Form 45-106F1 Report of Exempt Distribution

BCSC EDER Reference Number 9207764

ITEM 1 - REPORT TYPE					
✓ New report					
☐ Amended report If amended, provide filing date	If amended, provide filing date of report that is being amended (YYYY-MM-DD)				
ITEM 2 - PARTY CERTIFYING THE REPORT					
Indicate the party certifying the report (select only one). For guidance rego Instrument 81-106 Investment Fund Continuous Disclosure and the comp	_	restment fund, refer to section 1.1 of National			
☐ Investment fund issuer	umon policy to 141 01 100.				
✓ 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 in	vestment fund, about the fund.				
Full legal name Leocor Gold Inc.					
Previous full legal name Leocor Ventures Inc.					
If the issuer's name changed in the last 12 months, provide most	recent previous legal name.				
Website www.leocor-ventures.c	Website www.leocor-ventures.com (if applicable)				
If the issuer has a legal entity identifier, provide below. Refer to Part B of t	dentifier_ provide below. Refer to Part B of the Instructions for the definition of "legal entity identifier".				
Legal entity identifier	/ identifier				
If two or more issuers distributed a single security, provide the full legal no	ame(s) of the co-issuer(s) other th	an the issuer named above.			
Full legal name(s) of co-issuer(s)	(if applicabl	e)			
ITEM 4 - UNDERWRITER INFORMATION					
If an underwriter is completing the report, provide the underwriter's full le	aal name and firm NRD number				
Full legal name	garname and familia name on				
Firm NRD number	(if applicable)				
If the underwriter does not have a firm NRD number, provide the head off	t 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 in your reasonable judgment most closely corresponds to the issuer's primary business activity.
NAICS industry code 2 1 2 2 2 0
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
Does the issuer have a SEDAR profile?
No ✓ Yes If yes, provide SEDAR profile number 0 0 4 6 9 4 8
If the issuer does not have SEDAR profile complete item 5(d) - (h).
d) Head office address
Street address Province/State
Municipality Postal code/Zip code
Country Telephone number
e) Date of formation and financial year-end
Date of formation Financial year-end MM DD
f) Reporting issuer status
Is the issuer a reporting issuer in any jurisdication of Canada? No Yes
If yes, select the jurisdictions of Canada in which the issuer is a reporting issuer.
AII AB BC MB NB NL NT
□ NS □ NU □ ON □ PE □ QC □ SK □ YT
g) Public listing status
If the issuer has a CUSIP number, provide below (first 6 digits only)
CUSIP number
If the issuer is publicly listed, provide the name of the exchange on which the issuer's equity securities primarily trade. Provide only the name of an exchange and not a trading facility such as, for example, an automated trading system.
Exchange name
h) Size of issuer's assets

Select the size of the issuer's assets based on its most recently available annual financial statements (Canadian \$). If the issuer has not prepared annual financial statements for its first financial year, provide the size of the issuer's assets at the distribution end date.

☐ \$0 to under \$5M	☐ \$5M to under \$25M	☐ \$25M to under \$100M
\$100M to under \$500M	☐ \$500M to under \$1B	\$1B or over

ITEM 6 - INVESTMENT	FUND ISSUER INFORMATION				
If the issuer is an inves	tment fund, provide the following information.				
a) Investment fund ma	anager information				
Full legal name					
Firm NRD number	(if applicable)				
If the investment fund mand	ager does not have a firm NRD number, provide the head office contact information of the investment fund manager.				
Street address					
Municipality	Province/State				
Country	Postal code/Zip code				
Telephone number	Website (if applicable)				
b) Type of investment	fund				
Type of investment fund tha	nt most accurately identifies the issuer (select only one) .				
Money market	☐ Equity ☐ Fixed income ☐ Balanced				
Alternative strateg	gies Cryptoasset Other (describe)				
Indicate whether one or bot	h of the following apply to the investment fund .				
Invests primarily in	n other investment fund issuers				
☐ Is a UCITs Fund¹					
¹ Undertaking for the Collec (EU) directives that allow c	tive Investment of Transferable Securities funds (UCITs Funds) are investment funds regulated by the European Union collective investment schemes to operate throughout the EU on a passport basis on authorization from one member state.				
c) Date of formation a	and financial year-end of the investment fund				
Date of forma	tion Financial year-end MM DD MM DD				
d) Reporting issuer status of the investment fund					
Is the investment fund a rep	orting issuer in any jurisdication of Canada? No Yes				
If yes, select the jurisdictions	s of Canada in which the investment fund is a reporting issuer.				
☐ AII ☐	AB BC MB NB NL NT				
□ NS □	NU ON PE QC SK YT				
e) Public listing status	s of the investment fund				
If the investment fund has a	CUSIP number, provide below (first 6 digits only)				
	CUSIP number				
If the investment fund is publicly listed, provide the name of the exchange on which the investment fund's securities primarily trade. Provide only the					
name of an exchange and not a trading facility such as, for example, an automated trading system. Exchange name					
-	AV) of the investment fund				
Select the NAV range of the investment fund as of the date of the most recent NAV calculation (Canadian \$).					
\$0 to under \$5M	s5M to under \$25M s25M to under \$100M				
\$100M to under \$500	DM \$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 in connection with the distribution, which must be disclosed in Item 8. The information provided in Item 7 must reconcile with the information provided in Schedule 1 of the report.

