# Form 45-106F1 Report of Exempt Distribution

BCSC EDER Reference Number 9254682

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 th Instrument 81-106 Investment									estment fund	1, refer to sect	ion 1.1 of National
Investment fund i	ssuer				•						
✓ Issuer (other than	n an inve	stment fu	nd)								
			,								
ITEM 3 - ISSUER NAME											
Provide the following informat							nd, about	t the fund.			
Full le	egal name	Sentine	Reso	ources (	Corp.						
Previous full le	Previous full legal name										
If the issuer's name ch	If the issuer's name changed in the last 12 months, provide most recent previous legal name.										
	Website (if applicable)										
If the issuer has a legal entity i	identifier <u>,</u> pr	ovide below	. Refer t	to Part B c	of the l	Instructio	ons for th	ne definition o	of "legal enti	ty identifier".	
Legal entity	dentifier										
If two or more issuers distribut	ed a single	security, pro	vide the	e full legal	name	e(s) of th	e co-issue	er(s) other th	an the issuer	named above	2.
Full legal name(s) of co	o-issuer(s)							(if applicable	e)		
ITEM 4 - UNDERWRITE	R INFORM	<b>ATION</b>									
If an underwriter is completing	the report,	provide the	underw	riter's full	legal	name a	nd firm N	NRD number.			_
Full legal name											
Firm NRD number							(if appl	licable)			
If the underwriter does not hav	If the underwriter does not have a firm NRD number, provide the head office contact information of the underwriter.										
Street address											]
Municipality							Provir	nce/State			1
Country						Pos	tal code	Zip code			]
Telephone number								Website			(if applicable)

ITEM 5 - ISSUER INFORMATION
If the issuer is an investment fund, do not complete Item 5. Proceed to Item 6.
a) Primary industry
Provide the issuer's North American Industry Classification Standard (NAICS) code (6 digits only) that in your reasonable judgment most closely corresponds to the issuer's primary business activity.
NAICS industry code 2 1 2 2 1
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
Does the issuer have a SEDAR profile?
No       ✓ Yes       If yes, provide SEDAR profile number       0       0       4       7       8       5       6
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
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
S100M to under \$500M	S500M to under \$1B	S1B or over

If the issue is an investment fund, provide the following information:     a) Investment fund manager information     Full legal name     Furn NRD number      If the investment fund manager does not have a firm NRD number, provide the head office contact information of the investment fund manager. Street address Municipality Province/State Guntry Postal code/Zip code Telephone number D Type of investment fund Tree of investment fund that most accurately identifies the issuer (select only one). Alternative strategies Cryptoasset Other (describe) Indicate whether one or both of the following apply to the investment fund. Investment fund that most accurately identifies the issuer (select only one). Alternative strategies Cryptoasset Other (describe) Indicate whether one or both of the following apply to the investment fund. Investment fund that most accurately identifies the issuer (select only one). Indicate whether one or both of the following apply to the investment fund. Investing in the investment fund issuers Is a UCIT's Fund's) Understaining in other investment fund issuers Is a UCIT's Fund's) are investment fund issuers Is a UCIT's Fund's) are investment fund is regulated by the European Union Contractives that allow collective investment of tansfieable Securities funds (UCIT's Funds) are investment fund is regulated by the European Union Context in a manager in any indication of Canada? No
Full legal name
Firm NRD number (if applicable)   If the investment fund manager does not have a firm NRD number, provide the head office contact information of the investment fund manager.   Street address Municipality   Province/State
If the investment fund manager does not have a firm NRD number, provide the head office contact information of the investment fund manager. Street address Municipality County Postal code/Zip code County Telephone number Postal code/Zip code Do Type of investment fund Type of investment fund Type of investment fund that most accurately identifies the issuer (select only one). Do Type of investment fund that most accurately identifies the issuer (select only one). Do Money market De Quity De County De C
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d) Reporting issuer status of the investment fund     Is the investment fund a reporting issuer in any jurisdication of Canada?     No   Yes     If yes, select the jurisdictions of Canada in which the investment fund is a reporting issuer.     All   AB   BC   MB   NB   NL   NS   NU   ON   PE   QC   SK   YT      If the investment fund has a CUSIP number, provide below (first 6 digits only) CUSIP number If the investment fund is publicly listed, provide the name of the exchange on which the investment fund's securities primarily trade. Provide only the
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CUSIP number
name of an exchange and not a trading facility such as, for example, an automated trading system
Exchange name
f) Net asset value (NAV) of the investment fund
Select the NAV range of the investment fund as of the date of the most recent NAV calculation (Canadian \$).
L L \$\the under \$\mathbf{S}M \qquad L \qquad \mathbf{S}M \text{ to under \$\mathbf{S}M \qquad \text{ to under \$\mathbf{S}M \qquad \text{to under \$\mathbf{S}M
\$0 to under \$5M       \$5M to under \$25M       \$25M to under \$100M         \$100M to under \$500M       \$500M to under \$1B       \$1B or over       Date of NAV calculation:

