Form 45-106F1 Report of Exempt Distribution

ITEM 1 – REPORT TYPE							
New report X Amended report If amended, provide filing date of report that is being amended. 2021 07 23 (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							
X Issuer (other than an investment fund	nd)						
Underwriter							
ITEM 2 LOCUED NAME AND OTHER	- Dentisies						
ITEM 3 - ISSUER NAME AND OTHER	ER IDENTIFIERS						
Provide the following information about the issuer, or if	r if the issuer is an investment fund, about the fund.						
Full legal name Revitalist L	t Lifestyle and Wellness Ltd.						
	l Capital Corp.						
If the issuer's name changed in the last 12 months, provide most recent previous legal name.							
Website	(if applicable)						
If the issuer has a legal entity identifier, provide below. I	v. Refer to Part B of the Instructions for the definition of "legal entity identifier".						
Legal entity identifier							
If two or more issuers distributed a single security, provi	ovide the full legal name(s) of the co-issuer(s) other than the issuer named above.						
Full legal name(s) of co-issuer(s)	(if applicable)						
ITEM 4 – UNDERWRITER INFORMAT							
If an underwriter is completing the report, provide the u	e underwriter's full legal name and firm NRD 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. 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 9 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. Commercial/business debt Mortgages Real estate Consumer debt Private companies Cryptoassets Number of employees Number of employees: 0 - 4950 - 99100 - 499500 or more SEDAR profile number Does the issuer have a **SEDAR** profile? No X Yes If yes, provide SEDAR profile number 0 If the issuer does not have a SEDAR profile complete Item 5(d) - (h). Head office address Street address Province/State Municipality Postal code/Zip code Country Telephone number Date of formation and financial year-end Date of formation Financial year-end MM DD MM DD f) Reporting issuer status Yes Is the issuer a reporting issuer in any jurisdiction of Canada? If yes, select the jurisdictions of Canada in which the issuer is a reporting issuer. ΑII AΒ BC MB NB NT NL NS NU ON PF QC SK ΥT 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 investment fund, provide the following information.							
a) Investment fund manager information							
Full legal name							
Firm NRD Number (if applicable)							
If the investment fund manager does not have a firm NRD number, provide the head office contact information of the investment fund manager.							
Street Address							
Municipality Province/State							
Country Postal code/Zip code							
Telephone number Website (if applicable)							
b) Type of investment fund							
Type of investment fund that most accurately identifies the issuer (select only one). Money market Equity Fixed income Balanced Other (describe)							
Indicate whether one or both of the following apply to the investment fund. Invests primarily in other investment fund issuers Is a UCITs Fund¹ 1Undertaking for the Collective Investment of Transferable Securities funds (UCITs Funds) are investment funds regulated by the European Union (EU) directives that allow collective investment schemes to operate throughout the EU on a passport basis on authorization from one member state.							
c) Date of formation and financial year-end of the investment fund							
Date of formation Financial year-end MM DD MM DD							
d) Reporting issuer status of the investment fund							
Is the investment fund a reporting issuer in any jurisdiction of Canada? No Yes							
If yes, select the jurisdictions of Canada in which the investment fund is a reporting issuer. All AB BC MB NB NL NT NS NU ON PE QC SK YT							
e) Public listing status of the investment fund							
If the investment fund has a CUSIP number, provide below (first 6 digits only). CUSIP number If the investment fund is publicly listed, provide the name of the exchange on which the investment fund's securities primarily trade. Provide only the name of an exchange and not a trading facility such as, for example, an automated trading system. Exchange name							
f) Net asset value (NAV) of the investment fund							
Select the NAV range of the investment fund as of the date of the most recent NAV calculation (Canadian \$). \$0 to under \$5M \$5M to under \$25M \$25M to under \$100M \$100M to under \$500M \$500M to under \$1B \$1B or over Date of NAV calculation: YYYY MM DD							

