Form 45-106F1 Report of Exempt Distribution

BCSC EDER Reference Number 9571033

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.											
Investment fund issuer											
✓ Issuer (other than an investment fund)											
Underwriter	· · · · · · · · · · · · · · · · · · ·										
ITEM 3 - ISSUER NAME AND OT	HED IDENTIFIEDS										
Provide the following information about the		vestment fund, about the fund									
Full legal name											
Previous full legal name											
If the issuer's name changed in th	e last 12 months, provide most	recent previous legal name									
Website	t dist 12 mondis, provide most		le)								
		(if applicab									
If the issuer has a legal entity identifier, pr Legal entity identifier	ovide below. Refer to Part B of t	ne instructions for the definition	of "legal entity laentifier".								
	require provide the full lead of		age the ingues regreed above								
If two or more issuers distributed a single s Full legal name(s) of co-issuer(s)		(if applicab									
T ull legal flame(s) of co-issue(s)		(п аррпсар	le)								
ITEM 4 - UNDERWRITER INFORM	MATION										
If an underwriter is completing the report,	provide the underwriter's full le	gal name and firm NRD number	;								
Full legal name											
Firm NRD number		(if applicable)									
If the underwriter does not have a firm NR	D number, provide the head off	ice contact information of the un	nderwriter.								
Street address											
Municipality		Province/State									
Country		Postal code/Zip code									
Telephone number		Website	(if appli	icable)							

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 mining industry , indicate the stage of operations. This does not apply to issuers that provide services to issuers operating in the mining industry. Select the category that best describes the issuer's stage of operations.											
✓ Exploration Development Production											
Is the issuer's primary business to invest all or substantially all of its assets in any of the following? If yes, select all that apply.											
☐ Mortgages ☐ Real estate ☐ Commercial/business debt ☐ Consumer debt ☐ Private companies											
☐ Cryptoassets											
b) Number of employees											
Number of employees: ✓ 0 - 49											
c) SEDAR profile number											
Does the issuer have a SEDAR profile?											
No ✓ Yes If yes, provide SEDAR profile number 0 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											
11) 0120 01 133001 3 033013											

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 investment 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	\$5M to under \$25M \$25M 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. Currency a) Select the currency or currencies in which the distribution was made. All dollar amounts provided in the report must be in Canadian dollars. US dollar ✓ Canadian dollar Euro Other (describe) 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 date End date 2021 80 04 2021 80 04 YYYY MM DD YYYY MM DD Detailed purchaser information Complete Schedule 1 of this form for each purchaser and attach the schedule to the completed report. 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 \$ Single or CUSIP number Security Number of

Details of rights and convertible/exchangeable securities

(if applicable)

code

BS

Description of security

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.

securities

11,764,705.00

Highest price

lowest

price

0.1700

Total amount

2,000,000.00

Convertible / exchangeable security code		able Underlying		(Canadian S)		Expiry date (YYYY- MM-DD)	Conversion ratio	Describe other items (if applicable)		
						Lowest	Highest			
W	N	Т	С	М	S	0.2300				

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

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 \$)					
Alberta	NI 45-106 2.3 [Accredited investor]	13	282,600.01					
British Columbia	NI 45-106 2.3 [Accredited investor]	44	1,421,559.84					
Nova Scotia	NI 45-106 2.3 [Accredited investor]	1	20,400.00					
Ontario	NI 45-106 2.3 [Accredited investor]	4	131,750.00					
Switzerland	NI 45-106 2.3 [Accredited investor]	2	34,000.00					
Thailand	NI 45-106 2.3 [Accredited investor]	1	17,000.00					
United Kingdom	NI 45-106 2.3 [Accredited investor]	4	92,650.00					
	Total dollar amount of se	curities distributed	1,999,959.85					
	Total number of unique purchasers ^{2b} 69							

- ^{2a} In calculating the number of unique purchasers per row, count each purchaser only once. Joint purchasers may be counted as one purchaser.
- ^{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.

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)		Date previously filed or delivered (YYYY-MM-DD)			

