Form 45-106F1 Report of Exempt Distribution

BCSC EDER Reference Number 9415252

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	TTEM 2 - PARTY CERTIFYING THE REPORT											
Indicate the party certifying the report (sele				restment fund, refer to sect	ion 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 inves	tment fund)											
Underwriter	unoni rana)											
_												
ITEM 3 - ISSUER NAME AND OT												
Provide the following information about th		vestment fund, ab	out the fund.									
Full legal name	79 Resources Ltd.											
Previous full legal name												
If the issuer's name changed in the	e last 12 months, provide most	recent previous leg	gal name.									
Website	www.79resources.com		(if applicabl	e)								
If the issuer has a legal entity identifier, pro	ovide 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	ecurity, provide the full legal no	ame(s) of the co-is	suer(s) other th	an the issuer named above	2.							
Full legal name(s) of co-issuer(s)			(if applicabl	e)								
ITEM A LINDEDWINTED INCOME	IATION											
ITEM 4 - UNDERWRITER INFORM												
If an underwriter is completing the report, p	provide the underwriter's full le	gal name and firm	n NRD number.		٦							
Full legal name												
Firm NRD number		(if ap	oplicable)									
If the underwriter does not have a firm NRI	D number, provide the head off	ice contact inform	ation of the un	derwriter.								
Street address												
Municipality		Province/State Province/State										
Country		Postal co	de/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 9 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
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 9 7 2 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
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. Currency 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 03 19 2021 03 19 YYYY MM DD 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 \$	
Security code	CUSIP number (if applicable)	Description of security	Number of securities	Single or lowest price	Highest price	Total amount
UBS		Common Shares & Warrants	4,180,000.00	0.1200	0.1200	501,600.00

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.

Convertible / exchangeable security code security code		•		se price adian \$)	Expiry date (YYYY- MM-DD)	Conversion ratio	Describe other items (if applicable)			
						Lowest	Highest			
W	N	Т	С	М	S	0.2000	0.2000	2023-03-19	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 un purchase		Total amount (Canadian \$)			
British Columbia	NI 45-106 2.3 [Accredited investor]	20	333,600.00			
British Columbia	NI 45-106 2.5 [Family, friends and business associates]	1	12,000.00			
British Columbia	Investment dealer- exemption (BC, AB, SK, MB, NB)	3	66,000.00			
Alberta	NI 45-106 2.3 [Accredited investor]	1	6,000.00			
Québec	NI 45-106 2.3 [Accredited investor]	1	24,000.00			
Ontario	NI 45-106 2.3 [Accredited investor]	3	60,000.00			
	Total dollar amount of securities distributed					
	Total number of unique purchasers ² b 29					

- ^{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)	Previously filed with or delivered to regulator? (Y/N)	Date previously filed or delivered (YYYY-MM-DD)

Full legal name of individual	than one nection we persons of a nection with the nection	with the distribution. compensated. No First given	Yes	-	-	-	sation i	in connect	tion with								
 No ✓ Yes If yes, indicate number of p a) Name of person compensated and registration status Indicate whether the person compensated is a registrant. If the person compensated is an individual, provide the name of the infection Full legal name of individual 	ndividual.	No V] Yes	3													
a) Name of person compensated and registration status Indicate whether the person compensated is a registrant. If the person compensated is an individual, provide the name of the in Full legal name of individual	ndividual.	No 🗸		3													
Indicate whether the person compensated is a registrant. If the person compensated is an individual, provide the name of the in Full legal name of individual	informatio	first given															
If the person compensated is an individual, provide the name of the in	informatio	first given							<u>-</u>								
Full legal name of individual	informatio	First given	name														
		_	name				If the person compensated is an individual, provide the name of the individual.										
F!l		_	name		Full legal name of individual												
Family name		ion.		Family name First given name Secondary given names													
If the person compensated is not an individual, provide the following	urities In																
Full legal name of non-individual Haywood Section	4111100 111	nc.															
Firm NRD number 1 6	3	0		(if a	pplica	able)											
Indicate whether the person compensated facilitated the distribution t	through a	a funding portal or a	ın intern	 net-base	ed por	tal.	√	No [Yes								
b) Business contact information																	
If a firm NRD number is not provided in Item 8 (a), provide the busine	ess contact	ct information of the	person	being o	сотре	ensated.											
Street address																	
Municipality		1	Provinc	ce/Stat	e												
Country		Postal	code/Z	Zip cod	е												
Email address		Tele	phone	numbe	er												
c) Relationship to issuer or investment fund manager																	
Indicate the person's relationship with the issuer or investment fund n the Instructions and the meaning of "control" in section 1.4 of NI 45-1						ng of "co	nnecte	d" in Part	B(2) of								
Connect with the issuer or investment fund manager		Inside	r of the	issuer (other	than an	investr	ment fund	l)								
Director or officer of the investment fund or investment fund	d manage	ger Emplo	yee of t	the issu	er or	investme	ent fund	d manage	ŧr								
✓ None of the above																	
d) Compensation details																	
Provide details of all compensation paid, or to be paid, to the person ic Canadian dollars. Include cash commissions, securities-based compen- incidental to the distribution, such as clerical, printing, legal or accoun allocation arrangements with the directors, officers or employees of a	sation, gif nting servi	ifts, discounts or othe vices. An issuer is not	er comp require	ensatio ed to ask	n. Do	not repo	rt payn	nents for s	services								
Cash commissions paid 14,880.00		[Securit	ty code 1	ı S	Security co	de 2	Security	code 3								
Value of all securities distributed as compensation ⁴	Secur	urity codes	W	N T													
Describe terms of warrants, options or other rig	thts 124	24,000 Warrants, S	\$0.20 e	exercis	e pri	ce, 2 ye	ar terr	n									
Other compensation ⁵ Descr	ribe																
Total compensation paid 14,880.00	L																
Check box if the person will or may receive any deferred	d compens	nsation (describe the	e terms	below)													
⁴ Provide the aggregate value of all securities distributed as compen additional securities of the issuer. Indicate the security codes for all rights exercisable to acquire additional securities of the issuer.									her								