pi co	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) Curre	ency									
Se	Select the currency or currencies in which the distribution was made. All dollar amounts provided in the report must be in Canadian dollars. X Canadian dollar US dollar Euro Other (describe)										
-	b) Distri	bution date(s)									
de	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.										
			2021 07 YYYY MM	14 DD	Eı	nd date	202 YY		14 DD		
	c) Detai	iled purchaser in	formation								
C		edule 1 of this		h purchase	r and attach the	e sched	ule to t	he complet	ed report.		
	d) Type	s of securities di	stributed								
		wing information f providing the CUSI									te the
									Canadian	\$]
	Security code	CUSIP number (if applicable)		Description of s	security		ber of urities	Single or lowest price	Highest price	Total amount	
	W N T			Special Warrants, each special warrant is convertible into one common share		11,18	39,774	0.50		5,594,887.00	-
											-
]
	e) Detai	ils of rights and o	convertible/e	xchangeabl	e securities						
		. warrants, options) listributed, provide									?
	Convertible / exchangeable security code Convertible / exchangeable security code Convertible / (Canadian \$) Exercise price (Canadian \$) Expiry date (YYYY-MM-DD) Conversion ratio Describe other terms (if applicable)										
											-
											<u> </u>
	f) Sumr	mary of the distri	bution by jur	isdiction an	d exemption						
		ollar amount of sec es and for each exer			•		-				
	-	jurisdiction of Can			•	-			-		
		es a separate line i s, if a purchaser res									
-	ırisdiction.										
Fo	or jurisdictions	within Canada, sta		-		country.	Numbe	r of unique			Ī
	Province or o			exemption relied			purcl	nasers ^{2a}		int (Canadian \$)	_
	British Colu				ited Investor]	+		14		32,500.00	-
	Albert				ited Investor]	+		3		42,000.00	-
	Ontari United St				ited Investor]	+		27 1		85,000.00 25,387.00	1
	Cavma		NI 45-106 2.3 [Accredited Investor]					20,367.00 10.000.00	1		

50,000.00

50,000.00

5,594,887.00

1

Total dollar amount of securities distributed

NI 45-106 2.3 [Accredited Investor]

NI 45-106 2.3 [Accredited Investor]

Monaco

Costa Rica

^{2a} In calculating the number of unique purchasers per row, count each purchaser only once. Joint purchasers may be counted as one purchaser.									
bln 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									
purchaser resi	an investment fund, provide the net proceeds to the investment f des. ³ If an issuer located outside of Canada completes a distributi ly. For jurisdictions within Canada, state the province or territory,	on in a jurisdiction of Car	nada, include net proceeds for that jurisdiction						
	Province or country Net proceeds (Canadian \$)								
			1						

51

Total number of unique purchasers^{2b}

Total net proceeds to the investment fund

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)
1.				
2.				
3.				

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.

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 X Yes If yes, indicate number of persons compensated.							
Name of person compensated and registration status							
Indicate whether the person compensated is a registrant. No X 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 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. X No Yes							
b) Business contact information							
If a firm NRD number is not provided in Item 8(a), provide the business contact information of the person being compensated.							
Street address							
Municipality Province/State							
Country Postal code/Zip code							
Email address Telephone number							
c) Relationship to issuer or investment fund manager Indicate the person's relationship with the issuer or investment fund manager (select all that apply). Refer to the meaning of "connected" in Part B(2) of the Instructions and the meaning of "control" in section 1.4 of NI 45-106 for the purposes of completing this section.							
Connected with the issuer or investment fund manager							
Insider of the issuer (other than an investment fund)							
Director or officer of the investment fund or investment fund manager							
Employee of the issuer or investment fund manager							
x None of the above							
d) Compensation details							
Provide details of all compensation paid, or to be paid, to the person identified in Item 8(a) in connection with the distribution. Provide all amounts in Canadian dollars. Include cash commissions, securities-based compensation, gifts, discounts or other compensation. Do not report payments for services incidental to the distribution, such as clerical, printing, legal or accounting services. An issuer is not required to ask for details about, or report on, internal allocation arrangements with the directors, officers or employees of a non-individual compensated by the issuer.							
Cash commissions paid \$31,500							
Value of all securities Security code 1 Security code 2 Security code 3							
distributed as compensation ⁴ Security codes							
Describe terms of warrants, options or other rights							
Other compensation ⁵ Describe							
Total compensation paid \$31,500							
Check box if the person will or may receive any deferred compensation (describe the terms below)							
⁴ Provide the aggregate value of all securities distributed as compensation, excluding options, warrants or other rights exercisable to acquire additional securities of the							
issuer. Indicate the security codes for all securities distributed as compensation, including options, warrants or other rights exercisable to acquire additional securities of the issuer. 500 and include deferred compensation.							
⁵ Do not include deferred compensation.							

