Form 45-106F1 Report of Exempt Distribution

ITEM 1 - REPORT TYPE							
✓ New report							
Amended report If amended, provide filing date of report that is being amended (YYYY-MM-DD)							
ITEM 2 - PARTY CERTIFYING THE	e R eport						
Indicate the party certifying the report (sel Instrument 81-106 Investment Fund Conti			vestment fund, refer to secti	on 1.1 of National			
Investment fund issuer							
 ✓ Issuer (other than an inves 	stment fund)						
Underwriter	,						
ITEM 3 - ISSUER NAME AND OT							
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 the	l last 12 months, provide most	recent previous legal name.					
Website							
If the issuer has a legal entity identifier, pro	vide below. Refer to Part B of t	he Instructions for the definition	of "legal entity identifier".				
Legal entity identifier							
If two or more issuers distributed a single s	security, provide the full legal no	ame(s) of the co-issuer(s) other th	han the issuer named above				
Full legal name(s) of co-issuer(s)		(if applicab	le)				
ITEM 4 - UNDERWRITER INFORM							
If an underwriter is completing the report,		aal name and firm NPD number					
Full legal name]			
Firm NRD number		(if applicable)					
If the underwriter does not have 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)			

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 3 3 5 9 1 0
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 🗌 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 9 7 1
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 NI 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	\$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 mana	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	jies 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 Fund ¹							
	tive Investment of Transferable Securities funds (UCITs Funds) are investment funds regulated by the European Union ollective investment schemes to operate throughout the EU on a passport basis on authorization from one member state.						
c) Date of formation a	nd financial year-end of the investment fund						
Date of formation	tion Financial year-end						
	YYYY 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						
	s of Canada in which the investment fund is a reporting issuer.						
	AB BC MB NB NL NT						
	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 ot a trading facility such as, for example, an automated trading system.						
Exchange n	ame						
f) Net asset value (NA	AV) of the investment fund						
Select the NAV range of the	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.							
a) Currency							
Select the currency or currencies i	n which the distribution was made. All	dollar amounts provid	ed in the report m	ıst be in Canadi	an dollars.		
✓ Canadian dollar	US dollar 🔄 Euro	Other (describe	e)				
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 da	^{te} 2021 02 24	End dat	^{te} 2021 ()2 24			
	YYYY MM DD		YYYY N	M DD			
c) Detailed purchaser infor							
•	s form for each purchaser and at	ttach the schedule	to the complete	ed report.			
d) Types of securities distr							
	n for all distributions reported on a per s SIP number, indicate the full 9-digit CU				ow to indicate the		
				Canadian \$			
Security code CUSIP number (if applicable)	Description of security	Number of securities	Single or lowest price	Highest price	Total amount		
C M S 59325P		28,785,000.00	0.5400		15,525,000.00		
e) Details of rights and cor	vertible/exchangeable securities						
	ns) were distributed, provide the exercise version ratio and describe any other teo				exchangeable securities		
exchangeable Underlying security code security code	Exercise price (Canadian \$) Lowest Highest	Expiry date (YYYY- MM-DD)	Conversion ratio	Describe other i	items (if applicable)		
f) Summary of the distribut	tion 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 or	n	Number of unique ²⁸ purchasers	Total a	mount (Canadian \$)		
Alberta	NI 45-106 2.3 [Accredited inve	estor]		4	669,090.00		
British Columbia	NI 45-106 2.3 [Accredited inve	estor]	67		5,091,826.00		
British Columbia	NI 45-106 2.5 [Family, friends associates]	17		279,798.00			
Manitoba	NI 45-106 2.3 [Accredited inve	estor]		1	10,800.00		
New Brunswick	NI 45-106 2.3 [Accredited inve	estor]		1	4,968.00		
Nova Scotia	NI 45-106 2.3 [Accredited inve	estor]		1	10,800.00		
Ontario	NI 45-106 2.3 [Accredited inve	estor]	1	5	2,048,918.00		
Québec	NI 45-106 2.3 [Accredited inve	estor]		1	324,000.00		

Cayman Islands	NI 45-106 2.3 [Accredited investor]	1	810,000.00
France	NI 45-106 2.3 [Accredited investor]	1	27,000.00
Panama	NI 45-106 2.3 [Accredited investor]	1	21,600.00
United States	Other	1	4,876,200.00
Australia	Other	1	1,350,000.00
	15,525,000.00		
	Total number of unique purchasers ^{2b}	112	

^{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.³ 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)		

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 No

✓ Yes

If yes, indicate number of persons compensated.

