Form 45-106F1 Report of Exempt Distribution

IT IS AN OFFENCE TO MAKE A MISREPRESENTATION IN THIS REPORT

ITEM 1 – REPORT TYPE										
X New report Amended report If amended, provide filing date of report that is being amended. (YYYY-MM-DD)										
ITEM 2 - PARTY CE	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 X Issuer (other than an investment fund) Underwriter										
ITEM 3 – ISSUER NAME AND OTHER IDENTIFIERS										
Provide the following inform	Provide the following information about the issuer, or if the issuer is an investment fund, about the fund.									
Full I	Full legal name Tocvan Ventures Corp.									
Previous full l										
if the issuer's nam	website (if applicable)									
	ty identifier, provide below. Refer to Part B of the Instructions for the definition of "legal entity identifier".									
Legal enui	ty identifier									
ITEM 4 – UNDERW	riter Information									
If an underwriter is completi	ing the report, provide the underwriter's full legal name and firm National Registration Database (NRD) number.									
Full legal name N/A										
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	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 Statistics Canada's NAICS industry search tool .									
NAICS industry code 2 1 2 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. X 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									
b) Number of employees									
Number of employees: X 0 – 49 50 – 99 100 – 499 500 or more									
c) SEDAR profile number									
Does the issuer have a <u>SEDAR</u> profile? No X Yes If yes, provide SEDAR profile number 0 0 0 4 6 4 6 9									
If the issuer does not have a SEDAR profile complete Item 5(d) – (h).									
d) Head office address									
Street address Province/State									
Municipality Postal code/Zip code									
Country Telephone number									
e) Date of formation and financial year-end									
Date of formation									
f) Reporting issuer status									
Is the issuer a reporting issuer in any jurisdiction of Canada? No Yes									
If yes, select the jurisdictions of Canada in which the issuer is a reporting issuer. All AB BC MB NB NL NT NS NU ON PE 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 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 names									
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. \$\begin{align*} \\$0 \to \text{under } \\$5M \to \text{under } \\$25M \to \text{under } \\$100M									
\$100M to under \$500M \$500M to under \$1B \$1B or over									

ITEM 6 – INVESTMENT FUND ISSUER INFORMATION										
If the issuer is an investment fund, provide the following information.										
a) Investment fund manager information										
Full legal name										
Firm NRD Number (if applicable)										
If the investment fund manager does not have a firm NRD number, provide the head office contact information of the investment fund manager. Street Address										
Municipality Province/State										
Country Postal code/Zip code										
Telephone number Website (if applicable)										
b) Type of investment fund										
Type of investment fund that most accurately identifies the issuer (select only one). Money market Equity Fixed income										
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 ¹										
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 and financial year-end of the investment fund										
Date of formation										
d) Reporting issuer status of the investment fund										
Is the investment fund a reporting issuer in any jurisdiction of Canada? No Yes										
If yes, select the jurisdictions of Canada in which the investment fund is a reporting issuer.										
AII AB BC MB NB NL NT										
NS NU ON PE QC SK YT										
e) Public listing status of the investment fund										
If the investment fund has a CUSIP number, provide below (first 6 digits only).										
CUSIP number										
If the investment fund is publicly listed, provide the names of all exchanges on which its securities are listed. Include only the names of exchanges for which the investment fund has applied for and received a listing, which excludes, for example, automated trading systems.										
Exchange names										
f) Net asset value (NAV) of the investment fund										
Select the NAV range of the investment fund as of the date of the most recent NAV calculation (Canadian \$).										
\$0 to under \$5M \$5M to under \$25M \$25M to under \$100M										
\$100M to under \$500M \$500M to under \$1B \$1B or over Date of NAV calculation: YYYY 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, 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	a) Currency	
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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.

X 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	02	13	End date	2020	02	13
	YYYY	MM	DD		YYYY	MM	DD

c) Detailed purchaser information

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

d) Types of securities distributed

Provide the following information for all distributions that take place in a jurisdiction of Canada on a per security basis. Refer to Part A 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
UNT		Units at a price of \$0.15 per Unit. Each Unit is comprised of one (1) common share and one-half (1/2) common share purchase warrant exercisable at a price of \$0.30 from 18 months of closing.	4,745,867	\$0.15	\$0.15	\$711,880.05

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.