a)	Currency								
Sele	ct the currency or currencies in w	which the dis	stribution	was mad	e. All dollar amounts provided	in the repor	t must be	in Canad	ian dollars.
\checkmark	Canadian dollar US	6 dollar] Euro	Other (describe)				
b)	Distribution date(s)								
as b	e the distribution start and end o oth the start and end dates. If th ribution period covered by the re	e report is b	•		-	•			
	Start date	2020	08	07	End date	2020	80	07	
	·	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 reported on a per security basis. Refer to Part A(12) of the Instructions for how to indicate the security code. If providing the CUSIP number, indicate the full 9-digit CUSIP number assigned to the security being distributed.

							Canadian \$	
Sec	urit ode	,	CUSIP number (if applicable)	Description of security	Number of securities	Single or lowest price	Highest price	Total amount
U	В	S	52637G205	Unit consisting of one common share and one transferable common share purchase warrant of the Issuer	6,000,000.00	0.4000		2,400,000.00

e) Details of rights and convertible/exchangeable securities

If any rights (e.g. warrants, options) were distributed, provide the exercise price and expiry date for each right. If any convertible/exchangeable securities were distributed, provide the conversion ratio and describe any other terms for each convertible/exchangeable security.

е	xch	vertib angea urity c	able		nderlyii curity c	•	de (Canadian \$) Lowest Highest		Expiry date (YYYY- MM-DD)	Conversion ratio	Describe other items (if applicable)
٧	٧	Ν	Т	С	М	S			2022-08-07	1:1	

f) Summary of the distribution by jurisdiction and exemption

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

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

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

Province or country	Exemption relied on	Number of unique ² purchasers	Total amount (Canadian \$)
British Columbia	NI 45-106 2.3 [Accredited investor]	47	2,153,140.00
British Columbia	NI 45-106 2.5 [Family, friends and business associates]	1	40,000.00
Ontario	NI 45-106 2.3 [Accredited investor]	1	20,000.00
Alberta	NI 45-106 2.3 [Accredited investor]	1	40,000.00
United States	NI 45-106 2.3 [Accredited investor]	2	106,860.00

Switzerland	Switzerland NI 45-106 2.3 [Accredited investor] 1				
	Total dollar amount of se	curities distributed	2,400,000.00		
	Total number of unique purchasers ^{2b}	53			

^{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.

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

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

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

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

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

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

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

Provide information for each person (as defined in NI 45-106) to whom the issuer directly provides, or will provide, any compensation in connection with the distribution. Complete additional copies of this page if more than one person was, or will be, compensated. Indicate whether any compensation was paid, or will be paid, in connection with the distribution. No V Yes If yes, indicate number of persons compensated.	ITEM 8 - COMPENSATION INFORMATION
No ✓ Yes If yes, indicate number of persons compensated.	Indicate whether any compensation was paid, or will be paid, in connection with the distribution.
	No ✓ Yes If yes, indicate number of persons compensated. 4

