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 rep	Amended report If amended, provide filing date of report that is being amended. (YYYY-MM-DD)								
ITEM 2 – PARTY CERTIFYING THE REPORT									
	THEM 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 fu	nd issuer								
X Issuer (other t	than an investment fund)								
Underwriter									
ITEM 3 – ISSUER N	AME AND OTHER IDENTIFIERS								
Provide the following inform	nation about the issuer, or if the issuer is an investment fund, about the fund.								
Full I	egal name TOCVAN VENTURES CORP.								
Previous full I	egal name								
If the issuer's nam	ne changed in the last 12 months, provide most recent previous legal name.								
	Website WWW.TOCVAN.COM (if applicable)								
If the issuer has a legal entit	ty identifier, provide below. Refer to Part B of the Instructions for the definition of "legal entity identifier".								
Legal enti	ty identifier								
	RITER INFORMATION								
- I	ing the report, provide the underwriter's full legal name and firm National Registration Database (NRD) number.								
Full legal name	Full legal name N/A								
Firm NRD number	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: $\boxed{\mathbf{X}}$ 0 – 49 $\boxed{}$ 50 – 99 $\boxed{}$ 100 – 499 $\boxed{}$ 500 or more					
c) SEDAR profile number					
Does the issuer have a SEDAR 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 Financial year-end MM DD MM DD					
f) Reporting issuer status					
Is the issuer a reporting issuer in any jurisdiction of Canada?					
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. \$\text{\$0\$ to under \$5M}\$ \$\$ \$5M to under \$25M\$ \$\$25M to under \$100M\$					
\$100M to under \$500M \$500M to under \$1B \$1B or over					

ITEM 6 – INVESTMENT FUND ISSUER INFORMATION								
If the issuer is an investment fund, provide the following information.								
a) Investment fund manager information								
Full legal name								
Firm NRD Number (if applicable)								
If the investment fund manager does not have a firm NRD number, provide the head office contact information of the investment fund manager. Street Address								
Municipality Province/State								
Country Postal code/Zip code								
Telephone number Website (if applicable)								
b) Type of investment fund								
Type of investment fund that most accurately identifies the issuer (select only one).								
Money market Equity Fixed income Balanced Alternative strategies 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.

١.	_	
a)) Curren	$\cap \vee$

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

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.

01	2024	44		F., J. J., .	2024		20
Start date	2021	11	29	End date	2021	11	29
•	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	88900N105	Units at a price of \$1.00 per Unit. Each Unit is comprised of one common share and one-half of one common share purchase warrant exercisable at a price of \$1.50 from 24 months of closing.	471,225	\$1.00	\$1.00	\$471,225.00

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.

S	Security code Underlying security code		ity code 1 , o l (Calladiali 4)		Expiry date Conversion	Describe other terms (if applicable)					
			ode	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	Province or country Exemption relied on		Total amount (Canadian \$)			
Alberta	NI 45-106 2.3 [Accredited Investor]	11	\$125,500.00			
Alberta	Existing Securityholder Exemption	4	\$48,500.00			
British Columbia	NI 45-106 2.3 [Accredited Investor]	2	\$65,000.00			
British Columbia	Existing Securityholder Exemption	1	\$15,000.00			
Ontario	NI 45-106 2.3 [Accredited Investor]	4	\$127,225.00			
Ontario	Existing Securityholder Exemption	2	\$30,000.00			
Quebec	NI 45-106 2.3 [Accredited Investor]	1	\$5,000.00			
Monaco	NI 45-106 2.3 [Accredited Investor]	1	\$50,000.00			
United Kingdom	NI 45-106 2.3 [Accredited Investor]	1	\$5,000.00			
	\$471,225.00					
	Total number of unique purchasers ²					

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.

a) Ne	t proceeds	to the	investment	fund by	iurisdiction
-------	------------	--------	------------	---------	--------------

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.