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 X Yes If yes, indicate number of persons compensated.						
Name of person compensated and registration status						
Indicate whether the person compensated is a registrant. No X 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 Clarus Securities Inc.						
Firm NRD number 1 3 1 6 0 (if applicable)						
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal. X No Yes						
b) Business contact information						
If a firm NRD number is not provided in Item 8(a), provide the business contact information of the person being compensated. Street address						
Municipality Province/State						
Country Postal code/Zip code						
Email address Telephone number						
c) Relationship to issuer or investment fund manager						
Indicate the person's relationship with the issuer or investment fund manager (select all that apply). Refer to the meaning of "connected" in Part B(2) of the Instructions and the meaning of "control" in section 1.4 of NI 45-106 for the purposes of completing this section. Connected with the issuer or investment fund manager Insider of the issuer (other than an investment fund) Director or officer of the investment fund or investment fund manager Employee of the issuer or investment fund manager X None of the above						
d) Compensation details						
Provide details of all compensation paid, or to be paid, to the person identified in Item 8(a) in connection with the distribution. Provide all amounts in Canadian dollars. Include cash commissions, securities-based compensation, gifts, discounts or other compensation. Do not report payments for services incidental to the distribution, such as clerical, printing, legal or accounting services. An issuer is not required to ask for details about, or report on, internal allocation arrangements with the directors, officers or employees of a non-individual compensated by the issuer.						
Cash commissions paid \$176,750						
Value of all securities distributed as compensation ⁴ Security code 1 Security code 1 Security code 2 Security code 3 Security code 1 Security code 2 Security code 3						
Describe terms of warrants, options or other rights						
Other compensation ⁵ Describe						
Total compensation paid \$176,750						
Check box if the person will or may receive any deferred compensation (describe the terms below)						
⁴ Provide the aggregate value of all securities distributed as compensation, excluding options, warrants or other rights exercisable to acquire additional securities of the issuer. Indicate the security codes for all securities distributed as compensation, including options, warrants or other rights exercisable to acquire additional securities of the issuer. ⁵ Do not include deferred compensation.						

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 X Yes If yes, indicate number of persons compensated.							
Name of person compensated and registration status							
Indicate whether the person compensated is a registrant. No X 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 PowerOne Capital Markets Limited							
Firm NRD number 1 7 0 1 0 1 0 (if applicable) Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal.							
X No Yes							
b) Business contact information							
If a firm NRD number is not provided in Item 8(a), provide the business contact information of the person being compensated.							
Street address							
Municipality Province/State							
Country Postal code/Zip code							
Email address Telephone number							
c) Relationship to issuer or investment fund manager							
Indicate the person's relationship with the issuer or investment fund manager (select all that apply). Refer to the meaning of "connected" in Part B(2) of the Instructions and the meaning of "control" in section 1.4 of NI 45-106 for the purposes of completing this section. Connected with the issuer or investment fund manager Insider of the issuer (other than an investment fund) Director or officer of the investment fund or investment fund manager Employee of the issuer or investment fund manager X None of the above							
d) Compensation details							
Provide details of all compensation paid, or to be paid, to the person identified in Item 8(a) in connection with the distribution. Provide all amounts in Canadian dollars. Include cash commissions, securities-based compensation, gifts, discounts or other compensation. Do not report payments for services incidental to the distribution, such as clerical, printing, legal or accounting services. An issuer is not required to ask for details about, or report on, internal allocation arrangements with the directors, officers or employees of a non-individual compensated by the issuer. Cash commissions paid \$22,750							
Value of all securities distributed as compensation ⁴ Security code 1 Security code 1 Security code 2 Security code 2 Security code 3							
Describe terms of warrants, options or other rights							
Other compensation ⁵ Describe							
Total compensation paid \$22,750							
Check box if the person will or may receive any deferred compensation (describe the terms below)							
⁴ Provide the aggregate value of all securities distributed as compensation, <u>excluding</u> options, warrants or other rights exercisable to acquire additional securities of the issuer. Indicate the security codes for all securities distributed as compensation, <u>including</u> options, warrants or other rights exercisable to acquire additional securities of the issuer.							
⁵ Do not include deferred compensation.							