Security code			Underlying security code		γ (Canadian ψ)		Expiry date	Conversion	Describe other terms (if applicable)	
		se			Lowest	Highest	(YYYY-MM-DD)	ratio	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	

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 purchasers	Total amount (Canadian \$)				
Alberta	NI 45-106 2.3 [Accredited Investor]	4	45,000.00				
Alberta	Investment Dealer - Exemption (BC, AB, SK, MB, NB)	10	86,250.00				
Alberta	Existing Securityholder Exemption	2	12,000.00				
British Columbia	NI 45-106 2.3 [Accredited Investor]	11	159,800.10				
British Columbia	Investment Dealer - Exemption (BC, AB, SK, MB, NB)	1	7,500.00				
Ontario	NI 45-106 2.3 [Accredited Investor]	6	107,550.00				
Germany	NI 45-106 2.3 [Accredited Investor]	1	150,000.00				
United States	NI 45-106 2.3 [Accredited Investor]	1	143,779.95				
	\$711,880.05						
	Total number of unique purchasers ² 36						

²In 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.

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

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

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

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

	Description	Date of document or other material (YYYY-MM-DD)	Previously filed with or delivered to regulator? (Y/N)	Date previously filed or delivered (YYYY-MM-DD)
1.				
2.				
3.				

ITEM 8 - COMPENSATION INFORMATION									
Provide information for each person (as defined in NI 45-106) to whom the issuer directly provides, or will provide, any compensation in connection with the distribution. Complete additional copies of this page if more than one person was, or will be, compensated.									
Indicate whether any compensation was paid, or will be paid, in connection with the distribution. No X Yes If yes, indicate number of persons compensated. 6									
a) Name of person compensated and registration status									
Indicate whether the person compensated is a registrant. No X 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 HAYWOOD SECURITIES INC.									
Firm NRD number 1 6 3 0 (if applicable)									
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal. X 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									
Municipality Province/State									
Country Postal code/Zip code									
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. Connected 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									
X 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 \$6,120.00									
Value of all securities distributed Security code 1 Security code 2 Security code 3 Security code 1 Security code 2 Security code 3									
as compensation ⁴ UNT									
Describe terms of warrants, options or other rights 40,800 Finder Warrants exercisable into common shares at \$0.30 within 18 months									
Other compensation ⁵ Describe									
Total compensation paid \$6,120.00									
Check box if the person will or may receive any deferred compensation (describe the terms below)									
⁴ Provide the aggregate value of all securities distributed as compensation, <u>excluding</u> options, warrants or other rights exercisable to acquire additional securities of the issuer. Indicate the security codes for all securities distributed as compensation, <u>including</u> options, warrants or other rights exercisable to acquire additional securities of the issuer. ⁵ Do not include deferred compensation.									

a) Name of person compensated and registration statu	S								
Indicate whether the person compensated is a registrant. No X 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 in									
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 the X No Yes	nrough a funding portal or an internet-based portal.								
b) Business contact information									
If a firm NRD number is not provided in Item 8(a), provide the business	s contact information of the person being compensated.								
Street address									
Municipality	Province/State								
Country	Postal code/Zip code								
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. Connected 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 X None of the above									
d) Compensation details									
in Canadian dollars. Include cash commissions, securities-based compeservices incidental to the distribution, such as clerical, printing, legal or report on, internal allocation arrangements with the directors, officers of Cash commissions paid \$9,180.00	dentified in Item 8(a) in connection with the distribution. Provide all amounts constion, gifts, discounts or other compensation. Do not report payments for accounting services. An issuer is not required to ask for details about, or or employees of a non-individual compensated by the issuer. Security code 1 Security code 2 Security code 3								
Value of all securities distributed as compensation ⁴	curity codes								
Describe terms of warrants, options or other rights	61,200 Finder Warrants exercisable into common shares at \$0.30 within 18 months								
Other compensation ⁵ Describe									
Total compensation paid \$9,180.00									
Check box if the person will or may receive any deferred of	ompensation (describe the terms below)								
	q options, warrants or other rights exercisable to acquire additional securities of the issuer. options, warrants or other rights exercisable to acquire additional securities of the issuer.								
⁵ Do not include deferred compensation.									

a) Name of person compensated and registration statu	S							
Indicate whether the person compensated is a registrant. X 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 in								
Full legal name of non-individual LEEDE JONE	S GABLE INC.							
Firm NRD number 5 7 7	0 (if applicable)							
Indicate whether the person compensated facilitated the distribution the	rough a funding portal or an internet-based portal.							
b) Business contact information								
If a firm NRD number is not provided in Item 8(a), provide the business	s contact information of the person being compensated.							
Street address								
Municipality	Province/State							
Country	Postal code/Zip code							
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. Connected 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 X None of the above								
d) Compensation details								
in Canadian dollars. Include cash commissions, securities-based compesservices incidental to the distribution, such as clerical, printing, legal or report on, internal allocation arrangements with the directors, officers (Cash commissions paid \$3,360.00	dentified in Item 8(a) in connection with the distribution. Provide all amounts constion, gifts, discounts or other compensation. Do not report payments for accounting services. An issuer is not required to ask for details about, or or employees of a non-individual compensated by the issuer. Security code 1 Security code 2 Security code 3							
Value of all securities distributed as compensation ⁴	surity codes Security code 2 Security code 3							
Describe terms of warrants, options or other rights	22,400 Finder Warrants exercisable into common shares at \$0.30 within 18 months							
Other compensation ⁵ Describe								
Total compensation paid \$3,360.00								
Check box if the person will or may receive any deferred of	ompensation (describe the terms below)							
	q options, warrants or other rights exercisable to acquire additional securities of the issuer. options, warrants or other rights exercisable to acquire additional securities of the issuer.							
⁵ Do not include deferred compensation.								

