# 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. (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 2. ICCUED MANAE AND OTHER IDENTIFIEDS
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 Myriad Uranium Corp. / Myriad Uranium Corp.
Previous full legal name MYRIAD METALS CORP.
If the issuer's name changed in the last 12 months, provide most recent previous legal name.
Website www.myriaduranium.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
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 <b>mining industry</b> , 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
000047317
ITEM 6 - INVESTMENT FUND ISSUER INFORMATION
If the issuer is an investment fund, provide the following information.
a) Investment fund manager 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 whether one or b	oth of the following a	oply to the investn	nent fund.							
☐ Invest primarily in o	ther investment fund	lissuers								
☐ Is a UCITs Fund <sup>1</sup>										
<sup>1</sup> Undertaking for the Collective						Union (EU) directives				
that allow collective investmen	that allow collective investment schemes to operate throughout the EU on a passport basis on authorization from one member state.									
c) Net asset valu	e (NAV) of the inve	estment fund								
Select the NAV range of th	e investment fund as o	of the date of the	most recent NAV calcu	ulation (Canadio	an \$).					
☐ Under \$5M	☐ \$5M	በ to under \$25M	☐ \$25M to unde	er \$100M	Date of NA	V calculation:				
\$100M to under \$50	00M	0M to under \$1B	\$1B or over		YYYY	MM DD				
		THE BUSTOLD!								
ITEM 7 - INFORMA	TION ABOUT T	HE DIZLKIRG	JIION							
information about purche commissions or finder's fo	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										
Select the currency or cur dollars.	rencies in which the di	istribution was mo	ade. All dollar amoun	ts provided in th	he report mu	st be in Canadian				
✓ Canadian dollar	US dollar	Euro Other (	describe)							
b) Distribution d	lates									
the distribution date as b	State the distribution start and end dates. If the report is being filed for securities distributed on only one distribution date, provide the distribution date as both the start and end dates. If the report is being filed for securities distributed on a continuous basis, include the start and end dates for the distribution period covered by the report.									
Start date	2024 06	24	End date	2024	06 24					
	YYYY MM	DD		YYYY	MM DD	_				
c) Detailed purc	haser information									
			ach the schedule to	the completed	l ronort					
Complete Schedule 1 of	this jorni jor each po	urchaser and att	ach the schedule to	the completed	терогі.					
d) Types of secu	rities distributed									
Provide the following info to indicate the security codistributed.										
					Canadian	5				
Security code CUSIP number (if	Description of	f security	Number of securities	Single or lowest price	Highest price	Total amount				

0.2500 2,912,500.0000

0.2500

11,650,000.0000

applicable)

UBS

62857U107 Unit, each comprised of one com

mon share and one-half of one co		
mmon share purchase warrant		

### 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	Underlying security code	Exercise price (Canadian \$)		Expiry date (YYYY-MM- DD)	Conversion ratio	Describe other terms (if applicable)
security code	security code	Lowest Highest		,		аррисавіе)
WNT	CMS	0.3000	0.3000	2026-06-24	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 purchasers <sup>2a</sup>	Total amount (Canadian \$)				
British Columbia	NI 45-106 2.3 [Accredited investor]	20	237,500.0000				
British Columbia	NI 45-106 2.5 [Family, friends and business associates]	2	175,000.0000				
Ontario	NI 45-106 2.3 [Accredited investor]	11	392,500.0000				
Alberta	NI 45-106 2.3 [Accredited investor]	12	125,000.0000				
Québec	NI 45-106 2.3 [Accredited investor]	3	122,500.0000				
Cayman Islands	other - BCI 72-503	1	350,000.0000				
Bermuda	other - BCI 72-503	3	1,250,000.0000				
Portugal	other - BCI 72-503	1	60,000.0000				
United Kingdom	other - BCI 72-503	2	150,000.0000				
Denmark	other - BCI 72-503	1	10,000.0000				
Brazil	other - BCI 72-503	1	20,000.0000				
United States of America	other - BCI 72-503	1	20,000.0000				
	Total dollar amount of securities distributed						
	Total number of unique purchasers <sup>2b</sup>	58					

<sup>&</sup>lt;sup>2a</sup> 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

<sup>&</sup>lt;sup>2b</sup>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.

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	

<sup>&</sup>lt;sup>3</sup>"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 ✓ Yes If yes, indicate number of persons compensated. 4 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 RED CLOUD SECURITIES INC. Firm NRD number | 62810 (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 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 (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

Cash commissions paid	\$800.0000		
alue of all securities distributed as compensation <sup>4</sup>	\$0.0000		
Security codes	Security code 1	Security code 2	Security code 3
security codes	WNT		
Describe terms of warrants, options or other rights		rrants, each exerci t \$0.25 until June 2	
		· ·	
Other compensation <sup>5</sup>	\$0.0000		
Describe			
			_
Total compensation paid	\$800.0000		
	erred compensation	on (describe the te	erms below)
Check box if the person will or may receive any def			•

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 - 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 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 Canaccord Genuity Corp./Corporation Canaccord Genuity Firm NRD number 900 (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 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 (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 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 incides services. An issuer is not required to ask for details about, or employees of a non-individual compensated by the issuer	nmissions, securitie ntal to the distribut or report on, intern	s-based compensat ion, such as clerical	ion, gifts, discounts , printing, legal or	or other accounting
Cash commissions paid	\$31,200.0000			
Value of all securities distributed as compensation <sup>4</sup>	\$0.0000			
Security codes	Security code 1	Security code 2	Security code 3	
Security codes	WNT			
Describe terms of warrants, options or other rights  Other compensation <sup>5</sup> Describe		varrants, each exe t \$0.25 until June 2		
	±24,200,0000		]	
Total compensation paid	\$31,200.0000			
Check box if the person will or may receive any def  4Provide the aggregate value of all securities distributed as compensa securities of the issuer. Indicate the security codes for all securities distributed as compensa acquire additional securities of the issuer.  5Do not include deferred compensation.	tion, <u>excluding</u> options,	warrants or other right	ts exercisable to acqui	