Ш	ITEM 9 – DIRECTORS, EXECUTIVE OFFICERS AND PROMOTERS OF THE ISSUER									
If	the issuer is an investment fund,	do not complete Ite	em 9. Proceed t	to Item 10.						
In	Indicate whether the issuer is any of the following (select the one that applies – if more than one applies, select only one).									
	Reporting issuer in any jurisdiction 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 eligibl	e foreign securities a	and the distribut	tion is to permi	tted clie	nts only ⁷				
6A≀ lav	If the issuer is at least one of the above, do not complete Item 9(a) – (c). Proceed to Item 10. 6An 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. 7Check 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 cli	ient" in Part B(1) of the In	structions.							
	\overline{X} If the issuer is none of the a	bove, check this bo	x and complet	e Item 9(a) –	(c).					
	a) Directors, executive office	cers and promoter	s of the issue	r						
Pr	ovide the following information for	each director executi	ve officer and n	romoter of the	issuer F	or locations	within Cana	da sta	te the nr	ovince or
	rritory, otherwise state the country. I							aa, stat	te the pri	yunce or
	Organization or company name	Family name	First given name	Secondary given names		Business location of non-individual or residential jurisdiction of individual		Relationship to issuer (select all that apply)		•
						Province	or country	D	0	Р
		Walker	Kathryn			U	SA	D	0	
		Walker	William			U	SA		0	
		Gray	Patrick			USA		D		
		Ciullo	Paul			USA			0	
		Bowden	Aaron			AB		D		
	b) Promoter information									
lo	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	Residential jurisdiction of individual Relationship to promoter (select one or both if applicab					
				names	Province or country				D O	
	c) Residential address of e	each individual								

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attach to the completed report. Schedule 2 also requires information to be provided about control persons.

Complete Schedule 2 of this form providing the full residential address for each individual listed in Item 9(a) and (b) and

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 exempt 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	Revitalist Lifestyle and Wellness Ltd.						
Full legal name	Walker Kathryn						
·	Family name First given name Secondary given names						
Title	President						
Telephone number	er (423) 948-9331 Email address kathryn.walker@revitalis			llistclinic.com			
Signature	"Kathryn Walker"	2021	07	26			
		•	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	Kowan	Lisa			Corporate Admin			
·	Family name	First given name	Secondary giv names	/en				
Name of company	Meraki Corporate Servi	ces Inc.						
Telephone number	604-813-9995		Email address	lisa@merak	cicsi.ca			

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 Schedule 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.

SCHEDULE 1 TO FORM 45-106F1 (CONFIDENTIAL PURCHASER INFORMATION)

Schedule 1 must be filed in the format of an Excel spreadsheet in a form acceptable to the securities regulatory authority or regulator.

The information in this schedule 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.

a) General information (provide only once)

- 1. Name of issuer
- 2. Certification date (YYYY-MM-DD)

Provide the following information for each purchaser that participated in the distribution. For each purchaser, create separate entries for each distribution date, security type and exemption relied on for the distribution.

b) Legal name of purchaser

If two or more individuals have purchased a security as joint purchasers, provide information for each purchaser under the columns for family name, first given name and secondary given names, if applicable, and separate the individuals' names with an ampersand. For example, if Jane Jones and Robert Smith are joint purchasers, indicate "Jones & Smith" in the family name column.

- 1. Family name
- 2. First given name
- 3. Secondary given names (if applicable)
- 4. Full legal name of non-individual (if applicable)

c) Contact information of purchaser

- 1. Residential street address
- 2. Municipality
- 3. Province/State
- 4. Postal code/Zip code
- 5. Country
- 6. Telephone number
- 7. Email address (if available)

d) Details of securities purchased

- 1. Date of distribution (YYYY-MM-DD)
- 2. Number of securities
- 3. Security code
- 4. Amount paid (Canadian \$)

e) Details of exemption relied on

- 1. Rule, section and subsection number
- 2. If relying on section 2.3 [Accredited investor] of NI 45-106, provide the paragraph number in the definition of "accredited investor" in section 1.1 of NI 45-106 that applies to the purchaser. (select only one if the purchaser is a permitted client that is not an individual, "NIPC" can be selected instead of the paragraph number)
- 3. If relying on section 2.5 [Family, friends and business associates] of NI 45-106, provide:
 - a. the paragraph number in subsection 2.5(1) that applies to the purchaser (select only one); and
 - b. if relying on paragraphs 2.5(1)(b) to (i), provide:
 - i. the name of the director, executive officer, control person, or founder of the issuer or affiliate of the issuer claiming a relationship to the purchaser. (Note: if Item 9(a) has been completed, the name of the director, executive officer or control person must be consistent with the name provided in Item 9 and Schedule 2.)
 - ii. the position of the director, executive officer, control person, or founder of the issuer or affiliate of the issuer claiming a relationship to the purchaser.
- **4.** If relying on subsection 2.9(2) or, in Alberta, New Brunswick, Nova Scotia, Ontario, Québec, or Saskatchewan, subsection 2.9(2.1) [Offering memorandum] of NI 45-106 and the purchaser is an eligible investor, provide the paragraph number in the definition of "eligible investor" in section 1.1 of NI 45-106 that applies to the purchaser. (select only one)