a) Name of person compensated and registration statu	s							
Indicate whether the person compensated is a registrant. No X 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 in								
Full legal name of non-individual INDUSTRIAL	ALLIANCE SECURITIES INC.							
Firm NRD number 1 5 4	0 0 (if applicable)							
Indicate whether the person compensated facilitated the distribution th	rough a funding portal or an internet-based portal.							
b) Business contact information								
If a firm NRD number is not provided in Item 8(a), provide the business	contact information of the person being compensated.							
Street address								
Municipality	Province/State							
Country	Postal code/Zip code							
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. Connected 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 X None of the above								
d) Compensation details								
in Canadian dollars. Include cash commissions, securities-based compe services incidental to the distribution, such as clerical, printing, legal or report on, internal allocation arrangements with the directors, officers of Cash commissions paid \$1,560.00	lentified in Item 8(a) in connection with the distribution. Provide all amounts ensation, gifts, discounts or other compensation. Do not report payments for accounting services. An issuer is not required to ask for details about, or or employees of a non-individual compensated by the issuer. Security code 1 Security code 2 Security code 3							
Value of all securities distributed as compensation ⁴	surity codes							
Describe terms of warrants, options or other rights	10,400 Finder Warrants exercisable into common shares at \$0.30 within 18 months							
Other compensation ⁵ Describe								
Total compensation paid \$1,560.00								
Check box if the person will or may receive any deferred of								
	options, warrants or other rights exercisable to acquire additional securities of the issuer. ptions, warrants or other rights exercisable to acquire additional securities of the issuer.							
⁵ Do not include deferred compensation.								

a) Name of person compensated and registra	tion status							
, , ,	lion status							
Indicate whether the person compensated is a registrant. X No Yes								
If the person compensated is an individual, provide the name of the individual.								
Full legal name of individual								
Family nam			st given na	me	Secondary give	en names		
If the person compensated is not an individual, provide the f							1	
Full legal name of non-individual JUTL	AND CAP	ITAL MAI	NAGEME	ENT]	
Firm NRD number				(if applica	able)			
Indicate whether the person compensated facilitated the dist X No Yes	tribution thro	ough a fund	ling portal	or an inte	rnet-based portal.			
b) Business contact information								
If a firm NRD number is not provided in Item 8(a), provide the	he business o	contact info	rmation o	f the persoi	n being compensa	ted.		
Street address 1500 - 409 GRANVIL		•	•	•				
Municipality VANCOUVER			Provin	ce/State	British Columb	oia	Ī	
Country Canada		Post	al code/2	Zip code	V6C 1T2			
Email address		Te	elephone	number			Ī	
c) Relationship to issuer or investment fund m	nanager						_	
Indicate the person's relationship with the issuer or investme		naaer (selec	t all that a	innly) Refe	er to the meaning o	of "connected" in Pa	rt R(2)	
of the Instructions and the meaning of "control" in section 1.						o, comiceeca air a	(_)	
Connected with the issuer or investment fund	manager							
Insider of the issuer (other than an investment	t fund)							
Director or officer of the investment fund or inv	vestment fur	nd manage	r					
Employee of the issuer or investment fund ma		0						
X None of the above	J							
d) Compensation details								
Provide details of all compensation paid, or to be paid, to the	e nerson ide	ntified in Ite	m 8(a) in	connection	with the distribut	ion Provide all amo	nunts	
in Canadian dollars. Include cash commissions, securities-ba								
services incidental to the distribution, such as clerical, printir	ng, legal or a	accounting s	services. A	n issuer is i	not required to ask	for details about, o		
report on, internal allocation arrangements with the director	rs, officers or	employees	of a non-	individual (compensated by th	he issuer.		
Cash commissions paid \$11,502.40				ı				
Value of all securities distributed	Secu	rity codes	Security	/ code 1	Security code 2	Security code 3	4	
as compensation ⁴	_						_	
Describe terms of warrants, options or ot	her rights	76,683 Find 18 months	er Warrants	s exercisable	e into common share	es at \$0.30 within		
Other compensation ⁵	Describe							
Total compensation paid \$11,502.40								
Check box if the person will or may receive any	Check box if the person will or may receive any deferred compensation (describe the terms below)							
⁴ Provide the aggregate value of all securities distributed as compensation Indicate the security codes for all securities distributed as compensation								
⁵ Do not include deferred compensation.					•			

