Form 45-106F1 Report of Exempt Distribution

BCSC EDER Reference Number 8658026

ITEM 1 - REPORT TYPE						
✓ New report						
Amended report If amended, provide filing date of report that is being amended (YYYY-MM-DD)						
ITEM 2 - PARTY CERTIFYING THE	REPORT					
Indicate the party certifying the report (sele Instrument 81-106 Investment Fund Contin				restment fund, refer to sect	ion 1.1 of National	
Investment fund issuer	idous Disclosure und the comp	umon policy to W	61-100.			
✓ Issuer (other than an inves	tment fund)					
Underwriter	unoni rana)					
_						
ITEM 3 - ISSUER NAME AND OT			6			
Provide the following information about th			out the fund.			
-	Full legal name Heritage Cannabis Holdings Corp.					
Previous full legal name						
If the issuer's name changed in the	nged in the last 12 months, provide most recent previous legal name.					
Website	Website www.heritagecann.com (if applicable)					
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 applicable)					
Item 4 - Underwriter Inform	ATION					
If an underwriter is completing the report, p	provide the underwriter's full le	gal name and firm	NRD number.		٦	
Full legal name						
Firm NRD number	(if applicable)					
	firm NRD number, provide the head office contact information of the underwriter.					
Street address						
Municipality		Pro	vince/State			
Country		Postal co	de/Zip code			
Telephone number			Website		(if applicable)	

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
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
NAICS industry code
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
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
Mortgages
Cryptoassets b) Number of employees:
Number of employees:
c) SEDAR profile number Does the issuer have a SEDAR profile? No Yes If yes, provide SEDAR profile number 0 0 0 2 8 7 9 3 If the issuer does not have SEDAR profile complete item 5(d) - (h). d) Head office address Street address Municipality Country Postal code/Zip code Telephone number e) Date of formation and financial year-end Date of formation
Does the issuer have a SEDAR profile? No Yes If yes, provide SEDAR profile number 0 0 0 2 8 7 9 3 If the issuer does not have SEDAR profile complete item 5(d) - (h). d) Head office address Street address Municipality Country Postal code/Zip code Telephone number e) Date of formation and financial year-end Date of formation issuer status Is the issuer a reporting issuer in any jurisdication of Canada? No Yes
No Yes If yes, provide SEDAR profile number 0 0 0 2 8 7 9 3 If the issuer does not have SEDAR profile complete item 5(d) - (h). d) Head office address Street address Municipality Country Postal code/Zip code Country Telephone number e) Date of formation and financial year-end Date of formation and financial year-end Financial year-end MM DD Financial year-end Street a reporting issuer status Is the issuer a reporting issuer in any jurisdication of Canada? No Yes
If the issuer does not have SEDAR profile complete item 5(d) - (h). d) Head office address Street address Municipality Country Postal code/Zip code Telephone number e) Date of formation and financial year-end Date of formation Financial year-end MM DD f) Reporting issuer status Is the issuer a reporting issuer in any jurisdication of Canada? No Yes
Street address Street address Municipality Country Postal code/Zip code Telephone number e) Date of formation and financial year-end Date of formation The phone number Financial year-end Financial year-end MM DD Financial year-end MM DD The phone number No Yes
Street address Province/State Municipality Postal code/Zip code Telephone number e) Date of formation and financial year-end Date of formation Financial year-end MM DD f) Reporting issuer status Is the issuer a reporting issuer in any jurisdication of Canada? No Yes
Municipality Country Telephone number Date of formation Telephone number Postal code/Zip code Telephone number Financial year-end Financial year-end MM DD f) Reporting issuer status Is the issuer a reporting issuer in any jurisdication of Canada? No Yes
Country Telephone number e) Date of formation and financial year-end Date of formation YYYY MM DD Financial year-end MM DD f) Reporting issuer status Is the issuer a reporting issuer in any jurisdication of Canada? No Yes
e) Date of formation and financial year-end Date of formation Financial year-end MM DD f) Reporting issuer status Is the issuer a reporting issuer in any jurisdication of Canada? No Yes
Date of formation YYYY MM DD Financial year-end MM DD MM DD f) Reporting issuer status Is the issuer a reporting issuer in any jurisdication of Canada? No Yes
f) Reporting issuer status Is the issuer a reporting issuer in any jurisdication of Canada? No Yes
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 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)
	h of the following apply to the investment fund .
	n other investment fund issuers
☐ Is a UCITs Fund¹	
¹ Undertaking for the Collec (EU) directives that allow co	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 format	tion Financial year-end 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 T
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 oot a trading facility such as, for example, an automated trading system.
Exchange n	
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 S500M to under \$1B S1B or over Date of NAV calculation: YYYY MM DD

