Form 45-106F1 Report of Exempt Distribution

ITEM 1 – REPORT TYPE							
 New report ✓ Amended report If amended, provide filing date of report that is being amended. 2024 23 (YYYY-MM-DD) 							
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 (in Québec, Regulation 81-106 respecting Investment Fund Continuous Disclosure and Policy Statement to Regulation 81-106 respecting Investment Fund Continuous Disclosure).							
☐ Investment fund issuer							
☑ Issuer (other than an investment fund)							
☐ Underwriter							
ITEM 3 - ISSUER NAME AND OTHER IDENTIFIERS							
Provide the following information about the issuer, or if the issuer is an investment fund, about the fund.							
Full legal name Tocvan Ventures Corp. / Tocvan Ventures Corp.							
Previous full legal name							
If the issuer's name changed in the last 12 months, provide most recent previous legal name.							
Website www.tocvan.com (if applicable)							
If the issuer has a legal entity identifier, provide below. Refer to Part B of the Instructions for the definition of "legal entity identifier".							
Legal entity identifier 549300O6GZ3JS9XZL065							
If two or more issuers distributed a single security, provide the full legal name(s) of the co-issuer(s) other than the issuer named above.							
Full legal name(s) of co-issuer(s) (if applicable)							
ITEM 4 – UNDERWRITER INFORMATION							
If an underwriter is completing the report, provide the underwriter's full legal name, firm NRD number, and SEDAR+ profile number.							
Full legal name							
Firm NRD number (if applicable)							
SEDAR+ profile number							

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 212299							
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 ☐ 50 - 99 ☐ 100 - 499 ☐ 500 or more							
c) SEDAR+ profile number							
Provide the issuer's SEDAR+ profile number							
000046469							
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)							
SEDAR+ profile number							
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 ☐ Cryptoasset ☐ Other (describe)							

Indicate wh	Indicate whether one or both of the following apply to the investment fund.								
☐ Invest	primarily in o	ther investment fund issuers							
☐ Is a UC	ITs Fund ¹								
		e Investment of Transferable Securities funds (U				Jnion (EU) directives			
that allow co	that allow collective investment schemes to operate throughout the EU on a passport basis on authorization from one member state.								
c) Ne	et asset valu	e (NAV) of the investment fund							
Select the N	IAV range of th	ne investment fund as of the date of the	most recent NAV calc	ulation (Canadio	ın \$).				
☐ Under	\$5M	\$5M to under \$25M	☐ \$25M to und	er \$100M	Date of NAV	calculation:			
□ \$100M	1 to under \$50	00M	B ☐ \$1B or over						
⊅100iv	I lu uiiuei aoc)		YYYY	MM DD			
ITEM 7 -	INFORM	ATION ABOUT THE DISTRIB	UTION						
If an issuer	located outsic	le of Canada completes a distribution in	n a jurisdiction of Can	ada, include in I	tem 7 and Sch	edule 1			
		asers resident in that jurisdiction of Can							
		ees, in connection with the distribution, h the information provided in Schedule		sed in Item 8. Th	e information	provided in			
		Title Injoirnation provided in Schedule	T of the report.						
a) Cı	urrency								
Select the o	currency or cur	rencies in which the distribution was m	ade. All dollar amoun	ts provided in th	e report must	be in Canadian			
▽ Canad	lian dollar	US dollar Euro Other	(describe)						
E. Candalan dona. E. Caro Other (describe)									
h) Distribution dates									
b) Distribution dates									
State the distribution start and end dates. If the report is being filed for securities distributed on only one distribution date, provide									
		oth the start and end dates. If the repor		urities distribued	d on a continu	ous basis,			
include the	start and end	dates for the distribution period covere	d by the report.	<u></u>					
	Start date	2024 05 08	End date	2024	05 08				
		YYYY MM DD		YYYY	MM DD				
c) De	etailed purc	haser information							
Complete	Schedule 1 of	this form for each purchaser and att	ach the schedule to	the completed	report.				
				•	•				
u) 15	/pes or secu	rities distributed							
		rmation for all distributions reported o							
	-	de. If providing the CUSIP number, indi	cate the full 9-digit CU	ISIP number ass	igned to the se	curity being			
distributed	•								
					Canadian \$				
Security	CUSIP number (if	Description of security	Number of	Single or	Highest	Total amount			

securities

1,201,600.0000

lowest price

0.3500

price

0.3500 420,560.0000

code

UNT

applicable)

88900N105 \$0.35 per Unit, comprised of 1 co

mmon sh. & 1 common sh. purch		
ase warrant exerc.at \$0.50for 36		
months		

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.