a) Name of person compensated and registration status															
Indicate whether the person co	mpensated is	a registrai	nt.			☐ No		\checkmark	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											S				
If the person compensated is not an individual, provide the following information.															
Full legal name of non-individual Canaccord Genuity Corp.															
Firm NRD number 9 0 0 (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 pro	ovided in Item	8 (a), pro	vide th	e busine	ess co	ntact info	rmation	of the	persoi	n being	g com	pensat	ted.		
Street address															
Municipality								F	Provin	ice/St	ate				
Country							P	ostal	code/	Zip cc	ode				
Email address								Telep	hone	numl	ber				
c) Relationship to issuer	or investme	nt fund r	manag	jer											
Indicate the person's relationship with the issuer or investment fund manager (select all that apply). Refer to the meaning of "connected" in Part B(2) of the Instructions and the meaning of "control" in section 1.4 of NI 45-106 for the purposes of completing this section. Connect with the issuer or investment fund manager Insider of the issuer (other than an investment fund) Director or officer of the investment fund or investment fund manager Employee of the issuer or investment fund manager															
✓ None of the above															
d) Compensation details															
Provide details of all compensate Canadian dollars. Include cash a incidental to the distribution, su allocation arrangements with the	commissions, ch as clerical, ne directors, of	securities- printing, i ficers or e	based of legal or mploye	compen: accoun	sation ting :	n, gifts, dis services. A	counts n issuei	or othe r is not	er comp requir	pensat ed to a	ion. E isk fo	Do not	report payı	ments for s	ervices
Cash commissions pa		2,800	.00						Secur	ity code	e 1	Secur	ity code 2	Security of	code 3
Value of all securitie distributed as compensation					S	Security co	des		W	N	Т				
Describe terms of warrants, options or other rights 7,000 finder's warrants, each entitles the holder to acquire one common share of the Issuer at a price of \$0.50 per share until August 7, 2022															
Other compensatio	n⁵			Descr	ibe										
Total compensation pa	id	2,800	.00												
Check box if the person will or may receive any deferred compensation (describe the terms below)															
⁴ Provide the aggregate value of additional securities of the issurights exercisable to acquire a ⁵ Do not include deferred comp	ıer. Indicate tı dditional secu	he securit	y code	s for all	satio secu	n, <u>excludi</u> urities distr	<u>ng</u> optio	ons, wa as con	arrants ipensa	s or oth ation, <u>ii</u>	ner rig nclua	ghts ex l <u>ing</u> opt	rercisable i tions, warr	o acquire ants or oth	ner

a) Name of person compensated and registration status											
Indicate whether the person co	mpensated is a reg	jistrant.		No		\checkmark	Yes				
If the person compensated is an	n individual, provid	de the name of the i	ndividu	ıal.							
Full legal name of indiv	/idual										
Family name First given name Secondary given names											S
If the person compensated is not an individual, provide the following information.											
Full legal name of non-individual Echelon Wealth Partners Inc.											
Firm NRD number 3 2 4 2 0 (if applicable)											
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal. Ves											
b) Business contact information											
If a firm NRD number is not pro	ovided in Item 8 (d), provide the busine	ess con	tact inforn	nation	of the p	person b	eing cor	npensated.		
Street address											
Municipality						Р	rovince	/State			
Country					Р	ostal c	ode/Zip	code			
Email address						Telep	hone nu	umber			
c) Relationship to issuer	or investment for	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 for the purposes of completing this section. Connect with the issuer or investment fund manager Insider of the issuer (other than an investment fund) Director or officer of the investment fund or investment fund manager Employee of the issuer or investment fund manager											
✓ None of the above											
d) Compensation details											
Provide details of all compensate Canadian dollars. Include cash of incidental to the distribution, sur allocation arrangements with the	commissions, secu ich as clerical, prin ne directors, officer	rities-based compen ting, legal or accour s or employees of a	sation, iting se	gifts, disc ervices. An	ounts c	or other is not r	compen	sation. to ask fo	Do not report pay	ments for s	ervices
Cash commissions pa	aid 4	,200.00					Security of	code 1	Security code 2	Security c	code 3
Value of all securitie distributed as compensation			Se	ecurity cod	des		W N	Т			
Describe terms of warrants, options or other rights 10,500 finder's warrants, each entitles the holder to acquire one common share of the Issuer at a price of \$0.50 per share until August 7, 2022											
Other compensatio	n ⁵	Desci	ibe								
Total compensation pa	aid 4	,200.00	_								
Check box if the pe	Check box if the person will or may receive any deferred compensation (describe the terms below)										
⁴ Provide the aggregate value additional securities of the issurights exercisable to acquire a ⁵ Do not include deferred comp	uer. Indicate the s Idditional securitie	ecurity codes for all	sation securi	, <u>excludin</u> ities distrii	g optio buted a	ons, wa ns comp	rrants or pensatio	other ri n, <u>inclu</u>	ights exercisable t ding options, warr	o acquire ants or oth	 ner