⁵Do not include deferred compensation.

a) Name of person comp	pensated and regis	stration status								
Indicate whether the person co	mpensated is a regist	trant.	☐ No	\checkmark	Yes					
If the person compensated is a	n individual, provide	the name of the indi	vidual.							
Full legal name of indiv	/idual									
		Family name		First given n	name		Secor	ndary gi	ven names	;
If the person compensated is no	ot an individual, prov	ride the following inf	ormation.							
Full legal name	of non-individual	Raymond James	Ltd.							
F	irm NRD number	8 2 4	0			(if app	licable)			
Indicate whether the person co	mpensated facilitated	d the distribution thr	ough a funding p	oortal or ar	n internet	-based	portal.	\checkmark	No [Yes
b) Business contact info	rmation									
If a firm NRD number is not pr	ovided in Item 8 (a), _I	provide the business	contact informat	tion of the	person be	eing cor	mpensated.			
Street address										
Municipality				F	rovince	/State				
Country				Postal of	code/Zip	code				
Email address				Telep	hone nu	umber				
c) Relationship to issuer	or investment fun	d manager								
Indicate the person's relationsh the Instructions and the meani								necte	d" in Part	B(2) of
Connect with the issu			, , o. a pa passa.	_	-		her than an i	nvestr	nent fund)
Director or officer of	the investment fund	or investment fund r	nanager \Box	-] Employ	ee of the	e issuer	or investme	nt func	d manage	r
✓ None of the above				_						
d) Compensation details		id to the person idea	atified in Itam 9/0	a) in conn	ction wit	h tha di	stribution Dr	ovido i	all amoun	to in
Provide details of all compensation dollars. Include cash incidental to the distribution, sur allocation arrangements with the	commissions, securiti ch as clerical, printin	ies-based compensat ng, legal or accountin	ion, gifts, discour g services. An iss	nts or othe uer is not	r compen required i	isation. to ask fo	Do not repor	t payn	nents for s	ervices
Cash commissions pa	aid 14,4	00.00			Security of	code 1	Security co	de 2	Security c	ende 3
Value of all securition	es		Coourity and an		W N	T		302	- Coodiny o	
distributed as compensation	on ⁴		Security codes							
Describe	terms of warrants, o	ptions or other rights	120,000 wa	rrants, \$0	0.20 exe	ercise p	orice, 2 yea	r term	1	
Other compensation	n ⁵	Describe								
Total compensation pa	14,4	00.00								
Check box if the pe	erson will or may rec	eive any deferred co	empensation (de	scribe the	terms be	elow)				
⁴ Provide the aggregate value additional securities of the iss										nor.
rights exercisable to acquire as 5Do not include deferred comp	dditional securities o		<i>นาแธ</i> ง นางแทมนแ	cu as CUIII	p e risali0i	n, <u>miciul</u>	<u>ыну</u> орион <i></i> ;	walla	inio UI Ulli	<i>G1</i>