### **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 **V** Yes If yes, indicate number of persons compensated. 4 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. RESEARCH CAPITAL CORPORATION / CORPORATION RECHERCHE Full legal name of non-individual **CAPITAL** Firm NRD number | 3070 (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 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 (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) $\hfill \square$ Director or officer of the investment fund or investment fund manager ☐ Employee of the issuer or investment fund manager ✓ None of the above

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 compensat ion, such as clerical	ion, gifts, discount , printing, legal or	s or other accounting
Cash commissions paid	\$7,400.0000			
Value of all securities distributed as compensation <sup>4</sup>	\$0.0000			
Security codes	Security code 1	Security code 2	Security code 3	]
Security codes	WNT			
Describe terms of warrants, options or other rights		arrants, each exer t \$0.25 until June 2		
Other compensation <sup>5</sup>	\$0.0000			
Describe			7	
			_	
Total compensation paid	\$7,400.0000			
☐ Check box if the person will or may receive any def	erred compensation	on (describe the te	rms below)	
<sup>4</sup> 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.		_	•	

d) Compensation details

<sup>5</sup>Do not include deferred compensation.

### **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 Fox-Davies Capital Limited 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 | 5 Technology Park, Colindeep Lane, Colindale Municipality | London Province/State Country | United Kingdom Postal code/Zip code Email address james@fox-davies.com Telephone number | 44 (203) 884-8450 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 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 issue	nmissions, securities ntal to the distributi or report on, intern	s-based compensati ion, such as clerical,	ion, gifts, discounts , printing, legal or d	or other accounting
Cash commissions paid	\$72,400.0000			
Value of all securities distributed as compensation <sup>4</sup>	\$0.0000			
	Security code 1	Security code 2	Security code 3	
Security codes	WNT	,	·	
Describe terms of warrants, options or other rights		varrants, each exe : \$0.25 until June 2		
Other compensation <sup>5</sup>	\$0.0000			
Describe			_ ]	
Total compensation paid	\$72,400.0000			
Check box if the person will or may receive any def	erred compensation	on (describe the te	rms below)	
<sup>4</sup> Provide the aggregate value of all securities distributed as compensate securities of the issuer. Indicate the security codes for all securities distributed as compensation acquire additional securities of the issuer. <sup>5</sup> Do not include deferred compensation.	= :		•	
ITEM O DIDECTORS EVECUTIVE OFFICE		AOTERS OF TI	IE ICCLIED	
ITEM 9 – DIRECTORS, EXECUTIVE OFFICE	RS AND PROM	NOTERS OF TH	HE ISSUEK	
If the issuer is an investment fund, do not complete It	em 9. Proceed to It	tem 10.		
In disease wheelers the investment of the Galleria Control of	h	:£		)
Indicate whether the issuer is any of the following (select to	ne one that applies	- ij more man one (	appnes, select omy	one).
<ul><li>✓ Reporting issuer in a jurisdiction of Canada</li><li>☐ Foreign public issuer</li></ul>				
Wholly owned subsidiary of a reporting issuer in a	nv iurisdiction of Co	anada <sup>6</sup>		
Provide name of reporting issuer				
☐ Wholly owned subsidiary of a foreign public issuer	6			
Provide name of foreign public issuer				
☐ Issuer distributing only eligible foreign securities a	nd the distribution	is to permitted clic	ents only <sup>7</sup> .	
If the issuer is at least one of the above, do not compl		•	-	
<sup>6</sup> An issuer is a wholly owned subsidiary of a reporting issu securities, other than securities that are required by law to	ıer or a foreign pub	lic issuer if all of the	e issuer's outstandi	-

or the foreign public issuer, respectively.

<sup>7</sup> 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, 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.									
Business location of non-individual 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	Family	· ·	Secondary given	Residential jurisdiction of individual	Relationship to pone or both	promoter (select if applicable)
company name	name	name names		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

to file a completed report of exempt 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/ investment fund Myriad Uranium Corp. manager/agent							
Full legal name	LAMB	Thomas					
	Family name	First given nan	ne	Secondary given names			
Title	CEO						
Telephone number	+1 (604) 418-2877	Email address tdla	mb@gmail	l.com			
Signature	/s/ Thomas Lamb			06 25 MM DD			

### **ITEM 11 - CONTACT PERSON**

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 inc	lividual	certifying	the	report
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Full legal name	RAVEN	Michael	
·	Family name	First given name	Secondary given names
Title	Solicitor		
Name of company	Beadle Raven LLP		
Telephone number	+1 (604) 899-6401	Email address	mraven@beadleraven.com

#### NOTICE - COLLECTION AND USE OF PERSONAL INFORMATION

The personal information required under this form is collected on behalf of and used by the securities regulatory authority or regulator under the authority granted in securities legislation for the purposes of the administration and enforcement of the securities legislation. If you have any questions about the collection and use of this information, contact the securities regulatory authority or regulator in the local jurisdiction(s) where the report is filed, at the address(es) listed at the end of this form.

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.