Form 45-106F1 Report of Exempt Distribution

ITEM 1 - REPORT TYPE		172'9					S. Berlin				
New report✓ Amended report	If amen	ded, pro	vide fi	ling date	e of r	report t	hat is	s being ame	ended 2019 00	5 19 ·	YYYY-MM-DD)
ITEM 2 - PARTY CERTIFY	ING THE	REPORT									
Indicate the party certifying the Instrument 81-106 Investment F	•	-	_		-	-			estment fund, refer	to sectio	n 1.1 of National
☐ Investment fund issuer											
✓ Issuer (other than an investment fund)											
Underwriter											
ITEM 3 - ISSUER NAME A	AND OTI	JED IDE	NTIELE	DC .				anner y . Ye . Ya ha Mandanda a . Anna a . E . Ya . H. W. S. Al	a samanaga ya kimusha cikimi istokingiyo, iriin ya i		
Provide the following information	and the second s	· · · · · · · · · · · · · · · · · · ·		mann hannah hani kendhak	invest	ment fur	nd abo	out the fund	production and the second control of		
	gal name	E-Gami							 	· · · · ·	
Previous full leg							own	at AMPD V	entures Inc.		
If the issuer's name cha	nged in the				•						
,	Website					•	$\overline{}$	(if applicabl	e)		
If the issuer has a legal entity id	entifier. pro	l vide below	. Refer t	o Part B o	f the II	nstructio	ns for			ntifier".	
Legal entity i	•								-, ·-g, ·		
If two or more issuers distributed	d a single se	curity, pro	vide the	full legal	name	(s) of the	co-iss	uer(s) other th	an the issuer name	d above.	
Full legal name(s) of co-	issuer(s)							(if applicable	e)		
	en e	And the second s					er Sala elektrone elektrone	and a second process of the second party of th			
ITEM 4 - UNDERWRITER	INFORM	ATION							en de la compensa de La compensa de la co		
If an underwriter is completing t	the report, p	rovide the	underw	riter's full	legal i	name ar	d firm	NRD number.			
Full legal name		1		1		<u> </u>					
Firm NRD number							-	plicable)			
If the underwriter does not have	a firm NRE) number, p	provide	the head o	office o	contact i	nforma	ation of the un	derwriter.		
Street address									<u> </u>	<u> </u>	
Municipality		 			-	Б.		vince/State			
Country					╡	Post	al cod	le/Zip code			
Telephone number								Website			(if applicable)

ITEM 5 - ISSUER INFORMATION		547					
If the issuer is an investment fund, do not c	omplet	te Item	5. Pro	ceed to	Item 6	i .	
a) Primary industry		i.		10.75		1.1	
Provide the issuer's North American Industry Classific corresponds to the issuer's primary business activity.	ation St	andard (NAICS)	code (6	digits on	ly) that in	your reasonable judgment most closely
NAICS industry code	5	2	6	9	8	9	
If the issuer is in the mining industry , indicate the si mining industry. Select the category that best describ						issuers th	at provide services to issuers operating in the
Exploration Development F	Product	tion					
Is the issuer's primary business to invest all or substi							
	Comme	ercial/bu	siness	debt	☐ C	onsumer	debt ✓ Private companies
Cryptoassets							
b) Number of employees							
Number of employees:	□ 5	0 - 99] 100 -	499	□ 5	500 or more
c) SEDAR profile number						137	
Does the issuer have a SEDAR profile?							
☐ No ☑ Yes If yes, pro	vide SE	EDAR p	rofile n	umber	0	0 0	4 7 6 5 8
If the issuer does not have SEDAR profile co	mpleto	e item 5	5(d) - (h).			
d) Head office address							
Street address					Pro	vince/Sta	ate
Municipality				Po	stal co	de/Zip co	de
Country				•	relepho	one numb	per
e) Date of formation and financial year-end							
Date of formation YYYY MM	1 0	D	F	inancia	l year-e	end MN	M DD
f) Reporting issuer status							
Is the issuer a reporting issuer in any jurisdication of	Canada	? [x N	lo		Yes	SOCIONARIA CON ALCA MARIA SALA DO MASA
If yes, select the jurisdictions of Canada in which the	issuer is	a reporti	ing issu	er.			
☐ AII ☐ AB ☐ BC		MB		NB		NL	□ NT
☐ NS ☐ NU ☐ ON		PE		QC		SK	□ YT
g) Public listing status			10 E				
If the issuer has a CUSIP number, provide below (first	6 digits	only)		1	\$100000 1 00000000	**************************************	22000000000000000000000000000000000000
CUSIP number							
If the issuer is publicly listed, provide the name of the exchange and not a trading facility such as, for exam						curities pr	imarily trade. Provide only the name of an
Exchange name	ριε, uπ (Jacomule	.u uuul	ny syster			
h) Size of issuer's assets			4-5				

