sec						er	

тем 9 - Directors, Execu	TIVE OFFICERS	AND PROMOT	ERS OF THE ISS	SUER						
If the issuer is an investment fund	d, do not complete l	Item 9. Procced to	Item 10.							
Indicate whether the issuer is any o	f the following (select	t the one that appli	es - if more than one	applies, select onl	y one).					
✓ Reporting issuer in any juris	sdiction of Canada									
Foreign public issuer										
Wholly owned subsidiary of	a reporting issuer in	any jurisdiction of	Canada ⁶							
Provide nan	ne of reporting issue	r						7		
Wholly owned subsidiary of	a foreign public issu	uer ⁶						_		
Provide name of	foreign public issue	r						7		
Issuer distributing only eligil	ble foreign securities	and the distribution	n is to permitted clie	ents only ⁷				_		
If the issuer is at least one of the	above, do not comp	olete Item 9(a) – (d	c). Proceed to Item	10.						
⁶ An issuer is a wholly owned subsidiary of a reporting issuer or a foreign public issuer if all of the issuer's outstanding voting securities, other than securities that are required by law to be owned by its directors, are beneficially owned by the reporting issuer or the foreign public issuer, respectively. ⁷ Check this box if it applies to the current distribution even if the issuer made previous distributions of other types of securities to non-permitted clients. Refer to the definitions of "eligible foreign security" and "permitted client" in Part B(1) of the Instructions.										
If the issuer is none of the	If the issuer is none of the above, check this box and complete Item 9(a) - (c).									
a) Directors executive officer	e and promoters of	of the issuer								
a) Directors, executive officers and promoters of the issuer Provide the following information for each director, executive officer and promoter of the issuer. For locations within Canada, state the province or										
territory; otherwise state the country.							province			
Organization or company name	Organization or company name Family name Organization or company name First given name Secondary given names Secondary given names Secondary given names Business location of non-individual or residentail jurisdiction of individual Relationship to issuer (select all that apply)									
				Province or	D	0	Р			
b) Promoter information										
If the promoter listed above is not an individual, provide the following information for each director and executive officer of the promoter. For locations within Canada, state the province or territory; otherwise state the country. For "Relationship to promoter", "D" – Director, "O" – Executive Officer.										
Organization or company name Family name First given name Secondary given names Residential jurisdiction of individual Relationship to promo (select one or both if app										
				Province or country	D		C)		
c) Residential address of each individual										
Complete Schedule 2 of this form completed report. Schedule 2 also					(a) and (b)	and at	tach to t	he		

ITEM 10 - CERTIFICATION

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

The certification may be delegated, but only to an agent that has been authorized by an officer or director of the issuer or underwriter to prepare and certify the report on behalf of the issuer or underwriter. If the report is being certified by an agent on behalf of the issuer or underwriter, provide the applicable information for the agent in the boxes below.

If the individual completing and filing the report is different from the individual certifying the report, provide the name and contact details for the individual completing and filing the report in Item 11.

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

Securities legislation requires an issuer or underwriter that makes a distribution of securities under certain prospectus exemptions to file a completed report of exemt distribution.

By completing the information below, I certify, on behalf of the issuer/underwriter/investment fund manager, to the securities regulatory authority or regulator, as applicable, that I have reviewed this report and to my knowledge, having exercised reasonable diligence, the information provided in this report is true and, to the extent required, complete.

Name of issuer/underwriter/ investment fund manager/agent	Orion Nutraceuticals Inc.					
Full legal name	Dumaresq					
	Family name	First given name	'	Seconda	ary given na	ames
Title	CEO & Director					
Telephone number	6043363195	Email address	joel@pas	hleth.cor	m	
Signature	"Joel Dumaresq" Date			07	20	
			YYYY	MM	DD	

ITEM 11- CONTACT I	PERSON					
. 3	iness contact information for this report, if different than t		3	,	egulator n	nay contact with any questions
Same as individua	al certifying the report					
Full legal name	Alvarez	Diana			Title	Corporate Advisor
	Family name	First given nam	ne Secondary	given names		
Name of company	Partum Advisory Service	es Corp.				
Telephone number	6046872038		Email address	dalvarez@p	artumad	visory.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:

- 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.