ITEM 7 - INFORMATION ABOUT THE DISTRIBUTION

YYYY

MM

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 in v	vhich the dis	tribution	was mad	e. All dollar amounts provided i	in the repor	t must be	in Canad	dian dollars.	
✓ Canadian dollar US	3 dollar] Euro	Other (describe)					
b) Distribution date(s)									
State the distribution start and end of as both the start and end dates. If the distribution period covered by the re	e report is b								ite
Start date	2018	11	05	End date	2018	11	07		

YYYY

MM

DD

c) Detailed purchaser information

Complete Schedule 1 of this form for each purchaser and attach the schedule to the completed report.

DD

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
WNT	42727B117	Special Warrants, exercisable into Units, without payment of additional consideration. Unexercised special warrants deemed exercised on the earlier of 3/8/2019 & 3rd business day after date of receipt for a final prospectus qualifying the Units	30,000,000.00	0.2500	0.2500	7,500,000.00
CMS	42727B109	Common Shares	4,000,000.00	0.3000	0.3000	1,200,000.00

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.

exch	nvertib nangea urity c	able		derlyi			se price adian \$)	Expiry date (YYYY- MM-DD)	Conversion ratio	Describe other items (if applicable)
						Lowest	Highest			
W	N	Т	U	В	S	0.0000	0.0000	2019-03-08	1:1	Each unit consists of a share and a warrant(exercisable into a share at \$0.35 per share until the date that is earlier of May 7, 2021 and date specified in any warrant acceleration notice.

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 unique ²⁸ purchasers	Total amount (Canadian \$)
Ontario	NI 45-106 2.3 [Accredited investor]	24	5,011,250.00

Guernsey	Distributions to purchasers outside of local jurisdiction (BC, AB, NB)	1	45,000.00
United States	Distributions to purchasers outside of local jurisdiction (BC, AB, NB)	2	565,000.00
Cayman Islands	NI 45-106 2.3 [Accredited investor]	1	1,250,000.00
United Kingdom	Distributions to purchasers outside of local jurisdiction (BC, AB, NB)	1	100,000.00
Nova Scotia	NI 45-106 2.3 [Accredited investor]	1	500,000.00
British Columbia	NI 45-106 2.3 [Accredited investor]	23	1,198,750.00
Alberta	NI 45-106 2.3 [Accredited investor]	2	30,000.00
	Total dollar amount of se	curities distributed	8,700,000.00
	Total number of unique purchasers ^{2b}	55	

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

^{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.

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 ✓ Yes If yes, indicate number of persons compensated. 2