a) Name of person com	pensated and r	egistration statu	3							
Indicate whether the person compensated is a registrant. X No Yes										
If the person compensated is an individual, provide the name of the individual.										
Full legal name of individual THOMAS FIDEL										
	Fa	amily name	First given nar	me	Secondary given names					
•	If the person compensated is not an individual, provide the following information.									
Full legal name of	non-individual									
	NRD number			(if applica						
Indicate whether the person compe	ensated facilitated	I the distribution th	rough a funding portal	l or an inte	rnet-based portal.					
b) Business contact info	ormation									
If a firm NRD number is not provid	led in Item 8(a), p	rovide the business	contact information of	f the persor	n being compensated.					
Street address	108 - 2091, 21	ND STREET WE	ST							
Municipality	VANCOUVER	R	Provinc	ce/State	British Columbia					
Country	Canada		Postal code/Z	Zip code	V6J 1J5					
Email address			Telephone	number						
c) Relationship to issue	r 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. Connected 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 X None of the above										
d) Compensation details	S									
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 \$4,860.00										
Value of all securities distributed as compensation ⁴		Sec	urity codes Security	/ code 1	Security code 2 Security cod	ie 3				
Describe terms	of warrants, optio	ns or other rights	32,400 Finder Warrants 18 months	s exercisable	e into common shares at \$0.30 within	1				
Other compensation ⁵		Describe								
Total compensation paid	\$4,860.00									
Check box if the person	n will or may rece	eive any deferred co	ompensation (describe	the terms	below)					
⁴ Provide the aggregate value of all securi Indicate the security codes for all securiti										
⁵ Do not include deferred compensation.										

ITEM 9 – DIRECTORS, EXE	CUTIVE OFFICERS	AND PROMO	TERS OF TH	IE ISSUER				
If the issuer is an investment fu	nd, do not complete	Item 9. Procee	d to Item 10.					
If the issuer is an investment further issuer is any investment. Indicate whether the issuer is any investment. Indicate whether the issuer is any investment. Indicate whether the issuer in any justification. In a superior is a wholly owned subsidiary in a wholly owned subsidiary in a wholly owned subsidiary is a wholl of the wholl owned subsidiary is a wholl owned	nd, do not complete of the following (select risdiction of Canada of a reporting issuer the of reporting issuer of a foreign public issuer foreign securities on the above, do not complete above, do not complete are porting issuer or a feelicially owned by the rep the distribution even if the isclient" in Part B(1) of the I	in any jurisdiction suer ⁶ ly to permitted of the plete Item 9(a) to reign public issuer or the suer made previous instructions.	n of Canada ⁶ dients ⁷ - (c). Proceeding all of the issue foreign public issues distributions of control of the insurance	d to Item 10. r's outstanding voting secu uer, respectively. other types of securities to t				, .
If the issuer is none of the		-		- (c).				
a) Directors, executive	officers and promo	ters of the issi	uer					
	The family hame the form of individual to the first of the form of individual to the first of th						o to	
			names	Province or co	untry	D	0	Р
1) 5 (; (;								
b) Promoter information If the promoter listed above is not locations within Canada, state the Officer.	an individual, provide							
Organization or company name	Family name	First given name	Second ary given names	Residential jurisdiction of individual Province or	Relationsl (select one or			
				country				
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.

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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.

403-237-0018

Full legal name	WOOD	DEREK		A.		
	Family name First given name		е		Secondary gi	ven names
Title	PRESIDENT					
Name of issuer/underwriter/ investment fund manager	TOCVAN VENTURES CORP					
Telephone number	403-668-4855	Email address	DW	100	@CONDU	ITIR.COM
Signature	"Derek Wood"	Date	2020)	02	13
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Telephone number

Provide the following business contact information for the individual that the securities regulatory authority or regulator may contact with any questions regarding the contents of this report, if different than the individual certifying the report in Item 10.								
Same as individual certifying the report								
Full legal name	SALEM	NORMA		Title	PARALEGAL			
	Family name	First given name	Secondary giv names	ren				
Name of company	HEIGHINGTON LAW C	FFICE						

Notice - Collection and use of personal information

Email address

norma@hlf.ca

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