ITEM 8 - COMPENSATION	N INFORMATION	1										
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.												
a) Name of person compe	ensated and regist	ation status										
Indicate whether the person com	pensated is a registro	ınt.		☐ No		\checkmark	Yes					
If the person compensated is an individual, provide the name of the individual.												
Full legal name of individual												
Family name First given name Secondary given names												
If the person compensated is not	an individual, provid	e the following	infori	mation.								
Full legal name of	of non-individual	eede Jones	Gabl	e Inc.								
Fir	m NRD number	5 7	7	0				(if appl	icable)			
Indicate whether the person com	pensated facilitated t	he distribution	throu	gh a fundi	ng porto	al or an	interne	rt-based p	ortal.	√] No	Yes
b) Business contact inform	nation											
If a firm NRD number is not prov	vided in Item 8 (a), pr	ovide the busin	ess co	ntact info	rmation	of the p	person b	peing com	pensated	•		
Street address												
Municipality						Pı	rovince	e/State				
Country					Po	ostal c	ode/Zi	p code				
Email address						Teleph	hone n	umber				
c) Relationship to issuer c	r investment fund	manager										
Indicate the person's relationship the Instructions and the meaning									ning of "d	connecte	d" in Pa	rt B(2) of
Connect with the issue	r or investment fund	manager				nsider o	of the is	suer (oth	er than a	n invest	ment fui	nd)
Director or officer of the	e investment fund or	investment fu	nd ma	nager		Employe	ee of th	e issuer	or investn	nent fun	d mana	ger
✓ 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	ommissions, securities h as clerical, printing, directors, officers or	-based comper legal or accou	nsatio nting :	n, gifts, dis services. A	counts c n issuer	or other is not re	compe equired	nsation. [to ask fo	Do not rep	ort payr	nents fo	r services
Cash commissions paid	5,99°	7.60				:	Security	code 1	Security	code 2	Securit	y code 3
Value of all securities distributed as compensation			S	Security co	des	\	W	Т				
Describe te	rms of warrants, opt	ons or other ri	ghts	35280 b	roker v	varrant	ts					
Other compensation	5	Desc	ribe									
Total compensation paid	5,99 ⁷	7.60										
Check box if the person will or may receive any deferred compensation (describe the terms below)												
⁴ Provide the aggregate value of additional securities of the issue rights exercisable to acquire add ⁵ Do not include deferred compe	er. Indicate the secur ditional securities of	ity codes for al										

a) Name of person comper	sated and regis	stration status											
Indicate whether the person comp	ensated is a regist	rant.		☐ No		\checkmark	Yes						
If the person compensated is an individual, provide the name of the individual.													
Full legal name of individe	ual												
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 Haywood Securities 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. V No Yes													
b) Business contact information													
If a firm NRD number is not provid	ded in Item 8 (a), բ	provide the busin	ess co	ntact infor	mation c	of the _l	person	being	com	pensated	d.		
Street address													
Municipality						Р	rovino	ce/Sta	ate				
Country					Ро	stal c	ode/Z	ip co	de				
Email address					7	Telep	hone	numb	er				
c) Relationship to issuer or investment fund manager													
Indicate the person's relationship the Instructions and the meaning										ning of '	'connecte	ed" in P	art B(2) of
Connect with the issuer			,			-	-			er than a	an invest	ment fu	und)
Director or officer of the	investment fund of	or investment fur	nd ma	ınager	□ E	mploy	ee of t	he iss	suer o	r investi	ment fun	d mana	ager
None of the above													
d) Compensation details													
Provide details of all compensation	paid, or to be pai	id, to the person i	identi	fied in Item	8(a) in	conne	ction w	ith th	e dist	ribution.	Provide	all amo	ounts in
Canadian dollars. Include cash con incidental to the distribution, such													
allocation arrangements with the o									SK JUI	uetutis i	ubout, oi	героп	on, internat
Cash commissions paid	59,9	99.99					Securit	v code	1	Security	code 2	Securi	ity code 3
Value of all securities			c	Security co	400			<u> </u>	Т				1
distributed as compensation ⁴													
Describe terr	ms of warrants, op	otions or other rig	ghts	352941	orokers	warr	ants						
Other compensation ⁵		Desc	ribe										
Total compensation paid	59,99	99.99											
Check box if the person	on will or may rece	eive any deferre	d com	pensation	(describ	e the	terms	below	')				
⁴ Provide the aggregate value of a													
additional securities of the issuer rights exercisable to acquire addi ⁵ Do not include deferred compen	itional securities o		ı secu	ırıtıes distri	outed as	s com _l	vensat	ion, <u>in</u>	<u> ICIUdi</u>	<u>ng</u> optio	oris, Warr	ants or	otner
Do not include deletted compen	Janon.												