a) Name of person compensated and registration status															
Indicate whether the person compensated is a registrant. No Yes															
If the person compensated is an individual, provide the name of the individual.															
Full legal name of indiv	idual														
		Fan	nily nan	ne			First	t given r	name			Seco	ndary g	iven name	
If the person compensated is not an individual, provide the following information.															
Full legal name of non-individual Cormark Securities					ırities	s Inc.									
Firm NRD number 1 0 0 9 0 (if applicable)															
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal.															
b) Business contact information															
If a firm NRD number is not pro	vided in Item	8 (a), prov	vide th	e busine	ess co	ntact infor	mation	of the	persoi	n being	сотр	ensated.			
Street address															
Municipality								F	Provin	ce/Sta	te				
Country							Р	ostal	code/	Zip cod	le				
Email address								Telep	hone	numb	er				
c) Relationship to issuer	or investme	ent fund m	nanag	er											
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 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															
✓ 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 pa		291,644.	40						Secur	ity code	1 :	Security co	ode 2	Security of	code 3
Value of all securitie distributed as compensatio	-				S	Security co	des		W	N 1					
Describe terms of warrants, options or other rights 1,241,040 broker special warrants, exercisable without payment of additional consideration into one broker warrant (exercisable into one Unit at \$0.25 per unit for 30 months)															
Other compensation	n ⁵	23,269.	50	Descr	ibe	Work Fe	е								
Total compensation pa	id	314,913.	90												
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 issurights exercisable to acquire as ⁵ Do not include deferred comp	ıer. Indicate t dditional secu	he security	v code	s for all											 ner

a) Name of person comp	ensated and regis	stration sta	atus						
Indicate whether the person con	npensated is a regist	rant.		☐ No		√	Yes		
If the person compensated is an individual, provide the name of the individual.									
Full legal name of indiv	idual								
		Family name	!	_	First	given n	ame	•	Secondary given names
If the person compensated is not an individual, provide the following information.									
Full legal name of non-individual Canaccord Genuity Corp.									
Fi	Firm NRD number 9 0 0 (if applicable)								licable)
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal.									
b) Business contact information									
If a firm NRD number is not pro	vided in Item 8 (a), ¡	provide the l	business co	ntact infor	mation	of the p	person b	eing con	npensated.
Street address									
Municipality						Р	rovince	e/State	
Country					Р	ostal c	ode/Zi	p code	
Email address						Telep	hone n	umber	
c) Relationship to issuer	or investment fun	d manage	r						
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 issue	er or investment fun	d manager			ı	nsider	of the is	suer (oth	ner than an investment fund)
Director or officer of the	ne investment fund o	or investme	nt fund ma	nager		Employ	ee of th	e issuer	or investment fund manager
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 pa	id 72,9	11.10					Security	code 1	Security code 2 Security code 3
Value of all securitie distributed as compensation	~		S	Security co	des		W		
Describe terms of warrants, options or other rights 310,260 broker special warrants, automatically exercisable without payment of additional consideration into one broker warrant (exercisable into one Unit at an exercise price of \$0.25 per unit for 30 months)									
Other compensation	1 ⁵		Describe						
Total compensation pai	id 72,9	11.10							
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 issurights exercisable to acquire ac ⁵ Do not include deferred compo	er. Indicate the secu Iditional securities o	urity codes	for all secu						

тем 9 - Directors, Execu	TIVE OFFICERS	AND PROMOT	ERS OF THE I SS	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 nan	ne of reporting issue	r						7
Wholly owned subsidiary of	a foreign public issu	ıer ⁶						_
Provide name of	foreign public issue	r						7
Issuer distributing only eligil	ble foreign securities	and the distribution	on 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 b	ox and complete	Item 9(a) - (c).					
a) Directors executive officer	e 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.							province	
Organization or company name	Family name	First given name	Secondary given names	Business loc non-individe resident jurisdictio individu	ual or ail n of		onship to	
				Province or	country	D	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			to promo	
				Province or country	D		C)
c) Residential address of eac	h individual							
Complete Schedule 2 of this form completed report. Schedule 2 also					(a) and (b)	and at	tach to t	he

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	Heritage Cannabis Holdings Corp.								
Full legal name	Sharples	Clint							
	Family name	First given name	•	Seconda	ary given na	ames			
Title	Interim Chief Executive Office	r							
Telephone number	6046281767	Email address	info@heri	tagecan	n.com				
Signature	"Clint Sharples"	Date	2018	11	14				
			YYYY	MM	DD				

TTEM 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 individua	al certifying the report							
Full legal name				Title				
•	Family name	First given name	Secondary given names					
Name of company								
Telephone number		En	nail 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.