# **ITEM 7 - INFORMATION ABOUT THE DISTRIBUTION**

If an issuer located outside of Co purchasers resident in that juriso connection with the distribution, Schedule 1 of the report.	nada completes a liction of Canada	distribution in a j only. Do not inclue	urisdiction of Canada, inc de in Item 7 securities issu	ed as payr	ment of co	ommissions or	finder's fees in				
a) Currency											
Select the currency or currencies	in which the distr	ibution was made.	. All dollar amounts provi	ded in the	report mi	ust be in Cana	dian dollars.				
Canadian dollar	US dollar	Euro	Other (describ	be)							
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.											
Start d	ate 2020	09 14	End da	ate 202	20 0	09 14					
	YYYY	MM DD		۲Y۱	YY N	IM DD	_				
c) Detailed purchaser info	ormation										
Complete Schedule 1 of th	is form for eac	h purchaser an	d attach the schedule	to the c	omplete	ed report.					
d) Types of securities dis	tributed										
Provide the following informatic security code. If providing the Co							how to indicate the				
						Canadiar	n \$				
Security CUSIP number (if applicable)	Description	of security	Number of securities		le or vest ice	Highest price	Total amount				
UBS			2,000,000.0	0 0	).2500		500,000.00				
e) Details of rights and co	onvertible/excha	ingeable securit	ies								
If any rights (e.g. warrants, optic were distributed, provide the co							/exchangeable securities				
Convertible / exchangeable security code Underlying security code	(Cana Lowest	se price idian \$) Highest	Expiry date (YYYY- MM-DD)	Conversio ratio	on	Describe othe	er items (if applicable)				
W N T C M S	0.4000										
f) Summary of the distribution State the total dollar amount of purchaser resides and for each e distribution in a jurisdiction of C This table requires a separate lin purchaser resides, if a purchaser jurisdiction. For jurisdictions within Canada,	securities distribut exemption relied ou Canada, include dis ne item for: (i) each resides in a jurisd	ted and the numbe n in Canada for th stributions to purce h jurisdiction wher liction of Canada,	er of purchasers for each j at distribution. However, hasers resident in that jur e a purchaser resides, (ii) and (iii) each exemption r	if an issuer isdiction of each exem	<sup>r</sup> located o <sup>r</sup> Canada ption reli	outside of Can only. ed on in the ju	ada completes a risdiction where a				
Province or country		Exemption reli	ed on		of unique² hasers	Total	amount (Canadian \$)				
British Columbia	NI 45-106 2.	3 [Accredited	investor]		2	29	482,500.00				
United Kingdom	NI 45-106 2.	3 [Accredited	investor]			1	12,500.00				
Alberta	NI 45-106 2. associates]	5 [Family, frie	nds and business			1	5,000.00				
		T	otal dollar amount of se	ecurities d	listribute	ed	500,000.00				
		Total number	of unique purchasers <sup>2b</sup>		3	51					
<sup>2a</sup> In calculating the number of	unique purchasers	per row, count ea	ch purchaser only once. Jo	oint purcha	asers may	, be counted a	s one purchaser.				

<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.

#### 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.<sup>3</sup> 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>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.