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.

X \$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	T FUND ISSUER INFORMATION
If the issuer is an inves	stment 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 Province/State
Country	Postal code/Zip code
Telephone number	Website (if applicable)
b) Type of investment	t fund
Type of investment fund tha	at 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	th 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 co	ctive 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 format	Tition Financial year-end MM DD MM DD
d) Reporting issuer st	tatus of the investment fund
Is the investment fund a rep	porting 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.
☐ All ☐	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	a CUSIP number, provide below (first 6 digits only)
	CUSIP number
	iblicly listed, provide the name of the exchange on which the investment fund's securities primarily trade. Provide only the not a trading facility such as, for example, an automated trading system.
Exchange n	
f) Net asset value (NA	AV) of the investment fund
Select the NAV range of the	e 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 \$500	00M \$500M to under \$1B \$1B or over Date of NAV calculation:

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.

Select the currency or currencies in wards Canadian dollar	hich the dis dollar		was made. l Euro	All dollar amounts provided if Other (describe)	n the repor	t must be	in Cana	ndian dollars.
b) Distribution date(s)		<u> </u>	1 — —		L			
State the distribution start and end d	ates. If the r	enort is l	neina filed f	for securities distributed on on	lv one distr	ihution d	ate provi	vide the distribution day
as both the start and end dates. If the distribution period covered by the rep	report is be	•			-		-	
as both the start and end dates. If the	report is be	•			-		-	
as both the start and end dates. If the distribution period covered by the rep	report is be	eing filed	for securiti	ies distributed on a continuou: -	s basis, incl	ude the s	tart and	

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	curit ode		CUSIP number (if applicable)	Description of security	Number of securities	Single or lowest price	Highest price	Total amount
w	N	Т		Warrants exercisable into a common share at \$0.35 per share on or before the date the Shares are listed for trading on a national Canadian securities exchange or trading system.	8,106,854.00	0.3500		2,837,398.90

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.

excl	nvertit nange urity (able	1 1 1 1 1 1 1 1 1	nderly		A CONTRACTOR OF THE PARTY OF TH	ise price adian \$)	Expiry date (YYYY- MM-DD)	Conversion ratio	Describe other items (if applicable)
	Ť					Lowest	Highest			
W	N	Т	С	М	S	0.3500				

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 ²⁸ purchasers	Total amount (Canadian \$)
British Columbia	NI 45-106 2.3 [Accredited investor]	9	245,150.15
British Columbia	NI 45-106 2.5 [Family, friends and business associates]	1	4,900.00
Alberta	NI 45-106 2.3 [Accredited investor]	2	63,000.00
Ontario	NI 45-106 2.3 [Accredited investor]	35	1,435,049.35
Germany	NI 45-106 2.3 [Accredited investor]	29	552,549.90

	Total number of unique purchasers ²	92	
	Total dollar amount of sec	curities distributed	2,837,398.90
Japan	NI 45-106 2.3 [Accredited investor]	1	21,000.00
Austria	NI 45-106 2.3 [Accredited investor]	2	24,500.00
Russian Federation	NI 45-106 2.3 [Accredited investor]	1	26,250.00
South Africa	NI 45-106 2.3 [Accredited investor]	1	14,000.00
Hong Kong	NI 45-106 2.3 [Accredited investor]	. 2	140,000.00
Denmark	NI 45-106 2.3 [Accredited investor]	1	21,000.00
Switzerland	NI 45-106 2.3 [Accredited investor]	3	35,000.00
Panama	NI 45-106 2.3 [Accredited investor]	1	70,000.00
Monaco	NI 45-106 2.3 [Accredited investor]	4	184,999.50

²⁸ 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.