Convertible / exchangeable security code	Underlying security code	Exercise price (Canadian \$)		Expiry date (YYYY-MM-	Conversion ratio	Describe other terms (if applicable)
		Lowest	Highest	DD)		арріісавіе)

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 purchasers ^{2a}	Total amount (Canadian \$)
Alberta	Investment dealer exemption (BC, AB, SK, MB, NB)	1	10,150.0000
Alberta	NI 45-106 5A.2 [Listed issuer financing exemption]	5	39,165.0000
Saskatchewan	NI 45-106 2.3 [Accredited investor]	1	15,400.0000
Ontario	NI 45-106 2.3 [Accredited investor]	2	2,520.0000
Panama	NI 45-106 2.3 [Accredited investor]	1	14,000.0000
Germany	NI 45-106 2.3 [Accredited investor]	2	253,750.0000
Alberta	NI 45-106 2.3 [Accredited investor]	5	85,575.0000
	\$420,560.0000		

^{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. 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.

^{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.

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.

ITEM 8 - COMPENSATION INFORMATION Provide information for each person (as defined in NI 45-106) (in Québec, Regulation 45-106 respecting Prospectus Exemptions) 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 If yes, indicate number of persons compensated. 4 ✓ Yes a) Name of person compensated and registration status Indicate whether the person compensated is a registrant. □ No **✓** Yes If the person compensated is an individual, provide the name of the individual. Full legal name of individual Family name First given name Secondary given names If the person compensated is not an individual, provide the following information. Full legal name of non-individual PI Financial Corp. Firm NRD number (if applicable) Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal **V** 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 | 2500-733 Seymour Street Municipality Vancouver Province/State | British Columbia Country Canada Postal code/Zip code V6B 0S6 Email address | info@pifinancial.com Telephone number | +1 (604) 664-2900 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 (in Québec, Regulation 45-106 respecting Prospectus Exemptions) 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 ✓ None of the above d) Compensation details

Provide all amounts in Canadian dollars. Include cash con compensation. Do not report payments for services incides services. An issuer is not required to ask for details about, or employees of a non-individual compensated by the issuer.	ntal to the distribut or report on, intern	ion, such as clerical	l, printing, legal or	accounting	
Cash commissions paid	\$3,916.5000				
Value of all securities distributed as compensation ⁴					
Security codes	Security code 1	Security code 2	Security code 3		
Security codes	WNT				
Describe terms of warrants, options or other rights Other compensation ⁵ Describe	n ⁵				
Total compensation paid ☐ Check box if the person will or may receive any def		on (describe the te	erms below)		
	·				
⁴ Provide the aggregate value of all securities distributed as compensa securities of the issuer. Indicate the security codes for all securities disacquire additional securities of the issuer. ⁵ Do not include deferred compensation.					

Provide details of all compensation paid, or to be paid, to the person identified in Item 8(a) in connection with the distribution.

ITEM 8 – COMPEN	ITEM 8 – COMPENSATION INFORMATION								
Provide information for each person (as defined in NI 45-106) (in Québec, Regulation 45-106 respecting Prospectus Exemptions) 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. 4									
a) Name of pers	son compensated and reg	ristration status							
Indicate whether the pers	a) Name of person compensated and registration status Indicate whether the person compensated is a registrant. □ No ☑ Yes If the person compensated is an individual, provide the name of the individual.								
Full legal name of i	ndividual								
If the person compensate	Family name ed is not an individual, provide t	<u> </u>	e Secondary given names						
Full legal name of	non-individual HAYWOOD SE	ECURITIES INC.							
Firm	n NRD number	(if app	licable)						
Indicate whether the pers	son compensated facilitated the	e distribution through a funding p	oortal or an internet-based portal						
✓ No ☐ Yes									
b) Business con	tact information								
lf a firm NRD number is ।	not provided in Item 8(a), provid	de the business contact informatio	on of the person being compensated.						
Street address	200 Burrard St Suite 700								
Municipality	Vancouver	Province/State	British Columbia						
Country	Canada	Postal code/Zip code	V6C 3L6						
Email address	info@haywood.com	Telephone number	+1 (604) 697-7100						
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 (in Québec, Regulation 45-106 respecting Prospectus Exemptions) for the purposes of completing this section.									
	e issuer or investment fund ma	_							
	r (other than an investment fu	•							
<u> </u>	of the investment fund or inves	_							
☑ Employee of the iss☑ None of the above	suer or investment fund mana	ger							
d) Compensatio	on details								
s, compensatio									

