Form 45-106F1 Report of Exempt Distribution

BCSC EDER Reference Number 9928267

ITEM 1 - REPORT TYPE				
✓ New report				
☐ Amended report If am	ended, provide filing date	of report that is being am	ended	(YYYY-MM-DD)
ITEM 2 - PARTY CERTIFYING TI	HE REPORT			
Indicate the party certifying the report (s			vestment fund, refer to section	on 1.1 of National
Instrument 81-106 Investment Fund Cor	ntinuous Disclosure ana the comp	anion policy to INI 81-106.		
	oatmont fund)			
✓ Issuer (other than an inv	estment luna)			
Underwriter				
ITEM 3 - ISSUER NAME AND C	THER IDENTIFIERS			
Provide the following information about	the issuer, or if the issuer is an in	vestment fund, about the fund.		
Full legal nam	e AMPD Ventures Inc.			
Previous full legal nam	us full legal name			
If the issuer's name changed in	hanged in the last 12 months, provide most recent previous legal name.			
Websit	te https://ampd.tech/	(if applicab	le)	
If the issuer has a legal entity identifier_	provide below. Refer to Part B of t	he Instructions for the definition	of "legal entity identifier".	
Legal entity identifie	er 89450003OMBNJ5W5	MA39		
If two or more issuers distributed a singl	e security, provide the full legal no	ame(s) of the co-issuer(s) other th	nan the issuer named above.	
Full legal name(s) of co-issuer(s	ssuer(s) (if applicable)			
ITEM 4 - UNDERWRITER INFOF	RMATION			
If an underwriter is completing the repor	rt, provide the underwriter's full le	gal name and firm NRD number	:	1
Full legal name				
Firm NRD number	(if applicable)			
If the underwriter does not have a firm N	ve 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)

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
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
NAICS industry code 5 2 6 9 8 9 If the issuer is in the mining industry, indicate the stage of operations. This does not apply to issuers that provide services to issuers operating in the mining industry. Select the category that best describes the issuer's stage of operations. Exploration Development Production
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
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
Mortgages
Cryptoassets Downword of employees
Number of employees:
c) SEDAR profile number Does the issuer have a SEDAR profile? No Yes If yes, provide SEDAR profile number 0 0 0 4 7 6 5 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
Does the issuer have a SEDAR profile? No Yes If yes, provide SEDAR profile number 0 0 0 4 7 6 5 8 If the issuer does not have SEDAR profile complete item 5(d) - (h). d) Head office address Street address Municipality Postal code/Zip code Country Telephone number e) Date of formation and financial year-end Date of formation Financial year-end MM DD
If the issuer does not have SEDAR profile complete item 5(d) - (h). d) Head office address Street address Municipality Country Date of formation and financial year-end Postal code/Zip code Telephone number Financial year-end MM DD MM DD
If the issuer does not have SEDAR profile complete item 5(d) - (h). d) Head office address Street address Municipality Country Postal code/Zip code Country Telephone number e) Date of formation and financial year-end Date of formation Financial year-end MM DD MM DD
d) Head office address Street address Municipality Postal code/Zip code Country Telephone number Date of formation and financial year-end Financial year-end MM DD MM DD
Street address Province/State Postal code/Zip code Country Telephone number e) Date of formation and financial year-end Tinancial year-end MM DD Financial year-end MM DD
Municipality Country Telephone number e) Date of formation and financial year-end Date of formation Financial year-end MM DD MM DD
Country Telephone number e) Date of formation and financial year-end Date of formation Financial year-end MM DD MM DD
e) Date of formation and financial year-end Date of formation Financial year-end MM DD YYYY MM DD MM DD
Date of formation Financial year-end MM DD MM DD
YYYY MM DD 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 st	atus 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
	blicly 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 on an exchange and h	
-	AV) of the investment fund
	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)	Cu	rrei	псу	

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

✓ Canadian dollar US dollar Euro Other (describe)

b) Distribution date(s)

State the distribution start and end dates. If the report is being filed for securities distributed on only one distribution date, provide the distribution date as both the start and end dates. If the report is being filed for securities distributed on a continuous basis, include the start and end dates for the distribution period covered by the report.

 End date 2022 08 17

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 \$	
S	Security code	CUSIP number (if applicable)	Description of security	Number of securities	Single or lowest price	Highest price	Total amount
U	В	00175D	Each Unit consists of one common share and one common share purchase warrant	4,598,572.00	0.1400		643,800.00

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.

exch	nvertib nangea urity c	able		derlyi urity c	•		se price adian \$)	Expiry date (YYYY- MM-DD)	Conversion ratio	Describe other items (if applicable)
						Lowest	Highest			
U	В	S	W	N	Т	0.2000		2024-02-17	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]	6	246,400.00
Ontario	NI 45-106 2.3 [Accredited investor]	6	166,600.00
Québec	NI 45-106 2.3 [Accredited investor]	1	23,800.00
Germany	NI 45-106 2.5 [Family, friends and business associates]	1	39,000.00
Panama	NI 45-106 2.3 [Accredited investor]	1	14,000.00
United Kingdom	NI 45-106 2.3 [Accredited investor]	1	112,000.00

United Arab Emirates	United Arab Emirates NI 45-106 2.3 [Accredited investor] 1			
	curities distributed	643,800.00		
	Total number of unique purchasers ^{2b}	17		

^{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.