#### 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)

ITEM 8 - COMPENSATION I	NFORMATION	I						
Provide information for each person the distribution. <b>Complete addition</b>								nsation in connection with
Indicate whether any compensation	on was paid, or will	be paid, in con	nectior	n with the distri	bution.			
🗌 No 🖌 Yes	If yes, indicate	e number of p	erson	s compensat	ed.	3		
a) Name of person compens	sated and registr	ation status						
Indicate whether the person compe	nsated is a registra	nt.	Ľ	No	$\checkmark$	Yes		
If the person compensated is an inc	lividual, provide the	e name of the ir	ndividu	al.				
Full legal name of individu	al							
	Fa	mily name		Fire	st given n	name	Sec	ondary given names
If the person compensated is not ar	· · · · ·	-						
Full legal name of r	non-individual	chelon Weal	th Par	tners				
Firm	NRD number	3 2	4	2 0		(if ap	plicable)	
Indicate whether the person compe	nsated facilitated t	he distribution i	througi	h a funding por	tal or ar	n internet-based	d portal.	✓ No 🗌 Yes
b) Business contact informa								
If a firm NRD number is not provide	ed in Item 8 (a), pro	ovide the busine	ess con	tact informatio	n of the	person being co	ompensated.	
Street address								
Municipality					F	Province/State	e	
Country				I	Postal o	code/Zip code	e	
Email address					Telep	hone numbe	r	
c) Relationship to issuer or i	nvestment fund	manager						
Indicate the person's relationship w the Instructions and the meaning o								onnected" in Part B(2) of
Connect with the issuer of	or investment fund	manager			Insider	of the issuer (	other than a	n investment fund)
Director or officer of the in	nvestment fund or	investment fun	d man	ager	Employ	vee of the issue	er or investm	nent fund manager
None of the above								
d) Compensation details								
Provide details of all compensation Canadian dollars. Include cash com- incidental to the distribution, such a allocation arrangements with the di	missions, securities s clerical, printing, rectors, officers or o	-based compen legal or accoun employees of a	sation, nting se	gifts, discounts rvices. An issue	or othe er is not i	r compensation required to ask	. Do not rep	ort payments for services
Cash commissions paid	750	0.00				Security code 1	Security of	code 2 Security code 3
Value of all securities distributed as compensation <sup>4</sup>			Se	curity codes				
Describe term	s of warrants, opti	ons or other rig	hts					
Other compensation <sup>5</sup>		Descr	ibe					
Total compensation paid	750	0.00	L					
Check box if the person	n will or may receiv	ve any deferred	l comp	ensation (desc	ribe the	terms below)		
<sup>4</sup> Provide the aggregate value of al	l securities distribu	ited as compen	sation	. <u>exclud</u> ina opt	ions. wa	nrrants or other	rights exerc	isable to acquire

a) Name of person comp	ensated and regis	tration status										
Indicate whether the person co	mpensated is a regist	rant.	No No	$\checkmark$	Yes							
If the person compensated is ar	individual, provide t	he name of the ind	ividual.									
Full legal name of indiv	ridual											
	I	Family name	F	First given na	ame	Seco	ndary given na	mes				
If the person compensated is no	ot an individual, provi	ide the following inf	formation.									
Full legal name	Full legal name of non-individual Haywood Securities Inc.											
F	irm NRD number	1 6	3 0		(if a	pplicable)						
Indicate whether the person co	npensated facilitated	the distribution thr	ough a funding p	ortal or an	internet-base	ed portal.	✓ No	Yes				
b) Business contact infor	mation											
If a firm NRD number is not pro	ovided in Item 8 (a), p	provide the business	contact informat	ion of the p	person being	compensated.						
Street address												
Municipality				Р	rovince/Stat	te						
Country				Postal c	ode/Zip coc	le						
Email address				Telepl	hone numbe	er						
c) Relationship to issuer	or investment fund	d manager										
Indicate the person's relationsh the Instructions and the meanir							nnected" in P	art B(2) of				
Connect with the issu	-		5 for the purposes		-	(other than an	investment fr	und)				
				_								
Director or officer of t	ne investment fund c	or investment fund i	manager		ee of the Issu	ier or investme	ent fund mana	ager				
✓ None of the above												
d) Compensation details												
Provide details of all compensat Canadian dollars. Include cash o incidental to the distribution, su allocation arrangements with th	commissions, securitie ch as clerical, printing	es-based compensa g, legal or accountir	tion, gifts, discour 1g services. An iss	nts or other uer is not r	compensatio	n. Do not repoi	rt payments f	or services				
Cash commissions pa	id 9,00	00.00			Security code	1 Security co	de 2 Secur	ity code 3				
Value of all securitie	-		Security codes									
distributed as compensatio	n <sup>·</sup>		s									
Other compensatio	-	Describe										
Total compensation pa		00.00										
	rson will or may rece		ompensation (de	scribe the	terms below)							
<sup>4</sup> Provide the aggregate value of additional securities of the issu- rights exercisable to acquire a <sup>5</sup> Do not include deferred comp	ier. Indicate the secu dditional securities o	irity codes for all se										