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

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. 5							
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 LEEDE JONES GABLE INC.							
Firm NRD number 5 7 7 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 \$8,320							
Value of all securities distributed as compensation ⁴ Security codes Security code 1 Security code 2 Security code 3 W N T							
Describe terms of warrants, options or other rights 8,320 Finder Warrants exercisable into common shares at \$1.00 within 24 months							
Other compensation ⁵ Describe							
Total compensation paid \$8,320							
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, excluding options, warrants or other rights exercisable to acquire additional securities of the issuer. Indicate the security codes for all securities distributed as compensation, including 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	status
Indicate whether the person compensated is a registrant. No X Yes	
If the person compensated is an individual, provide the name of t	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 follow	ving information.
Full legal name of non-individual NATIONA	AL BANK FINANCIAL INC.
Firm NRD number 1 9	6 0 (if applicable)
Indicate whether the person compensated facilitated the distribut X No Yes	
b) Business contact information	
If a firm NRD number is not provided in Item 8(a), provide the bu	isiness contact information of the person being compensated.
Street address	, and the second
Municipality	Province/State
Country	Postal code/Zip code
Email address	Telephone number
c) Relationship to issuer or investment fund mana	
	und manager (select all that apply). Refer to the meaning of "connected" in Part B(2) NI 45-106 for the purposes of completing this section. ager d) ment fund manager
d) Compensation details	
in Canadian dollars. Include cash commissions, securities-based of services incidental to the distribution, such as clerical, printing, le	son identified in Item 8(a) in connection with the distribution. Provide all amounts compensation, gifts, discounts or other compensation. Do not report payments for gal or accounting services. An issuer is not required to ask for details about, or ficers or employees of a non-individual compensated by the issuer.
Value of all securities distributed	Security code 1 Security code 2 Security code 3 Security codes
as compensation ⁴	W N T
Describe terms of warrants, options or other r	ights 3,200 Finder Warrants exercisable into common shares at \$1.00 within 24 months
Other compensation ⁵ Desc	cribe
Total compensation paid \$3,200	
Check box if the person will or may receive any defer	rred compensation (describe the terms below)
⁴ Provide the aggregate value of all securities distributed as compensation. ex	coluding options, warrants or other rights exercisable to acquire additional securities of the issuer.
	uding 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	status
Indicate whether the person compensated is a registrant. No X Yes	
If the person compensated is an individual, provide the name of t	he individual.
Full legal name of individual	
Family name	First given name Secondary given names
If the person compensated is not an individual, provide the follow	ring information.
Full legal name of non-individual CANACC	ORD GENUITY CORP.
Firm NRD number 9 0	0 (if applicable)
Indicate whether the person compensated facilitated the distribut X No Yes	
b) Business contact information	
If a firm NRD number is not provided in Item 8(a), provide the bu	siness 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 mana	ger
Indicate the person's relationship with the issuer or investment further of the Instructions and the meaning of "control" in section 1.4 of a connected with the issuer or investment fund man a line of the issuer (other than an investment fund or investment fund manage a line of the issuer or investment fund manage a line of the above	ager d) nent fund manager
d) Compensation details	
in Canadian dollars. Include cash commissions, securities-based of services incidental to the distribution, such as clerical, printing, le	son identified in Item 8(a) in connection with the distribution. Provide all amounts compensation, gifts, discounts or other compensation. Do not report payments for gal or accounting services. An issuer is not required to ask for details about, or icers or employees of a non-individual compensated by the issuer.
Value of all securities distributed	Security code 1 Security code 2 Security code 3 Security codes
as compensation ⁴	W N T
Describe terms of warrants, options or other r	ghts 1,600 Finder Warrants exercisable into common shares at \$1.00 within 24 months
Other compensation ⁵ Desc	cribe
Total compensation paid \$1,600	
Check box if the person will or may receive any defer	red compensation (describe the terms below)
⁴ Provide the aggregate value of all securities distributed as compensation. ex	<u>cluding</u> options, warrants or other rights exercisable to acquire additional securities of the issuer.
	<u>uding</u> options, warrants or other rights exercisable to acquire additional securities of the issuer.
⁵ Do not include deferred compensation.	

a) Name of person com	pensated and registration status						
Indicate whether the person compensated is a registrant. X No Yes							
If the person compensated is an in	dividual, provide the name of the individ	dual.					
Full legal name of individu	ual						
	Family name	First given name	Secondary given names				
If the person compensated is not a	n individual, provide the following infor						
Full legal name of	non-individual TMM CAPITAL A	DVISORY INC.					
Firm	n NRD number	(if applica	able)				
Indicate whether the person comp X No Yes	ensated facilitated the distribution throu	igh a funding portal or an inte	rnet-based portal.				
b) Business contact info	ormation						
If a firm NRD number is not provid	ded in Item 8(a), provide the business co	ntact information of the person	n being compensated.				
Street address	#12, 2315 MCINTYRE STREET						
A.A	DEO.] 5					
Municipality	REGINA	Province/State	SASKATCHEWAN				
Country	CANADA	Postal code/Zip code	S4P 3Y8				
Email address	TMUIR@CONDUITIR.COM	Telephone number	306-690-8886				
c) Relationship to issue	er 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 detail	s						
in Canadian dollars. Include cash of services incidental to the distributi	commissions, securities-based compenso on, such as clerical, printing, legal or acc ngements with the directors, officers or e \$1,200	ntion, gifts, discounts or other c counting services. An issuer is i					
ac compensation							
	ms of warrants, options or other rights	1,200 Finder Warrants exercisa 24 months	able into common shares at \$1.00 within				
Other compensation ⁵	Describe						
Total compensation paid	\$1,200						
⁴ Provide the aggregate value of all securi Indicate the security codes for all securit		tions, warrants or other rights exerci	isable to acquire additional securities of the issuer.				
⁵ Do not include deferred compensation.							