ITEM 8 - COMPENSATION INFORMATION
Provide information for each person (as defined in NI 45-106) to whom the issuer directly provides, or will provide, any compensation in connection with the distribution. Complete additional copies of this page if more than one person was, or will be, compensated.
Indicate whether any compensation was paid, or will be paid, in connection with the distribution.
No ✓ Yes If yes, indicate number of persons compensated. 3

a) Name of person comp	pensated and regis	stration statu	s									
Indicate whether the person co	mpensated is a regist	trant.		☐ 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 n	ame	•	Seco	ndary given	names	
If the person compensated is no	ot an individual, prov	ride the followi	ng infor	rmation.								
Full legal name	of non-individual	RESEARCI CAPITAL	H CAP	ITAL CO	RPORA	ATION	/ COR	PORAT	ION REC	HERCHE		
F	irm NRD number	3 0	7	0				(if appl	icable)			
Indicate whether the person co	mpensated facilitated	d the distribution	on thro	ugh a fund	ing port	al or an	interne	t-based p	ortal.	✓ N	o [Yes
b) Business contact info	rmation											
If a firm NRD number is not pr	ovided in Item 8 (a), _I	provide the bus	siness co	ontact info	rmation	of the	person b	eing com	pensated.			
Street address												
Municipality						Р	rovince	e/State				
Country					P	ostal c	ode/Zi	p code				
Email address	Email address					Telep	hone n	umber				
c) Relationship to issuer	or investment fun	d manager		_								
Indicate the person's relationsh the Instructions and the meani									ning of "co	nnected" ir	Part B	8(2) of
Connect with the issu	uer or investment fur	nd manager				nsider	of the is	suer (oth	er than an	investmen	t fund)	
Director or officer of	the investment fund	or investment	fund ma	anager	E	Employ	ee of th	e issuer o	or investme	ent fund ma	anager	
✓ None of the above												
d) Compensation details												
Provide details of all compensations of all compensations and compensation of the distribution, sure allocation arrangements with the compensation of the compensation	commissions, securiti Ich as clerical, printin	ies-based comp g, legal or acco	ensatio ounting	on, gifts, dis services. A	counts on issuer	or othei is not i	r compe required	nsation. E to ask fo	o not repo	rt payment	s for se	rvices
Cash commissions pa	aid 20,6	78.00					Security	code 1	Security co	de 2 Se	curity co	de 3
Value of all securiting distributed as compensation			;	Security co	odes		W	Т				
Describe	terms of warrants, o	otions or other	rights		of \$0.20				ch warrar onths fror			at
Other compensation	n ⁵	De	scribe									
Total compensation pa	aid 20,6	78.00										
Check box if the pe	erson will or may rec	eive any defer	red con	npensatior	descri	be the	terms b	elow)				
⁴ Provide the aggregate value additional securities of the iss rights exercisable to acquire a ⁵ Do not include deferred comp	uer. Indicate the sec additional securities o	urity codes for										er

a) Name of person comp	pensated and reg	gistration status							
Indicate whether the person co	mpensated is a reg	istrant.	☐ No	√	Yes				
If the person compensated is a	n individual, provid	e the name of the indiv	ridual.						
Full legal name of indiv	vidual								
		Family name	'	First given n	name		Secondary g	iven names	
If the person compensated is no	ot an individual, pr	ovide the following info	rmation.						
Full legal name	of non-individua	PI Financial Corp	./Corporation	n Financiè	re PI				
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. V No Yes									
b) Business contact info	rmation								
If a firm NRD number is not pr	ovided in Item 8 (a)	, provide the business o	contact inform	ation of the	person bei	ng com	pensated.		
Street address									
Municipality				F	Province/S	State			
Country			Ī	Postal o	code/Zip	code			
Email address				Telep	hone nur	mber			
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 aboved) Compensation details									
Provide details of all compensations of all compensations and compensations. Include cash incidental to the distribution, sur allocation arrangements with the Cash commissions page 1.5.	tion paid, or to be p commissions, secur Ich as clerical, print the directors, officers	ities-based compensati ing, legal or accounting	on, gifts, discou g services. An is	unts or othe ssuer is not	r compens required to by the issu	ation. L ask for er.	Do not report payr r details about, or	nents for se report on, i	ervices internal
Value of all securiti				-	Security co	ode 1	Security code 2	Security co	ode 3
distributed as compensation			Security code	s	VV IN	'			
Describe :	terms of warrants,	options or other rights							
Other compensation ⁵ Describe 32,200 broker warrants issued. Each warrant is exercisable at a price of \$0.20 for a period of 18 months from the date of issuance.									
Total compensation pa	aid 4,	508.00							
Check box if the pe	erson will or may re	eceive any deferred co	mpensation (d	lescribe the	terms belo	ow)			
⁴ Provide the aggregate value additional securities of the iss rights exercisable to acquire a ⁵ Do not include deferred comp	uer. Indicate the se additional securities	ecurity codes for all sec	ion, <u>excluding</u> curities distribu	options, wa uted as com	arrants or c pensation,	other rig , <u>inclua</u>	ghts exercisable t l <u>ing</u> options, warra	ว acquire ants or othe	?r