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

a) Name of person comper	nsated and regis	tration	status									
Indicate whether the person comp	ensated is a regist	rant.		✓ No			Yes					
If the person compensated is an ir	ndividual, provide t	he nam	e of the indivi	dual.								
Full legal name of individ	ual					·····						
		Family n	ame	I.	First	given n	ame		Seco	ondary g	iven name	ıs
If the person compensated is not o	ın individual, provi	ide the	following infor	mation.								
Full legal name of	non-individual	Hayw	ood Securitie	es Inc.								
Firn	n NRD number	1	6 3	0	.			(if app	licable)			
Indicate whether the person comp	ensated facilitatea	the dis	tribution throu	ıgh a fund	ing port	al or ar	interne	t-based _i	oortal.	\checkmark	No [Yes
b) Business contact inform	ation			2	5 5 4		6	(f)	esta 1		r gerig Valigher	
If a firm NRD number is not provi	ded in Item 8 (a), p	orovide	the business co	ontact info	rmation	of the	person b	eing con	npensated.			
Street address										•		
Municipality			-			P	rovince	/State				
Country				j	P	ostal o	ode/Zi _l	o code				
Email address						Telep	hone n	umber				
c) Relationship to issuer or	investment fund	d mans	ager			100						
Indicate the person's relationship the Instructions and the meaning									aning of "co	onnecte	d" in Part	B(2) of
Connect with the issuer	or investment fun	d mana	iger		<u> </u>	Insider	of the is	suer (otl	ner than an	invest	nent fund	i)
Director or officer of the	investment fund o	or inves	tment fund ma	anager		Employ	ee of th	e issuer	or investme	ent fund	d manage	er
── None of the above												
d) Compensation details												
Provide details of all compensation Canadian dollars. Include cash con incidental to the distribution, such allocation arrangements with the c	nmissions, securition as clerical, printing	es-base g, legal	d compensatio or accounting	n, gifts, dis services. A	counts on issuer	or othe is not i	r compei required	nsation. I to ask fo	Do not repo	rt payn	nents for .	services
Cash commissions paid		74.98	y 223 0, u 11011		compen	routeu e	-					
Value of all securities	.,,-,						Security C M		Security of	ode 2	Security	code 3
distributed as compensation ⁴			\$	Security co	odes	L			VV IN	'		
Describe terr	ms of warrants, op	tions o	r other rights	commo	n share Specia	of the I Wari	e Issuei	on the	holder to exercise ach. The	or dee	med exe	
Other compensation ⁵			Describe									
Total compensation paid	7,87	74.98		L								
Check box if the person	on will or may rece	eive any	deferred con	npensation	(descri	ibe the	terms b	elow)				
⁴ Provide the aggregate value of a additional securities of the issuer rights exercisable to acquire addi ⁵ Do not include deferred compen	: Indicate the secu itional securities o	ırity cod	des for all secu	on, <u>excludi</u> urities disti	ing option	ons, wa as com _i	rrants oi pensatio	r other ri	ghts exerci ding options	sable to s, warra	o acquire ants or oti	her

