Form 45-106F1 Report of Exempt Distribution

BCSC EDER Reference Number 8869954

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 (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												
✓ Issuer (other than an investment fund)												
ITEM 3 - ISSUER NAME AND OTHER IDENTIFIERS												
	tion about the issuer, or if the issuer is an											
Full le	egal name OLD KENT ROAD PI											
Previous full le	Previous full legal name											
If the issuer's name ch	nanged in the last 12 months, provide mo	t recent previous legal name.										
	Website	(if applicabl	e)									
If the issuer has a legal entity i	identifier, provide below. Refer to Part B o	f the Instructions for the definition	of "legal entity identifier".									
Legal entity	/ identifier											
If two or more issuers distribut	ted a single security, provide the full legal	name(s) of the co-issuer(s) other th	an the issuer named above.									
Full legal name(s) of co	o-issuer(s)	(if applicabl	e)									
ITEM 4 - UNDERWRITE	r Information											
If an underwriter is completing	g the report, provide the underwriter's full	legal name and firm NRD number.										
Full legal name												
Firm NRD number	(if applicable)											
If the underwriter does not hav	ve a firm NRD number, provide the head o	office contact information of the un	derwriter.									
Street address												
Municipality		Province/State										
Country		Postal code/Zip code										
Telephone number		Website		(if applicable)								

ITEM 5 - ISSUER INFORMATION										
If the issuer is an investment fund, do not complete Item 5. Proceed to Item 6.										
a) Primary industry										
Provide the issuer's North American Industry Classification Standard (NAICS) code (6 digits only) that in your reasonable judgment most closely corresponds to the issuer's primary business activity.										
NAICS industry code 5 2 3 9 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.										
Mortgages Real estate Commercial/business debt Consumer debt Private companies										
Cryptoassets										
b) Number of employees										
Number of employees: 🗹 0 - 49 🗌 50 - 99 🗌 100 - 499 🗌 500 or more										
c) SEDAR profile number										
Does the issuer have a SEDAR profile?										
No ✓ Yes If yes, provide SEDAR profile number 0 0 4 7 9 6 5										
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
S100M to under \$500M	S500M to under \$1B	S1B or over

ib close is an investment fund, provide the following information: iiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiii								
Full legal name								
Firm NRD number								
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 Country Postal code/Zjp code Telephone number Website (if applicable) D Type of investment fund Type of investment fund fund that most accurately identifies the issuer (select only one). Money market Country Postal code/Zjp code Indicate whether one or both of the following apply to the investment fund. Invests primarily in other investment fund issuers Country Indicate whether one or both of the following apply to the investment fund. Invests primarily in other investment fund issuers Indicate whether one or both of the following apply to the investment fund. Invests primarily in other investment of Transferable Securities funds (UCITs Funds) are investment funds regulated by the European Union (EU) directives that allow collective investment fund Date of formation and financial year-end of the investment fund YYYY MM DD MM DD								
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If the investment fund has a CUSIP number, provide below (first 6 digits only) CUSIP number								
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:								

ITEM 7 - INFORMATION ABOUT THE DISTRIBUTION

If an issuer located outside of Canada completes a distribution in a jurisdiction of Canada, include in Item 7 and Schedule 1 information about purchasers resident in that jurisdiction of Canada only. Do not include in Item 7 securities issued as payment of commissions or finder's fees in connection with the distribution, which must be disclosed in Item 8. The information provided in Item 7 must reconcile with the information provided in Schedule 1 of the report.									
a) Currency									
Select the currency or currencies	in which the distribution was made. All	dollar amounts provid	ed in the report m	ust be in Canadi	an dollars.				
✓ Canadian dollar US dollar Euro Other (describe)									
b) Distribution date(s)									
State the distribution start and end dates. If the report is being filed for securities distributed on only one distribution date, provide the distribution date as both the start and end dates. If the report is being filed for securities distributed on a continuous basis, include the start and end dates for the distribution period covered by the report. Start date 2019 07 10 End date 2019 07 17									
	YYYY MM DD		YYYY	MM DD					
c) Detailed purchaser info	rmation								
Complete Schedule 1 of thi	s form for each purchaser and at	ttach the schedule	to the complet	ed report.					
d) Types of securities dist	ributed								
-	n for all distributions reported on a per s ISIP number, indicate the full 9-digit CU				ow to indicate the				
				Canadian \$					
Security code CUSIP number (if applicable)	Description of security	Single or lowest price	Highest price	Total amount					
U N T Ser			0 1.0000	1.0000	954,080.00				
U N T Ser	Series 2 Trust Units 142,291.0			1.0000	142,291.00				
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 security were distributed, provide the conversion ratio and describe any other terms for each convertible/exchangeable security. Convertible / exchangeable security code Underlying security code Exercise price (Canadian \$) Expiry date (YYYY- MM-DD) Lowest Highest									
 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 or	ı	Number of unique ² purchasers	^a Total a	nount (Canadian \$)				
Alberta	NI 45-106 2.3 [Accredited inve	estor]		6	742,815.00				
British Columbia	NI 45-106 2.3 [Accredited inve	estor]		2	250,000.00				
Ontario	NI 45-106 2.3 [Accredited inve	estor]		1	53,556.00				
Saskatchewan	NI 45-106 2.3 [Accredited inve	estor]		1	50,000.00				
	Total	dollar amount of se	curities distribut	ed	1,096,371.00				
	Total number of u	inique purchasers ^{2b}	1	10					
^{2a} In calculating the number of u	inique nurchasers per row count each p	urchaser only once to	int nurchasers may	whe counted as	no nurchasor				

In calculating the number of unique purchasers per row, count each purchaser only once. Joint purchasers may be counted as one purchaser.