f) Other information

Paragraphs f)1. and f)2. do not apply if any of the following apply:

- (a) the issuer is a foreign public issuer;
- (b) the issuer is a wholly owned subsidiary of a foreign public issuer;
- (c) the issuer is distributing only eligible foreign securities and the distribution is to permitted clients only.
- 1. Is the purchaser a registrant? (Y/N)
- 2. Is the purchaser an insider of the issuer? (Y/N) (not applicable if the issuer is an investment fund)
- 3. Full legal name of person compensated for distribution to purchaser. If a person compensated is a registered firm, provide the firm NRD number only. (Note: the names must be consistent with the names of the persons compensated as provided in Item 8.)

INSTRUCTIONS FOR SCHEDULE 1

Any securities issued as payment for commissions or finder's fees must be disclosed in Item 8 of the report, not in Schedule 1.

Details of exemption relied on – When identifying the exemption the issuer relied on for the distribution to each purchaser, refer to the rule, statute or instrument in which the exemption is provided and identify the specific section and, if applicable, subsection or paragraph. For example, if the issuer is relying on an exemption in a National Instrument, refer to the number of the National Instrument, and the subsection or paragraph number of the specific provision. If the issuer is relying on an exemption in a local blanket order, refer to the blanket order by number.

For exemptions that require the purchaser to meet certain characteristics, such as the exemption in section 2.3 [Accredited investor], section 2.5 [Family, friends and business associates] or subsection 2.9(2) or, in Alberta, New Brunswick, Nova Scotia, Ontario, Québec, or Saskatchewan, subsection 2.9(2.1) [Offering memorandum] of NI 45-106, provide the specific paragraph in the definition of those terms that applies to each purchaser.

Reports filed under paragraph 6.1(1)(j) [TSX Venture Exchange offering] of NI 45-106 – For reports filed under paragraph 6.1(1)(j) [TSX Venture Exchange offering] of NI 45-106, Schedule 1 must list the total number of purchasers by jurisdiction only, and is not required to include the name, residential address, telephone number or email address of the purchasers.

SCHEDULE 2 TO FORM 45-106F1 (CONFIDENTIAL DIRECTOR, EXECUTIVE OFFICER, PROMOTER AND CONTROL PERSON INFORMATION)

Schedule 2 must be filed in the format of an Excel spreadsheet in a form acceptable to the securities regulatory authority or regulator.

Complete the following only if Item 9(a) is required to be completed. This schedule also requires information to be provided about control persons of the issuer at the time of the distribution.

The information in this schedule 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.

a) General information (provide only once)

- 1. Name of issuer
- 2. Certification date (YYYY-MM-DD)

b) Business contact information of Chief Executive Officer (if not provided in Item 10 or 11 of report)

- 1. Email address
- 2. Telephone number

c) Residential address of directors, executive officers, promoters and control persons of the issuer

Provide the following information for each individual who is a director, executive officer, promoter or control person of the issuer at the time of the distribution. If the promoter or control person is not an individual, provide the following information for each director and executive officer of the promoter and control person. (Note: names of directors, executive officers and promoters must be consistent with the information in Item 9 of the report, if required to be provided.)

- 1. Family name
- 2. First given name
- 3. Secondary given names
- 4. Residential street address
- 5. Municipality
- 6. Province/State
- 7. Postal code/Zip code
- 8. Country
- 9. Indicate whether the individual is a control person, or a director and/or executive officer of a control person (*if applicable*)

d) Non-individual control persons (if applicable)

If the control person is not an individual, provide the following information. For locations within Canada, state the province or territory, otherwise state the country.