a) Name of person comper	sated and regis	tration	status							
Indicate whether the person comp	ensated is a regist	rant.		√	No			Yes		
If the person compensated is an in	dividual, provide t	he nam	e of the indi	ividual.						
Full legal name of individe	ual									
	L	Family n	ame			First	given na	ame	1	Secondary given names
If the person compensated is not a	ın individual, prov	de the f	ollowing inf	formati	on.					
Full legal name of	non-individual	Domir	nick Capita	l Corp	oration			.,		
Firm NRD number 2 2 7 7 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 inform	ation									
If a firm NRD number is not provid	ded in Item 8 (a), p	rovide 1	he business	conta	ct informa	ation	of the p	oerson b	eing con	npensated.
Street address										
Municipality							Р	rovince	/State	
Country						Po	ostal c	ode/Zi	o code	
Email address							Telep	hone n	umber	
c) Relationship to issuer or	investment fun	d mana	iger		1				.	
Indicate the person's relationship the Instructions and the meaning										ning of "connected" in Part B(2) of
Connect with the issuer	or investment fun	d mana	ger] li	nsider	of the is	suer (oth	ner than an investment fund)
Director or officer of the	investment fund	or inves	tment fund	manag	er [_ E	Employ	ee of th	e issuer	or investment fund manager
✓ None of the above										
d) Compensation details									***	
	nmissions, securiti as clerical, printin	es-basei g, legal	d compensa or accountii	tion, gi ng serv	ifts, discou ices. An is	unts c ssuer	or other is not r	compei equired	nsation. L to ask fo	tribution. Provide all amounts in Do not report payments for services r details about, or report on, internal
Cash commissions paid	83,9	12.50					[3]	Security	code 1	Security code 2 Security code 3
Value of all securities distributed as compensation ⁴				Secu	ırity code	s	833	C M		W N T
Describe ten	ms of warrants, op	otions o	r other right	co of	mmon s	hare ecia	of the I Warr	lssue	r on the	e holder to receive one exercise or deemed exercise ach. There is also 239,750
Other compensation ⁵			Describ	е						
Total compensation paid	83,9	12.50								
Check box if the person	on will or may rec	eive any	deferred c	omper	sation (d	lescri	be the	terms b	elow)	
										
⁴ Provide the aggregate value of a additional securities of the issuer rights exercisable to acquire additional solutions of the issuer rights exercisable to acquire additional solutions. ⁵ Do not include deferred compensations.	r. Indicate the secu itional securities o	irity cod	des for all se	ation, <u>e</u> ecuritie	excluding es distribu	optio ited a	ns, wa ns com	rrants o pensatio	r other rig on, <u>includ</u>	ghts exercisable to acquire ling options, warrants or other

a) Name of person comp	pensated and regis	tration status					Zwiszi zwiecznia zwysza z	
Indicate whether the person co	mpensated is a registi	rant.	✓ No	☐ Ye	5			
If the person compensated is a	•	he name of the indiv	idual.					
Full legal name of indi	vidual Klingebiel		Christian					
Family name First given name Secondary given names								
If the person compensated is n	ot an individual, provi	de the following info	rmation.					
Full legal name	of non-individual							
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 info	rmation			reserve in the state of the sta			and .	
If a firm NRD number is not pr	ovided in Item 8 (a), p	rovide the business c	ontact informatio	n of the perso	n being com	pensated.		
Street address	Le Millefiori, App,	11c, 1 Rue des Ge	enets					
Municipality	Monaco			Provi	nce/State			
Country	Monaco		- 	Postal code	/Zip code	98000		
Email address			j	Telephon	e number			
c) Relationship to issue	or investment fund	l manager					enson en la companya de la companya De la companya de la	
Indicate the person's relationsh the Instructions and the meani						ning of "connect	≥d" in Part B(2) of	
	uer or investment fun-					er than an inves	tment fund)	
	the investment fund o		anager \square	Employee c	f the issuer o	or investment fur	nd manager	
		invocation tand in		Linployee		,	ia manago.	
✓ None of the above							Jac at	
d) Compensation details								
Provide details of all compensa Canadian dollars. Include cash								
incidental to the distribution, su allocation arrangements with t						r details about, o	r report on, internal	
Cash commissions p	,	30.00				Security code 2	Sanuth and 2	
Value of all securiti				C	urity code 1 M S	W N T	Security code 3	
distributed as compensation			Security codes					
Describe	terms of warrants, op	tions or other rights				holder thereo		
			exercise of ea	ach Special	Warrant at	\$0.35 each.		
Other compensation	on ⁵	Describe						
Total compensation p	aid 23,66	0.00						
Check box if the p	erson will or may rece	eive any deferred co	mpensation (desc	ribe the term	s below)			
^⁴ Provide the aggregate value	of all securities distril	buted as compensati	ion, excludina ont	ions, warran	ts or other ric	nhts exercisable	to acquire	
additional securities of the iss rights exercisable to acquire a	uer. Indicate the secu	irity codes for all sec	curities distributed	as compens	ation, <u>includ</u>	ling options, war	rants or other	
⁵ Do not include deferred com								