a) Name of person compe	ensated and registrat	on status					
Indicate whether the person com	pensated is a registrant.		🗌 No	<ul><li>✓</li></ul>	Yes		
If the person compensated is an i	individual, provide the n	ame of the indivi	dual.				
Full legal name of individ	dual						
	Fami	y name	Fir	st given nar	me	Secon	dary given names
If the person compensated is not	an individual, provide t	he following infor	mation.				
Full legal name c	of non-individual Lee	ede Jones Gab	le Inc.				
Fin	m NRD number	7 7	0		(if app	olicable)	
Indicate whether the person com	pensated facilitated the	distribution throu	igh a funding poi	rtal or an i	internet-based	portal.	✓ No 🗌 Yes
b) Business contact inform	nation						
If a firm NRD number is not prov	ided in Item 8 (a), provi	de the business co	ontact informatio	n of the pe	erson being co	mpensated.	
Street address							
Municipality				Pro	ovince/State		
Country				Postal co	ode/Zip code		
Email address				Teleph	one number		
c) Relationship to issuer o	r investment fund ma	anager	-				
Indicate the person's relationship the Instructions and the meaning							nnected" in Part B(2) of
Connect with the issue	r or investment fund ma	anager		Insider of	f the issuer (of	her than an ii	nvestment fund)
Director or officer of the	e investment fund or inv	vestment fund ma	anager	Employe	e of the issuer	or investmer	nt fund manager
✓ None of the above							
d) Compensation details							
Provide details of all compensation Canadian dollars. Include cash co incidental to the distribution, such allocation arrangements with the	mmissions, securities-bo n as clerical, printing, leg	ased compensatic al or accounting	n, gifts, discounts services. An issue	s or other o er is not re	compensation. equired to ask f	Do not report	t payments for services
Cash commissions paid	6,000.0	0		S	Security code 1	Security coc	le 2 Security code 3
Value of all securities distributed as compensation			Security codes				
	rms of warrants, option	s or other rights					
Other compensation <sup>5</sup>	5	Describe					
Total compensation paid	d 6,000.0	0	L				
Check box if the pers	son will or may receive	any deferred con	npensation (desc	ribe the te	erms below)		
<sup>4</sup> Provide the aggregate value of additional securities of the issue rights exercisable to acquire add <sup>5</sup> Do not include deferred compe-	er. Indicate the security ditional securities of the	codes for all sect					

ITEM 9 - DIRECTORS, EXECU	TIVE OFFICERS	AND PROMOT	ERS OF THE ISS	SUER							
If the issuer is an investment fund	l, do not complete	Item 9. Procced to	Item 10.								
Indicate whether the issuer is any o	f the following (seled	t the one that appli	es - if more than one	applies, select onl	y one).						
<ul> <li>Reporting issuer in any juris</li> </ul>	diction of Canada										
Foreign public issuer											
Wholly owned subsidiary of	a reporting issuer i	n any jurisdiction of	Canada <sup>6</sup>								
Provide nan	ne of reporting issue	ər									
Wholly owned subsidiary of	a foreign public iss	uer <sup>6</sup>									
Provide name of	foreign public issue	er									
Issuer distributing only eligi	ble foreign securitie	s and the distributio	n is to permitted clie	ents only <sup>7</sup>				_			
If the issuer is at least one of the	above, do not com	plete Item 9(a) – (d	:). Proceed to Item	10.							
<ul> <li><sup>6</sup> 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.</li> <li><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.</li> <li>If the issuer is none of the above, check this box and complete Item 9(a) - (c).</li> </ul>											
a) Directors, executive officers and promoters of the issuer											
Provide the following information for territory; otherwise state the country.						tate the	province	or			
Organization or company name	Family name	First given name	Secondary given names	given Business location of non-individual or residentail iurisdiction of Select all that ap							
				Province or	country	D	0	Р			
b) Promoter information											
If the promoter listed above is not an within Canada, state the province or		-				-					
Organization or company name	Family name	First given name	Secondary given names	Residential jurisdiction of individual	Rela (select o	itionship one or bo	to promo oth if appl	oter licable)			
				Province or country	D		C	)			
c) Residential address of eac	h 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 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	Sentinel Resources Corp.								
Full legal name	Gamley	Rob							
	Family name	First given name		Seconda	ary given na	ames			
Title	CEO								
Telephone number	6046897422	Email address	rob@con	tactfinan	cial.com				
Signature	Rob Gamley	Date	2020	09	30				
			YYYY	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 individual certifying the report

Full legal name	Lennox	Siobhan			Title	Attorney
	Family name	First given name	Secondary	given names		
Name of company	O'Neill Law LLP					
Telephone number	6046875792	Er	nail address	siobhan@st	ockslaw.	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.