- 1. Organization or company name
- 2. Province or country of business location

Questions:

Refer any questions to:

Alberta Securities Commission

Suite 600, 250 – 5th Street SW Calgary, Alberta T2P 0R4 Telephone: 403-297-6454

Toll free in Canada: 1-877-355-0585

Facsimile: 403-297-2082

Public official contact regarding indirect collection of

information: FOIP Coordinator

British Columbia Securities Commission

P.O. Box 10142, Pacific Centre 701 West Georgia Street Vancouver, British Columbia V7Y 1L2

Inquiries: 604-899-6854

Toll free in Canada: 1-800-373-6393

Facsimile: 604-899-6581 Email: FOI-privacy@bcsc.bc.ca

Public official contact regarding indirect collection of

information: FOI Inquiries

The Manitoba Securities Commission

500 – 400 St. Mary Avenue Winnipeg, Manitoba R3C 4K5 Telephone: 204-945-2561

Toll free in Manitoba: 1-800-655-5244

Facsimile: 204-945-0330

Public official contact regarding indirect collection of

information: Director

Financial and Consumer Services Commission (New Brunswick)

85 Charlotte Street, Suite 300 Saint John, New Brunswick E2L 2J2 Telephone: 506-658-3060

Toll free in Canada: 1-866-933-2222

Facsimile: 506-658-3059 Email: info@fcnb.ca

Public official contact regarding indirect collection of information: Chief Executive Officer and Privacy Officer

Government of Newfoundland and Labrador Financial Services Regulation Division

P.O. Box 8700 Confederation Building 2nd Floor, West Block Prince Philip Drive

St. John's, Newfoundland and Labrador A1B 4J6

Attention: Director of Securities Telephone: 709-729-4189 Facsimile: 709-729-6187

Public official contact regarding indirect collection of

information: Superintendent of Securities

Government of the Northwest Territories

Office of the Superintendent of Securities

P.O. Box 1320

Yellowknife, Northwest Territories X1A 2L9

Telephone: 867-767-9305 Facsimile: 867-873-0243

Public official contact regarding indirect collection of

information: Superintendent of Securities

Nova Scotia Securities Commission

Suite 400, 5251 Duke Street

Duke Tower P.O. Box 458

Halifax, Nova Scotia B3J 2P8 Telephone: 902-424-7768 Facsimile: 902-424-4625

Public official contact regarding indirect collection of

information: Executive Director

Government of Nunavut Department of Justice

Legal Registries Division P.O. Box 1000, Station 570 1st Floor, Brown Building Iqaluit, Nunavut XOA 0H0 Telephone: 867-975-6590 Facsimile: 867-975-6594

Public official contact regarding indirect collection of

information: Superintendent of Securities

Ontario Securities Commission

20 Queen Street West, 22nd Floor Toronto, Ontario M5H 3S8 Telephone: 416-593-8314

Toll free in Canada: 1-877-785-1555

Facsimile: 416-593-8122

Email: exemptmarketfilings@osc.gov.on.ca

Public official contact regarding indirect collection of

information: Inquiries Officer

Prince Edward Island Securities Office

95 Rochford Street, 4th Floor Shaw Building P.O. Box 2000

Charlottetown, Prince Edward Island C1A 7N8

Telephone: 902-368-4569 Facsimile: 902-368-5283

Public official contact regarding indirect collection of

information: Superintendent of Securities

Autorité des marchés financiers

800, rue du Square-Victoria, 22e étage C.P. 246, tour de la Bourse

Montréal, Québec H4Z 1G3

Telephone: 514-395-0337 or 1-877-525-0337 Facsimile: 514-873-6155 (For filing purposes only) Facsimile: 514-864-6381 (For privacy requests only) Email: financementdessocietes@lautorite.qc.ca (For

corporate finance issuers);

fonds_dinvestissement@lautorite.qc.ca (For investment

fund issuers)

Public official contact regarding indirect collection of

information: Corporate Secretary

Financial and Consumer Affairs Authority of Saskatchewan

Suite 601 - 1919 Saskatchewan Drive Regina, Saskatchewan S4P 4H2 Telephone: 306-787-5842 Facsimile: 306-787-5899

Public official contact regarding indirect collection of

information: Director

Office of the Superintendent of Securities Government of Yukon Department of Community Services

307 Black Street, 1st Floor P.O. Box 2703, C-6

Whitehorse, Yukon Y1A 2C6 Telephone: 867-667-5466 Facsimile: 867-393-6251 Email: securities@gov.yk.ca

Public official contact regarding indirect collection of

information: Superintendent of Securities