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a) Name of person compe	ensated and regis	stration status								
Indicate whether the person compensated is a registrant.										
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								nes		
If the person compensated is not	If the person compensated is not an individual, provide the following information.									
Full legal name of non-individual Raymond James Ltd.										
Firm NRD number 8 2 4 0 (if applicable)										
Indicate whether the person com	pensated facilitated	d the distribution	throu	gh a funding p	ortal or a	n internet	-based p	oortal.	✓ No	Yes
b) Business contact inform	nation									
If a firm NRD number is not prov	vided in Item 8 (a),	provide the busin	ess co	ntact informati	on of the	person be	eing com	pensated.		
Street address										
Municipality					F	Province/	/State			
Country					Postal	code/Zip	code			
Email address					Tele	phone nu	umber			
c) Relationship to issuer c	r investment fun	d manager						L		
the Instructions and the meaning Connect with the issue	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 Director or officer of the investment fund or investment fund manager Key Connect with the issuer or investment fund or investment fund manager									
d) Compensation details										
Provide details of all compensation Canadian dollars. Include cash consistent incidental to the distribution, such allocation arrangements with the Cash commissions pair Value of all securities distributed as compensation	mmissions, securiti h as clerical, printin directors, officers c d931,5	es-based compen g, legal or accour or employees of a	nsation nting s non-i	n, gifts, discoun services. An issı	ts or othe Ier is not	er compen required t	sation. L to ask fo uer.	Do not report	t payments for ut, or report o	r services
Describe terms of warrants, options or other rights 776,250 Broker Warrants, each is exercisable into one common share at a price of \$0.54 per common share until February 24, 2023.										
Other compensation	5	Desc	ribe							
Total compensation paie	931,5	00.00								
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 ad ⁵ Do not include deferred compe	er. Indicate the sec ditional securities d	urity codes for all								

a) Name of person comp	ensated and regi	stration status							
Indicate whether the person con	npensated is a regis	trant.	🗌 No	✓ Yes	S				
If the person compensated is an	individual, provide	the name of the indiv	idual.						
Full legal name of indivi	dual								
		Family name	Firs	st given name	I	Secondary	given names		
If the person compensated is no	t an individual, prov	ide the following info	rmation.						
Full legal name	of non-individual	Haywood Securiti	es Inc.						
Fi	rm NRD number	1 6 3	0		(if app	licable)			
Indicate whether the person con	npensated facilitated	d the distribution thro	ugh a funding por	tal or an inte	rnet-based	portal.	🖊 No 🗌	Yes	
b) Business contact inform	mation								
If a firm NRD number is not pro	vided in Item 8 (a),	provide the business c	ontact informatior	n of the perso	on being con	npensated.			
Street address									
Municipality				Provi	nce/State				
Country			F	Postal code	/Zip code				
Email address				Telephone	e number				
c) Relationship to issuer of	or investment fun	d manager							
Indicate the person's relationship the Instructions and the meanin Connect with the issue Director or officer of th Vone of the above	g of "control" in sec er or investment fur	<i>tion 1.4 of NI 45-106</i> nd manager	for the purposes of	f completing Insider of the	<i>this section</i> . e issuer (otl		tment fund)	(2) of	
d) Compensation details									
Provide details of all compensati Canadian dollars. Include cash co incidental to the distribution, suc allocation arrangements with the Cash commissions pa Value of all securitie distributed as compensation	ommissions, securit: h as clerical, printin e directors, officers o d	ies-based compensation g, legal or accounting or employees of a non	on, gifts, discounts services. An issue	or other com r is not requi nsated by the	npensation. red to ask fo	Do not report pay	ments for se	rvices nternal	
Describe te	erms of warrants, o	ptions or other rights				exercisable into on share until l			
Other compensatior	15	Describe							
Total compensation pai	d								
Check box if the per	rson will or may rec	eive any deferred cor	mpensation (desc	ribe the term	s below)				
⁴ Provide the aggregate value o additional securities of the issu rights exercisable to acquire ac ⁵ Do not include deferred compo	er. Indicate the sec Iditional securities o	urity codes for all sec						ν r	