a) Name of person compen	sated and regis	stration status									
Indicate whether the person compe	ensated is a regist	rant.	☐ No	\checkmark	Yes						
If the person compensated is an in	dividual, provide i	the name of the indivi	dual.								
Full legal name of individu	ıal										
		Family name	Firs	st given na	ame		Secondary	given names			
If the person compensated is not an individual, provide the following information.											
Full legal name of non-individual Mackie Research Capital Corporation											
Firm	Firm NRD number 3 0 7 0 (if applicable)										
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal. V No Yes											
b) Business contact informa	b) Business contact information										
If a firm NRD number is not provid	led in Item 8 (a), բ	provide the business c	ontact information	n of the p	erson be	eing cor	mpensated.				
Street address											
Municipality				Pr	rovince	/State					
Country			F	Postal co	ode/Zip	code					
Email address				Teleph	none nu	ımber					
c) Relationship to issuer or	investment fun	d manager	-								
Indicate the person's relationship versions the Instructions and the meaning of								ted" in Part B(2) of			
Connect with the issuer					-		her than an inves	stment fund)			
Director or officer of the			anager \square				or investment fu				
<u>_</u>	investment rana t	or investment rand m	anagei	Lilipioye	ee or trie	issuei	or investment to	nd 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 a	nmissions, securiti as clerical, printin	es-based compensation g, legal or accounting	on, gifts, discounts services. An issue	or other r is not re	compen equired t	sation. to ask fo	Do not report pay	ments for services			
Cash commissions paid		20.00	·	_	Security of		Security code 2	Security code 3			
Value of all securities					W N	T	Security code 2	Security code 3			
distributed as compensation ⁴			Security codes			'					
Describe term	ns of warrants, or	otions or other rights	16,000 warrar	nts, \$0.2	20 exer	cise pr	rice, 2 year tern	n			
Other compensation ⁵		Describe									
Total compensation paid	1,92	20.00									
Check box if the person	n will or may rece	eive any deferred cor	npensation (desc	ribe the t	terms be	elow)					
⁴ Provide the aggregate value of a	Il securities distri	buted as compensation	on, <u>exc</u> ludina onti	ions, war	rrants or	other n	ights exercisable	to acquire			
additional securities of the issuer. rights exercisable to acquire addi. ⁵ Do not include deferred compens	Indicate the secutional securities o	urity codes for all sec									

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 name of reporting issuer								
Wholly owned subsidiary of a foreign public issuer ⁶								
Provide name of foreign public issuer								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 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	ompany name Family name First gi		Secondary given names				ationship to issuer lect all that apply)	
				Province or	Province or country		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			p to promoter poth 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	79 Resources Ltd.						
Full legal name	Masters	John	F	Parker			
	Family name	First given name	•	Seconda	ary given na	ames	
Title	Director						
Telephone number	6046833995 Email address john@engcom.ca						
Signature	"John Masters" Date		2021	03	24		
			YYYY	MM	DD		

ITEM 11- CONTACT PERSON							
		r the individual that the sect the individual certifying the		regulator m	ay contact with any questions		
Same as individua	al certifying the report						
Full legal name				Title			
	Family name	First given name	Secondary given names				
Name of company							
Telephone number		Eı	mail address				

Notice - Collection and use of personal information

The personal information required under this form is collected on behalf of and used by the securities regulatory authority or regulator under the authority granted in securities legislation for the purposes of the administration and enforcement of the securities legislation.

If you have any questions about the collection and use of this information, contact the securities regulatory authority or regulator in the local jurisdiction(s) where the report is filed, at the address(es) listed at the end of this form.

The attached Schedules 1 and 2 may contain personal information of individuals and details of the distribution(s). The information in Schedules 1 and 2 will not be placed on the public file of any securities regulatory authority or regulator. However, freedom of information legislation may require the securities regulatory authority or regulator to make this information available if requested.

By signing this report, the issuer/underwriter confirms that each individual listed in Schedule 1 or 2 of the report who is resident in a jurisdiction of Canada:

- a) has been notified by the issuer/underwriter of the delivery to the securities regulatory authority or regulator of the information pertaining to the individual as set out in Schedules 1 or 2, that this information is being collected by the securities regulatory authority or regulator under the authority granted in securities legislation, that this information is being collected for the purposes of the administration and enforcement of the securities legislation of the local jurisdiction, and of the title, business address and business telephone number of the public official in the local jurisdiction, as set out in this form, who can answer questions about the security regulatory authority's or regulator's indirect collection of the information, and
- b) has authorized the indirect collection of the information by the securities regulatory authority or regulator.