a) Name of person con	npensated and registration status					
Indicate whether the person comp X No Yes	ensated is a registrant.					
If the person compensated is an in	ndividual, provide the name of the individ	dual.				
Full legal name of individ	ual					
	Family name	First given name	Secondary given names			
If the person compensated is not a	nn individual, provi <mark>de the following info</mark> n	mation.				
Full legal name of	non-individual BRAIDPLAIN CO	NSULTING LTD.				
Firm	n NRD number	(if applica	able)			
	ensated facilitated the distribution throu					
X No Yes			·			
b) Business contact inf	ormation					
If a firm NRD number is not provide	ded in Item 8(a), provide the business co	ntact information of the perso	n being compensated.			
Street address	34 TUSCANY VISTA ROAD NW	·				
		1				
Municipality	CALGARY	Province/State	ALBERTA			
Country	CANADA	Postal code/Zip code	T3L 2Z9			
Country	0	- Postal Code/Elp Code				
Email address	DCHRISTIAN@ASHLEYGOLDCORP.COM	Telephone number	587-777-9072			
c) Relationship to issue	er 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 detail	ls					
in Canadian dollars. Include cash services incidental to the distributi	commissions, securities-based compensation, such as clerical, printing, legal or accompensation, such as clerical, printing, legal or accompenents with the directors, officers or e	ation, gifts, discounts or other o counting services. An issuer is				
de compensation						
	ms of warrants, options or other rights	5,778 Finder Warrants exercisa 24 months	able into common shares at \$1.00 within			
Other compensation ⁵	Describe					
Total compensation paid	\$5,778					
Check box if the perso	on will or may receive any deferred com	pensation (describe the terms	s below)			
			isable to acquire additional securities of the issuer. able to acquire additional securities of the issuer.			

ITEM 9 – DIRECTORS, EX	ECUTIVE OFFICERS	S AND PROMO	OTERS OF TH	HE ISSUER				
If the issuer is an investment f	und, do not complete	e Item 9. Procee	ed to Item 10.					
Indicate whether the issuer is any	of the following (sele	ct all that apply).						
X Reporting issuer in any j	urisdiction of Canada							
Foreign public issuer								
Wholly owned subsidiary	of a reporting issuer	in any jurisdiction	on of Canada ⁶					
Provide nan	ne of reporting issuer							
Wholly owned subsidiary	of a foreign public is	suer ⁶						
Provide name of	foreign public issuer							
Issuer distributing eligibl	e foreign securities or	nly to permitted o	clients ⁷					
If the issuer is at least one of to An issuer is a wholly owned subsidiary law to be owned by its directors, are be Check this box if it applies to the curre "eligible foreign security" and "permitted" If the issuer is none of the curre of the issuer is none of the curre of the issuer is none of the issuer is not	of a reporting issuer or a neficially owned by the rep nt distribution even if the is d client" in Part B(1) of the the above, check this	foreign public issue porting issuer or the ssuer made previous Instructions.	r if all of the issue foreign public iss s distributions of lete Item 9(a)	er's outstanding voting sect suer, respectively. other types of securities to				
	·							
Provide the following information territory, otherwise state the cour						a, state	the pro	vince or
territory, otherwise state the cour	I Retationship	To issuel , D		Lizeculive Officer, 1	Tromoter.	Dale	ationahi	n to
		E	Secondary	Business location individual or res			ationship to issuer	
Organization or company name	Family name	First given name	given names	I IIIISAICTION OF INAIVIALISI I '		lect all ti apply)	nat	
			Harries	Province or co	ountry D		0	Р
b) Promoter information	n							
If the promoter listed above is no locations within Canada, state th Officer.								
Organization or company name	Family name	Second Second jurisdiction of ary individual Relationship to promoter (select one or both if applicable)						
amo		name	given	Province or country	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.

11

ITEM 10 - CERTIFICATION

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

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

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

IT IS AN OFFENCE TO MAKE A MISREPRESENTATION IN THIS REPORT

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

- I have read and understand this report; and
- all of the information provided in this report is true.

Full legal name	SUTHERLAND	BRODIE		A.		
	Family name First given name			Secondary gi	ven names	
Title	DIRECTOR					
Name of issuer/underwriter/ investment fund manager	TOCVAN VENTURES CORP.					
Telephone number	403-668-7855	Email address	BSUT	HERLAND@T(OCVAN.CA	
Signature	"Brian Sutherland"	Date	2021	11	30	
		-	YYYY	MM	DD	

	44		_			_			
TFM	11	_ (്	NIT.	۸с:	Гυ	ED	\sim	NI

	EKSON						
	ess contact information for th tents of this report, if differen		,	, , ,	ulator may contact with any		
Same as ind	ividual certifying the repo	rt					
Full legal name	SALEM NORMA Title PARALEGAL						
	Family name	First given name	Secondary given	ven			
Name of company	HEIGHINGTON LAW						
Telephone number	403-237-0018		Email address	norma@hlf.c	a		

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 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.