a) Name of person compe	ensated and regis	stration	i status									
Indicate whether the person com	ppensated is a regist	trant.		🗌 No		\checkmark	Yes					
If the person compensated is an	individual, provide	the nam	ne of the indiv	idual.								
Full legal name of indivi	dual											
		Family n	ame		First	given na	me		Second	lary given	names	
If the person compensated is not	an individual, prov	ide the	following info	rmation.								
Full legal name of	of non-individual	Stifel	Nicolaus Ca	anada Inc								
Fir	m NRD number	3	3 7	0				(if app	licable)			
Indicate whether the person com	pensated facilitated	d the dis	tribution thro	ugh a fund	ing porta	l or an	internet	-based	portal.	V No	o 🗌] Yes
b) Business contact inforr	nation											
If a firm NRD number is not prov	vided in Item 8 (a),	provide	the business o	contact info	rmation	of the p	erson be	eing con	npensated.			
Street address												
Municipality						Pr	ovince	/State				
Country]	Po	ostal co	ode/Zip	code				
Email address						Teleph	ione nu	ımber				
c) Relationship to issuer c	or investment fun	d mana	ager									
Indicate the person's relationship the Instructions and the meaning Connect with the issue Director or officer of th None of the above	g of "control" in sec er or investment fur	<i>tion 1.4</i> nd mana	of NI 45-106 ager	for the pur	boses of a	complet nsider o	<i>ing this</i> of the iss	section. suer (otl		vestment	fund)	
d) Compensation details												
Provide details of all compensation Canadian dollars. Include cash co- incidental to the distribution, such allocation arrangements with the Cash commissions pain Value of all securities distributed as compensation	ommissions, securiti h as clerical, printin e directors, officers c d	ies-base g, legal	d compensati or accounting	on, gifts, di. 7 services. A	scounts o In issuer compens	or other is not re sated by	compen equired t	sation. I o ask fo ıer.	Do not report	payment: ıt, or repo	s for se	ervices internal
	rms of warrants, o	ptions o	r other rights						exercisable i on share ur			
Other compensation	5		Describe									
Total compensation paid	d											
Check box if the per	son will or may rec	eive an <u>y</u>	y deferred co	mpensatio	n (descril	be the to	erms be	low)				
⁴ Provide the aggregate value of additional securities of the issue rights exercisable to acquire ad ⁵ Do not include deferred competition of the security of the securit	er. Indicate the sec ditional securities d	urity cod	des for all sec									er