Provide details of all compensation paid, or to be paid, to Provide all amounts in Canadian dollars. Include cash con compensation. Do not report payments for services incider services. An issuer is not required to ask for details about, or employees of a non-individual compensated by the issuer	nmissions, securities ntal to the distribut or report on, intern	s-based compensat ion, such as clerical	ion, gifts, discount , printing, legal or	s or other accounting
Cash commissions paid	\$1,400.0000			
Value of all securities distributed as compensation ⁴				
Security codes	Security code 1	Security code 2	Security code 3	
	WNT			
Describe terms of warrants, options or other rights	4,000 Finder Warrants exercisable into common shares at \$0.35 within 36 months			
Other compensation ⁵				
Describe				
			_	
Total compensation paid	\$1,400.0000			
Check box if the person will or may receive any def	erred compensation	on (describe the te	rms below)	
⁴ Provide the aggregate value of all securities distributed as compensate securities of the issuer. Indicate the security codes for all securities distance additional securities of the issuer.		_	•	
⁵ Do not include deferred compensation.				

ITEM 8 – COMPEN	ITEM 8 – COMPENSATION INFORMATION								
Provide information for each person (as defined in NI 45-106) (in Québec, Regulation 45-106 respecting Prospectus Exemptions) 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									
a) Name of per	son compensated and res	gistration status							
a) Name of person compensated and registration status Indicate whether the person compensated is a registrant. □ No ☑ Yes If the person compensated is an individual, provide the name of the individual.									
Full legal name of	individual								
If the person compensat	Family nam ted is not an individual, provide	6	e Secondary given names						
Full legal name of	non-individual RESEARCH C	APITAL CORP.							
Firr	m NRD number	(if app	licable)						
Indicate whether the per	rson compensated facilitated th	e distribution through a funding p	oortal or an internet-based portal						
✓ No ☐ Yes									
b) Business cor	ntact information								
If a firm NRD number is	not provided in Item 8(a), provi	de the business contact informatio	on of the person being compensated.						
Street address	3c9, 1075 W Georgia St #1920	0							
Municipality	Vancouver	Province/State	British Columbia						
Country	Canada	Postal code/Zip code	V6E 3C9						
Email address	info@researchcapital.com	Telephone number	+1 (778) 373-4100						
c) Relationship	to issuer or investment fu	und 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 (in Québec, Regulation 45-106 respecting Prospectus Exemptions) for the purposes of completing this section.									
	e issuer or investment fund m	_							
	er (other than an investment f								
_	of the investment fund or inve	_							
☑ Employee of the is:☑ None of the above	suer or investment fund mana	ager							
d) Compensatio	on details								
.,									

Provide details of all compensation paid, or to be paid, to Provide all amounts in Canadian dollars. Include cash con compensation. Do not report payments for services incider services. An issuer is not required to ask for details about, or employees of a non-individual compensated by the issu	nmissions, securities ntal to the distributi or report on, intern	s-based compensati ion, such as clerical,	on, gifts, discounts printing, legal or	s or other accounting
Cash commissions paid	\$252.0000			
Value of all securities distributed as compensation ⁴				
Security codes	Security code 1	Security code 2	Security code 3	
y	WNT			
Describe terms of warrants, options or other rights	720 Finder Warrants exercisable into common shares at \$0.35 within 36 months			
Other compensation ⁵				
Describe				
			_	
Total compensation paid	\$252.0000			
Check box if the person will or may receive any def	erred compensation	on (describe the te	rms below)	
⁴ Provide the aggregate value of all securities distributed as compensa securities of the issuer. Indicate the security codes for all securities dis acquire additional securities of the issuer.		_		
⁵ Do not include deferred compensation.				

ITEM 8 – COMPEN	ISATION INFORMATIO	ON	
whom the issuer directly		empensation in connection with t	106 respecting Prospectus Exemptions) to he distribution. Complete additional
Indicate whether any cor ☐ No ✓ Yes	·	paid, in connection with the distr	
a) Name of per	son compensated and reg	ristration status	
Indicate whether the per	son compensated is a registrant		
Full legal name of i	ndividual		
If the person compensate	Family name ed is not an individual, provide t	o o	e Secondary given names
Full legal name of	non-individual LEEDE JONES	GABLE INC.	
Firn	n NRD number	(if app	licable)
Indicate whether the per	son compensated facilitated the	distribution through a funding p	oortal or an internet-based portal
✓ No ☐ Yes			
b) Business con	tact information		
If a firm NRD number is	not provided in Item 8(a), provia	le the business contact information	on of the person being compensated.
Street address	1800 – 1140 West Pender Stre	eet Vancouver	
Municipality	Vancouver	Province/State	British Columbia
Country	Canada	Postal code/Zip code	V6E 4G1
Email address	info@leedejonesgable.com	Telephone number	+1 (604) 658-3000
c) Relationship	to issuer or investment fu	nd manager	
Indicate the person's relo 'connected' in Part B(2) o	ationship with the issuer or inves	stment fund manager (select all ti ing of 'control' in section 1.4 of N	hat apply). Refer to the meaning of I 45-106 (in Québec, Regulation 45-106
Connected with the	e issuer or investment fund ma	anager	
	r (other than an investment fu		
	of the investment fund or inves	_	
☐ Employee of the iss✓ None of the above	suer or investment fund mana	ger	
d) Compensation	on details		