a) Name of person compensated and registration status											
Indicate whether the person co	mpensated is a regi	strant.	☐ No	\checkmark	Yes						
If the person compensated is an individual, provide the name of the individual.											
Full legal name of indiv	vidual										
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 5 2 9 0 (if applicable)											
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal. Ves											
b) Business contact information											
If a firm NRD number is not pro	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				I	Province/S	state					
Country				Postal	code/Zip c	ode					
Email address				Tele	ohone num	nber					
c) Relationship to issuer	or investment fu	nd manager									
Indicate the person's relationship with the issuer or investment fund manager (select all that apply). Refer to the meaning of "connected" in Part B(2) of the Instructions and the meaning of "control" in section 1.4 of NI 45-106 for the purposes of completing this section. Connect with the issuer or investment fund manager Insider of the issuer (other than an investment fund) 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 details of all compensation Canadian dollars. Include cash of incidental to the distribution, sure allocation arrangements with the Cash commissions pages.	tion paid, or to be p commissions, securi ch as clerical, printi ne directors, officers	ities-based compensati ing, legal or accounting	ion, gifts, disc g services. Ar	counts or other issuer is not	er compensa required to	ation. D ask for r.	o not report payr details about, or	nents for se report on,	ervices internal		
·		220.00			Security cod		Security code 2	Security co	ode 3		
Value of all securitie distributed as compensation			Security cod	des	W N	Т					
Describe terms of warrants, options or other rights 60,550 finder's warrants, each entitles the holder to acquire one common share of the Issuer at a price of \$0.50 per share until August 7, 2022											
Other compensation	n ⁵	Describe									
Total compensation paid 24,220.00											
Check box if the person will or may receive any deferred compensation (describe the terms below)											
⁴ Provide the aggregate value additional securities of the issurights exercisable to acquire a ⁵ Do not include deferred comp	uer. Indicate the se dditional securities	curity codes for all sec	ion, <u>excludir</u> curities distri	ng options, wa buted as con	arrants or o	ther rigi <u>includi</u>	hts exercisable t ing options, warra	o acquire ants or oth	er		

a) Name of person com	pensated and regis	stration statu	s									
Indicate whether the person co	mpensated is a regis	trant.		✓ No	1		Yes					
If the person compensated is a	n individual, provide	the name of th	e indivi	dual.								
Full legal name of indi	vidual											
		Family name			Firs	t given i	name		Second	ary give	en names	
If the person compensated is not an individual, provide the following information.												
Full legal name of non-individual 0702232 B.C. Ltd.												
Firm NRD number (if applicable)												
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal. Ves												
b) Business contact information												
If a firm NRD number is not pr	ovided in Item 8 (a),	provide the bus	siness co	ontact inf	ormation	n of the	person	being co	mpensated.			
Street address	4567 Holly Park (Ort										
Municipality	Delta					F	Provin	ce/State	British Co	lumbi	а	
Country	Canada				F	Postal	code/2	Zip code	V4K 4S7			
Email address						Telep	ohone	number				
c) Relationship to issuer	or investment fun	d manager										
Indicate the person's relationship with the issuer or investment fund manager (select all that apply). Refer to the meaning of "connected" in Part B(2) of the Instructions and the meaning of "control" in section 1.4 of NI 45-106 for the purposes of completing this section. Connect with the issuer or investment fund manager Insider of the issuer (other than an investment fund) Director or officer of the investment fund or investment fund manager None of the above												
d) Compensation details	.											
Provide details of all compensa Canadian dollars. Include cash incidental to the distribution, su allocation arrangements with to Cash commissions p	tion paid, or to be pa commissions, securiti Ich as clerical, printin he directors, officers o	ies-based comp g, legal or acco	oensatio ounting	n, gifts, d services	iscounts An issue	or othe r is not	er comp require by the	ensation. ed to ask f	Do not report	payme ıt, or re	ents for se	ervices internal
Value of all securiti						-			Security code	; 2	Security Co	Jue 3
distributed as compensation			,	Security of	odes	L	VV	N T				
Describe terms of warrants, options or other rights 42,000 finder's warrants, each entitles the holder to acquire one common share of the Issuer at a price of \$0.50 per share until August 7, 2022												
Other compensation	on ⁵	De	scribe									
Total compensation pa	16,8	00.00										
Check box if the po	erson will or may rec	eive any defer	red con	npensatio	n (desc	ribe the	eterms	below)				
⁴ Provide the aggregate value additional securities of the iss rights exercisable to acquire a ⁵ Do not include deferred com	uer. Indicate the sec additional securities o	urity codes for	pensation all sect	on, <u>exclud</u> urities dis	<u>ding</u> opti tributed	ions, wa as com	arrants npensa	or other i tion, <u>inclu</u>	rights exercisa u <u>ding</u> options,	ble to a varran	acquire its or othe	er

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

ITEM 10 - CERTIFICATION

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

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

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

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

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

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

Name of issuer/underwriter/investment fund manager/agent	Leocor Gold Inc.										
Full legal name	Kropivnitski										
	Family name	First given name		Secondary given names							
Title	CFO, Corporate Secretary and Director										
Telephone number	6046810084	zkropivnit	ski@pre	aknessg	roup.com						
Signature	"Zula Kropivnitski"	ropivnitski" Date									
			YYYY	MM	DD						

ITEM 11- CONTACT	Person				
. 3	iness contact information for this report, if different than t		3)	regulator n	nay contact with any questions
Same as individua	al certifying the report				
Full legal name	Boparai	Mindy		Title	Lawyer
	Family name	First given name	Secondary given names	•	
Name of company	DuMoulin Black LLP				
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