a) Name of person com	pensated and regi	stration status						
Indicate whether the person co	mpensated is a regis	trant.	No No	✓ Ye	es			
If the person compensated is a	n individual, provide	the name of the indiv	idual.					
Full legal name of indi	vidual							
	L	Family name	Firs	st given name	e	Secondary g	iven names	
If the person compensated is n	ot an individual, prov	vide the following info	rmation.					
Full legal name	of non-individual	Gravitas Securitie	es Inc.					
F	irm NRD number	2 6 2	6 0		(if app	licable)		
Indicate whether the person co	mpensated facilitate	d the distribution thro	ugh a funding por	tal or an in	ternet-based p	portal.	No 🗌 Y	Yes
b) Business contact info	rmation							
If a firm NRD number is not pr	ovided in Item 8 (a),	provide the business o	contact information	n of the per	rson being con	npensated.		
Street address								
Municipality				Prov	vince/State			
Country			F	Postal cod	le/Zip code			
Email address				Telepho	ne number			
c) Relationship to issuer	or investment fun	d manager						
Indicate the person's relationsh the Instructions and the meani Connect with the issu Director or officer of	ng of "control" in sec uer or investment fur	<i>tion 1.4 of NI 45-106</i> nd manager	for the purposes o	f completing	ng this section. the issuer (oth	aning of "connecte ner than an investr or investment fund	nent fund)	of
None of the above								
d) Compensation details Provide details of all compensa Canadian dollars. Include cash incidental to the distribution, su allocation arrangements with th Cash commissions p Value of all securiti	tion paid, or to be pa commissions, securit ich as clerical, printir he directors, officers o aid	ies-based compensati ng, legal or accounting or employees of a non	on, gifts, discounts 5 services. An issue	or other co r is not requ nsated by t	ompensation. I uired to ask fo the issuer.	Do not report payn	nents for servio	ices ernal
distributed as compensation	on ⁴		Security codes					
Describe	terms of warrants, o	ptions or other rights				exercisable into o on share until Fo		n
Other compensation	n⁵	Describe						
Total compensation pa	aid							
Check box if the performance of		eive any deferred co				ghts exercisable to	o acquire	
additional securities of the iss rights exercisable to acquire a ⁵ Do not include deferred comp	uer. Indicate the sec additional securities of	urity codes for all sec						

ITEM 9 - DIRECTORS, EXECU	TIVE OFFICERS	AND PROMOT	ERS OF THE ISS	UER				
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	ct the one that appli	es - if more than one	applies, select only	y one).			
Reporting issuer in any juris	diction of Canada							
Foreign public issuer								
Wholly owned subsidiary of	a reporting issuer i	n any jurisdiction of	Canada ⁶					
Provide nan	ne of reporting issue	ər]
Wholly owned subsidiary of	a foreign public iss	uer ⁶						
Provide name of	foreign public issue	er]
Issuer distributing only eligil	ole foreign securitie	s and the distributio	n is to permitted clie	nts only ⁷				
If the issuer is at least one of the	above, do not com	plete Item 9(a) – (d	c). Proceed to Item	10.				
⁶ An issuer is a wholly owned subsid securities that are required by law to respectively. ⁷ Check this box if it applies to the cu clients. Refer to the definitions of "en If the issuer is none of the	be owned by its di urrent distribution ev ligible foreign secur	irectors, are benefic ven if the issuer mad ity" and "permitted o	ially owned by the re de previous distributi client" in Part B(1) of	porting issuer or t ons of other types	he foreign	public is	ssuer,	
a) Directors, executive officer	s 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	Business loca non-individu resident jurisdictio individu	ual or ail n of		onship to ct all that	
				Province or	country	D	0	Р
b) Promoter information								
b) Promoter information If the promoter listed above is not an within Canada, state the province or								
If the promoter listed above is not an				omoter", "D" – Dire Residential jurisdiction of individual	ector, "O" - Rela	- Executi		ter
If the promoter listed above is not an within Canada, state the province or	territory; otherwise	state the country. Fo	r "Relationship to pro	omoter", "D" – Dire Residential jurisdiction of	ector, "O" - Rela	- Executi	ve Officer	bter licable)
If the promoter listed above is not an within Canada, state the province or	territory; otherwise	state the country. Fo	r "Relationship to pro	moter", "D" – Dire Residential jurisdiction of individual Province or	ector, "O" - Rela (select c	- Executi	ve Officer to promo oth if app	bter licable)

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	Zinc8 Energy Solutions Inc.							
Full legal name	MacDonald	Ron						
	Family name	First given name		Secondary given name				
Title	President, CEO, Executive Chairman and Director							
Telephone number	Telephone number 6043665918			onald@ro	ocketma	il.com		
Signature	"Ron MacDonald"	Date	2021	03	08			
			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	Koleszar	Alissa			Title	Securities Paralegal
	Family name	First given name	Secondary g	jiven names		
Name of company	Clark Wilson LLP					
Telephone number	6048917720	E	mail address	akoleszar@	cwilson.c	om

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.