Provide details of all compensation paid, or to be paid, to Provide all amounts in Canadian dollars. Include cash con compensation. Do not report payments for services incide services. An issuer is not required to ask for details about, or employees of a non-individual compensated by the issu	nmissions, securitie ntal to the distribut or report on, intern	s-based compensat ion, such as clerical	ion, gifts, discounts , printing, legal or	s or other accounting
Cash commissions paid	\$6,072.5000		7	
Value of all securities distributed as compensation ⁴				
•	Security code 1	Security code 2	Security code 3	
Security codes	WNT			
Describe terms of warrants, options or other rights	17,350 Finder W <i>a</i> shares at \$0.35 w	rrants exercisable vithin 36 months	into common	
Other compensation ⁵			7	
Describe			i	
Describe				
Total compensation paid	\$6,072.5000			
Check box if the person will or may receive any def	erred compensati	on (describe the te	rms below)	
	<u>'</u>			
⁴ Provide the aggregate value of all securities distributed as compensa securities of the issuer. Indicate the security codes for all securities dis acquire additional securities of the issuer. ⁵ Do not include deferred compensation.		_		
ITEM 0 DIRECTORS EVECUTIVE OFFICE		AOTERS OF T	HE ICCLIED	
ITEM 9 – DIRECTORS, EXECUTIVE OFFICE	KS AND PROM	NOTERS OF TH	HE ISSUEK	
If the issuer is an investment fund, do not complete It	em 9. Proceed to I	tem 10.		
				,
Indicate whether the issuer is any of the following (select the	ne one that applies	– If more than one (applies, select only	one).
Reporting issuer in a jurisdiction of Canada				
Foreign public issuerWholly owned subsidiary of a reporting issuer in ar	ny jurisdiction of C	anada ⁶		
Provide name of reporting issuer	iy jarisarenon or e			
_	6			
Wholly owned subsidiary of a foreign public issuer	0			
Provide name of foreign public issuer				
Issuer distributing only eligible foreign securities an	nd the distribution	is to permitted cli	ents only ⁷ .	
If the issuer is at least one of the above, do not compl	ete Item 9(a) – (c).	Proceed to Item 1	0.	
⁶ An issuer is a wholly owned subsidiary of a reporting issues		• •		-

or the foreign public issuer, respectively.

			•	issuer made previous distributions of ot security" and "permitted client" in Part B	3,	
☐ If the issuer is no	one of the	above, che	ck this box and	complete Item 9(a) – (c).		
a) Directors, e	xecutive (officers an	d promoters o	f 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. For "Relationship to issuer", "D" – Director, "O" – Executive Officer, "P" – Promoter.						
Organization or	Family	First	Secondary	Business location of non-individual or residential jurisdiction of	Relationship to issuer	

Organization or company name	Family name	First given	Secondary given names Business location of non-individual or residential jurisdiction of individual		Relationship to issuer (select all that apply)		
	name Province or country		D	0	P		

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 First giv		Secondary given names	Residential jurisdiction of individual	Relationship to promoter (sele one or both if applicable)	
		name		Province or country	D	О

c) Residential address of each individual

Complete Schedule 2 of this form providing the full residential address for each individual listed in Item 9(a) and (b) and attach to the completed report. Schedule 2 also requires information to be provided about control persons.

ITEM 10 - CERTIFICATION

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

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

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

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

Securities legislation requires an issuer or underwriter that makes a distribution of securities under certain prospectus exemptions

securities regulatory aut exercised reasonable dil	nation below, I certify, on beh hority or regulator, as applica	ble, that I have r	eviewed this re	ivestment fund manager, to the eport and to my knowledge, hav o the extent required, complete	/ing		
Name of Issuer/ investment fund TOCVAN VENTURES CORP. manager/agent							
Full legal name	SUTHERLAND	Bro	die	A.			
	Family name	First give	en name	Secondary given names			
Title	President and Director						
Telephone number	+1 (403) 829-9877	Email address	BSUTHERLAN	D@TOCVAN.CA]		
Signature	"Brodie Sutherland"	Date	2024 YYYY	05 22 MM DD			

ITEM 11 - CONTACT PERSON

Telephone number | +1 (403) 237-0018

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

Family name

First given name

Secondary given names

Title

Paralegal

Name of company

HEIGHINGTON LAW

Email address | norma@hlf.ca

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.

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.