

21-101F3 Quarterly Report of Alternative Trading System Activities [F Proposed - Lapsed]

NATIONAL INSTRUMENT 21-101

FORM 21-101F3

QUARTERLY REPORT OF ALTERNATIVE TRADING SYSTEM ACTIVITIES

Alternative Trading System Name: _____

Period covered by this report: _____ to _____

1. Identification:

A. Full name of alternative trading system (if sole proprietor, last, first and middle name):

B. Name(s) under which business is conducted, if different from item 1A:

C. Alternative trading system's main street address:

2. Attach as Exhibit A, a list of all subscribers at any time during the period covered by this report.

3. Attach as Exhibit B, a list of all securities that were traded on the alternative trading system at any time during the period covered by this report.

4. Provide the total unit and dollar value of transactions in the following securities during regular trading hours. Enter "None", "N/A" or "0" where appropriate.

Category of Securities	Total Unit Volume of Transactions	Total Dollar Volume of Transactions (Cdn\$)
------------------------	---	--

A. Listed shares
Domestic

Foreign

B. Listed debt securities (non-government)

Domestic

Foreign

C. Unlisted shares

Domestic

Foreign

D. Unlisted debt securities (non-government)

Domestic

Foreign

E. Government debt securities

Domestic

Foreign

F. Listed Options

Domestic

Foreign

G. Unlisted options

Domestic

Foreign

H. Other

Specify types of securities

5. Provide the total unit and dollar value of transactions in the following securities for after-hours trading. Enter "None", "N/A" or "0" where appropriate.

Category of Securities

Total Unit Volume of Transactions Total Dollar Volume of Transactions (Cdn\$)

A. Listed shares

Domestic

Foreign

B. Listed debt securities (non-government)

Domestic

Foreign

C. Unlisted shares

Domestic

Foreign

D. Unlisted debt securities (non-government)

Domestic

Foreign

E. Government debt securities

Domestic

Foreign

F. Listed options

Domestic

Foreign

G. Unlisted options

Domestic

Foreign

H. Other

Specify types of securities

6. Attach as Exhibit C, a list of all persons granted, denied, or limited access to the alternative trading system during the period covered by this report, designating for each person (a) whether they were granted, denied, or limited access; (b) the date the alternative trading system took such action; (c) the effective date of such action; and (d) the nature of any denial or limitation of access.

CERTIFICATE OF ALTERNATIVE TRADING SYSTEM

The undersigned certifies that the information given in this report relating to the alternative trading system is true and correct.

DATED at _____ this _____ day of _____ 20 _____

(Name of alternative trading system)

(Name of director, officer or partner - please type or print)

(Signature of director, officer or partner)

(Official capacity - please type or print)