a) Name of person comp	ensated and	registration	n status	5								
Indicate whether the person co	mpensated is a	registrant.			☐ No		\checkmark	Yes				
If the person compensated is ar	n individual, pro	ovide the na	me of the	individ	dual.							
Full legal name of indiv	ridual											
		Family	name			Firs	t given i	name		Secondary	given names	S
If the person compensated is no	If the person compensated is not an individual, provide the following information.											
Full legal name	of non-indivi	dual HAY	WOOD	SECL	JRITIES	NC./	VALE	URS I	/OBILIE	RES HAYWOC	D Inc.	
Firm NRD number 1 6 3 0 (if applicable)												
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal. Very No Yes												
b) Business contact information												
If a firm NRD number is not pro	ovided in Item (3 (a), provid	e the busi	iness co	ntact info	mation	of the	persor	being co	mpensated.		
Street address												
Municipality							F	Provin	ce/State			
Country						F	Postal	code/2	Zip code			
Email address							Telep	ohone	number			
c) Relationship to issuer	or investmer	it fund ma	nager									
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, so ch as clerical, p ne directors, off	ecurities-bas printing, lego icers or emp	sed compe al or accor loyees of	ensatio unting	n, gifts, dis services. A	counts n issuei	or othe r is not	er comp require	ensation. Ed to ask f	Do not report pay	ments for s	ervices
Cash commissions pa	alu	6,860.00	<u>'</u>					Secur	ty code 1	Security code 2	Security of	code 3
Value of all securitie distributed as compensation				5	Security co	des		W	N T			
Describe terms of warrants, options or other rights 49,000 broker warrants issued. Each warrant is exercisable at a price of \$0.20 for a period of 18 months from the date of issuance.												
Other compensatio	n ⁵		Des	cribe								
Total compensation pa	id	6,860.00										
Check box if the pe	rson will or ma	y receive a	ny deferr	ed com	pensation	(descr	ribe the	e terms	below)			
⁴ Provide the aggregate value of additional securities of the issu- rights exercisable to acquire a ⁵ Do not include deferred comp	ıer. Indicate th dditional secui	e security c	odes for a									ner

тем 9 - Directors, Execu	TIVE OFFICERS	AND PROMOT	ERS OF THE ISS	SUER						
If the issuer is an investment fund	d, do not complete l	Item 9. Procced to	Item 10.							
Indicate whether the issuer is any o	f the following (select	t the one that appli	es - if more than one	applies, select onl	y 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 nan	ne of reporting issue	r						7		
Wholly owned subsidiary of	a foreign public issu	uer 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 b	oox and complete	Item 9(a) - (c).							
a) Directors executive officer	s and promoters of	of the issuer								
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										
territory; otherwise state the country.							province			
Organization or company name	Organization or company name Family name First given name First given name Secondary given names Secondary given names Business location of non-individual or residentail jurisdiction of individual Relationship to issuer (select all that apply)									
				Province or	country	D	0	Р		
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	Organization or company name Family name First given name Secondary given names Residential jurisdiction of individual Relationship to promoter (select one or both if applicable)									
				Province or country	D		C)		
c) Residential address of eac	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	AMPD Ventures Inc.		
Full legal name	Brown		
	Family name	First given name	Secondary given names
Title	CEO & Director		
Telephone number	6043323329	Email address	anthony.brown@ampd.tech
Signature	Anthony Brown	2022 08 22	
			YYYY MM DD

TEM 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 individua	al certifying the report								
Full legal name	Wu	Tina				Title	Regulatory Compiance & Reporting Manager		
	Family name	First given	name	Secondary	given names				
Name of company	Varshney Capital Corp.								
Telephone number	6046842181		Em	ail address	tina@varshr	neycapita	ıl.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.

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.