	d, do not complete							
ndicate whether the issuer is any o	f the following (selec	t the one that applie	s - if more than one o	applies, select only	y one).			
Reporting issuer in any juris	sdiction of Canada							
Foreign public issuer								
Wholly owned subsidiary of	f a reporting issuer in	n any jurisdiction of	Canada ⁶					
Provide nar	ne of reporting issue	or []
Wholly owned subsidiary of	f a foreign public iss	uer ⁶						_
Provide name o	f foreign public issue	er						
Issuer distributing only eligi	ible foreign securities	s and the distribution	n is to permitted clier	nts only ⁷				-
the issuer is at least one of the	above, do not com	nlete Item 9(a) (c). Proceed to Item 1	0 .				
If the issuer is none of the		•						
) Directors, executive office ovide the following information for	rs and promoters or	of the issuer	noter of the issuer. Fo	Officer, "P" – Prom	noter.	state the p	orovince	or
	rs and promoters or	of the issuer	noter of the issuer. Fo		ation of ual or tail	Relatio	onship to	issue
Directors, executive office wide the following information for ritory; otherwise state the country	rs and promoters of reach director, execu	of the issuer utive officer and pror o issuer", "D" – Direc	noter of the issuer. Fo tor, "O" – Executive C Secondary given	Business loc non-individu resident jurisdictio	ation of ual or tail on of	Relatio	onship to	issue
Directors, executive office vide the following information for itory; otherwise state the country	rs and promoters of reach director, execu	of the issuer utive officer and pror o issuer", "D" – Direc	noter of the issuer. Fo tor, "O" – Executive C Secondary given	Officer, "P" – Prom Business loc non-individi resident jurisdictio individu	ation of ual or tail on of ual	Relatio	onship to	issue apply
Directors, executive office vide the following information for itory; otherwise state the country	rs and promoters of reach director, executor. For "Relationship to	of the issuer	noter of the issuer. Fo tor, "O" – Executive C Secondary given names	Business loc non-individu resident jurisdictio individu Province or	ation of ual or tail on of ual or tail on of ual country	Relatio (selec	onship to	issue apply
Directors, executive office vide the following information for itory; otherwise state the country	rs and promoters of reach director, execute. For "Relationship to Family name.	of the issuer utive officer and pror o issuer", "D" – Direct First given name Karamveer	noter of the issuer. Fo tor, "O" – Executive C Secondary given names	Business loc non-individu resident jurisdictio individu Province or British Columb	ation of ual or tail on of ual or tail on of ual country	Relation (selection	onship to	issue apply
Directors, executive office ovide the following information for ritory; otherwise state the country	rs and promoters of each director, execute. For "Relationship to Family name. Thakur Varshney	of the issuer survey of the issuer of the issuer of issuer, "D" – Director of issuer, "D" – D"	noter of the issuer. Fo tor, "O" – Executive C Secondary given names	Business loc non-individu resident jurisdictio individu Province or British Columb	ation of ual or tail on of ual country	Relation (selection	onship to	issue apply
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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	AMPD Ventures Inc.						
Full legal name	Varshney	Hari					
	Family name	First giv	en name		Seconda	ary given n	ames
Title	Director						
Telephone number	6046842181	Email	address	hari@vars	shneyca	pital.com	1
Signature	"Hari Varshney"	==	Date	2019	08	21	
		-		YYYY	MM	DD	

ITEM 11- CONTACT P	'ERSON			Security (1996) of the same of	one and the second seco
		r the individual that the sec the individual certifying the	urities regulatory authority or report in Item 10.	regulator may	contact with any questions
Same as individua	I certifying the report				
Full legal name				Title	
	Family name	First given name	Secondary given names	<u> </u>	
Name of company					
Telephone number		E	mail address		

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 Schedules 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.