a) Name of person compensated and reg	istration 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 National Bank Financial Inc.											
Firm NRD number 1 9 6 0 (if applicable)											
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal. • No • Yes											
b) Business contact information											
If a firm NRD number is not provided in Item 8 (a),	provide the business co	ontact information of th	ne person being co	ompensated.							
Street address											
Municipality			Province/State)							
Country		Posta	l code/Zip code	•							
Email address		Tele	ephone numbe	r							
c) Relationship to issuer or investment fund manager											
Indicate the person's relationship with the issuer or the Instructions and the meaning of "control" in se					ed" in Part B(2) of						
Connect with the issuer or investment fu			-	other than an invest	ment fund)						
Director or officer of the investment fund		_		er or investment fun							
_			10,000 01 1110 10000		a manager						
✓ None of the above											
d) Compensation details											
Provide details of all compensation paid, or to be po Canadian dollars. Include cash commissions, securi incidental to the distribution, such as clerical, printi	ties-based compensation ng, legal or accounting	n, gifts, discounts or oti services. An issuer is no	her compensation ot required to ask	. Do not report payı	ments for services						
allocation arrangements with the directors, officers		individual compensate	d by the issuer.								
Cash commissions paid 15,	120.00		Security code 1	Security code 2	Security code 3						
Value of all securities distributed as compensation ⁴	:	Security codes	WNT								
Describe terms of warrants, or	pptions or other rights	88941 brokers war	rants								
Other compensation ⁵	Describe										
Total compensation paid 15,	120.00										
Check box if the person will or may re	ceive any deferred con	npensation (describe th	ne terms below)								
⁴ Provide the aggregate value of all securities dist	ributed as compensation	on, excluding ontions	warrants or other	riahts exercisable i	to acquire						
additional securities of the issuer. Indicate the serights exercisable to acquire additional securities 5 Do not include deferred compensation.	curity codes for all sec										

a) Name of person compensated and reg	istration 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.											
Firm NRD number 9 0 0 (if applicable)											
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal. • No • Yes											
b) Business contact information											
If a firm NRD number is not provided in Item 8 (a)	, provide the business c	ontact information of	the person being co	ompensated.							
Street address											
Municipality			Province/State)							
Country		Post	tal code/Zip code	,							
Email address		Te	elephone number								
c) Relationship to issuer or investment fu	c) Relationship to issuer or investment fund manager										
Indicate the person's relationship with the issuer of the Instructions and the meaning of "control" in se					ed" in Part B(2) of						
Connect with the issuer or investment fu		· · · · <u>—</u>	ider of the issuer (c		ment fund)						
Director or officer of the investment fund		_	ployee of the issue								
_			proy 00 01 and 10000		a managor						
✓ None of the above											
d) Compensation details											
Provide details of all compensation paid, or to be p Canadian dollars. Include cash commissions, securi incidental to the distribution, such as clerical, printa allocation arrangements with the directors, officers	ties-based compensations ing, legal or accounting	on, gifts, discounts or c services. An issuer is 1	other compensation not required to ask	. Do not report payı	ments for services						
Cash commissions paid 5,	967.00		Security code 1	Security code 2	Security code 3						
Value of all securities		o	W N T	Gecuny code 2	Security code 3						
distributed as compensation ⁴	,	Security codes									
Describe terms of warrants,	options or other rights	35100 brokers wa	arrants								
Other compensation ⁵	Describe										
Total compensation paid 5,	967.00										
Check box if the person will or may re	ceive any deferred cor	npensation (describe	the terms below)								
⁴ Provide the aggregate value of all securities dist	ributed as compensation	on, <u>excludina</u> options.	, warrants or other	rights exercisable t	o acquire						
additional securities of the issuer. Indicate the se rights exercisable to acquire additional securities ⁵ Do not include deferred compensation.	curity codes for all sec										

тем 9 - Directors, Execu	TIVE OFFICERS	AND PROMOT	ERS OF THE ISS	SUER				
If the issuer is an investment fund, do not complete Item 9. Procced to Item 10.								
Indicate whether the issuer is any 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 name of reporting issuer								
Wholly owned subsidiary of a foreign public issuer ⁶								
Provide name of foreign public issuer								
Issuer distributing only eligil	ble foreign securities	and the distribution	n is to permitted clie	ents only ⁷				_
If the issuer is at least one of the	above, do not comp	olete Item 9(a) – (d	c). Proceed to Item	10.				
⁶ An issuer is a wholly owned subsidiary of a reporting issuer or a foreign public issuer if all of the issuer's outstanding voting securities, other than securities that are required by law to be owned by its directors, are beneficially owned by the reporting issuer or the foreign public issuer, respectively. ⁷ Check this box if it applies to the current distribution even if the issuer made previous distributions of other types of securities to non-permitted clients. Refer to the definitions of "eligible foreign security" and "permitted client" in Part B(1) of the Instructions.								
If the issuer is none of the above, check this box and complete Item 9(a) - (c).								
a) Directors executive 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. For "Relationship to issuer", "D" – Director, "O" – Executive Officer, "P" – Promoter.								
Organization or company name	Family name	First given name	Secondary given names	non-individ resident jurisdictio	Business location of non-individual or residentail jurisdiction of individual		Relationship to issuer (select all that apply)	
				Province or	Province or country		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	Family name	First given name	Secondary given names	Residential jurisdiction of individual			o to promoter oth if applicable)	
				Province or country	D		0	
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 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						
	Family name	First given name	Secondary given names				
Title	CEO						
Telephone number	6046897422	Email address	rob@contactfinancial.com				
Signature	Rob Gamley	Date	2021 08 11				
			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 nan	me	Secondary given names				
Name of company	O'Neill Law LLP							
Telephone number	6046875792		Ema	il 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.