^{2b} In calculating the total number of unique purchasers to which the issuer distributed securities, count each purchaser only once, regardless of whether the issuer distributed multiple types of securities to, and relied on multiple exemptions for, that purchaser.

g) Net proceeds to the investment fund by jurisdiction

If the issuer is an investment fund, provide the net proceeds to the investment fund for each jurisdiction of Canada and foreign jurisdiction where a purchaser resides.³ If an issuer located outside of Canada completes a distribution in a jurisdiction of Canada, include net proceeds for that jurisdiction of Canada only. For jurisdictions within Canada, state the province or territory, otherwise state the country.

Province or country	Net proceeds (Canadian \$)
Total net proceeds to the investment fund	

³"Net proceeds" means the gross proceeds realized in the jurisdiction from the distributions for which the report is being filed, less the gross redemptions that occurred during the distribution period covered by the report.

h) Offering materials - This section applies only in Saskatchewan, Ontario, Québec, New Brunswick and Nova Scotia.

If a distribution has occurred in Saskatchewan, Ontario, Québec, New Brunswick or Nova Scotia, complete the table below by listing the offering materials that are required under the prospectus exemption relied on to be filed with or delivered to the securities regulatory authority or regulator in those jurisdictions.

In Ontario, if the offering materials listed in the table are required to be filed with or delivered to the Ontario Securities Commission (OSC), attach an electronic version of the offering materials that have not been previously filed with or delivered to the OSC.

Description	Date of document or other material (YYYY-MM-DD)	Previously filed with or delivered to regulator? (Y/N)	Date previously filed or delivered (YYYY-MM-DD)

ITEM 8 - COMPENSATIO	ON INFORMATION					
Provide information for each p the distribution. Complete aa					any compensation in connection v ted.	with
Indicate whether any comper-	nsation was paid, or will be po	aid, in connecti	on with the distributior	1.		
🗌 No 🗹 Yes	If yes, indicate nur	nber of perso	ons compensated.	4		
a) Name of person com	pensated and registration	n status				
Indicate whether the person co	mpensated is a registrant.		✓ No	Yes		
If the person compensated is a	n individual, provide the nam	ne of the individ	lual.			
Full legal name of indi	vidual Burpee		Mathew			
	Family n	ame	First giver	n name	Secondary given names	
If the person compensated is n	ot an individual, provide the	following infor	mation.			
Full legal name	e of non-individual					
F	Firm NRD number			(if app	licable)	
Indicate whether the person co	• •	tribution throu	gh a funding portal or	an internet-based	portal. 🗹 No 🗌 \	Yes
b) Business contact info						
If a firm NRD number is not pr			ntact information of th	ne person being cor	npensated.	
Street address	6235 Thornaby Way NW	/				
Municipality	Calgary			Province/State	Alberta	
Country	Canada		Posta	l code/Zip code	T2K 5K8	
Email address			Tel	ephone number		
c) Relationship to issuer	or investment fund mana	ager				
Indicate the person's relationsh the Instructions and the mean					aning of "connected" in Part B(2)) of
Connect with the iss	uer or investment fund mana	ager	Inside	er of the issuer (ot	her than an investment fund)	
Director or officer of	the investment fund or inves	stment fund ma	inager 🗌 Empl	oyee of the issuer	or investment fund manager	
✓ None of the above						
d) Compensation details	3					
Canadian dollars. Include cash incidental to the distribution, su allocation arrangements with t	commissions, securities-base uch as clerical, printing, legal he directors, officers or emplo	d compensatio or accounting	n, gifts, discounts or oth services. An issuer is no	her compensation. It required to ask fo	stribution. Provide all amounts in Do not report payments for servic or details about, or report on, inte	ices
Cash commissions p	aid 750.00			Security code 1	Security code 2 Security code :	3
Value of all securiti distributed as compensation		ŝ	Security codes			
Describe	terms of warrants, options o	r other rights				
Other compensation	on ⁵	Describe				
Total compensation p	aid 750.00					
Check box if the p	erson will or may receive an	y deferred com	pensation (describe th	ne terms below)		
⁴ Provide the aggregate value						
additional securities of the iss rights exercisable to acquire a ⁵ Do not include deferred com	additional securities of the is		irities distributed as co	ompensation, <u>inclui</u>	<u>ding</u> options, warrants or other	

a) Name of person com	pensated and registration sta	atus									
Indicate whether the person co	ompensated is a registrant.		✓ No		Yes						
If the person compensated is a	n individual, provide the name o	f the individ	lual.								
Full legal name of indi	vidual										
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 Old Kent Road Financial Inc.											
Firm NRD number (if applicable)											
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal.											
b) Business contact info	rmation										
If a firm NRD number is not pr	rovided in Item 8 (a), provide the	business co	ntact information	n of the p	person be	eing com	pensated.				
Street address	2030, 150 - 9 Avenue SW										
Municipality	Calgary			Pi	rovince	/State	Alberta				
Country	Canada		F	ostal c	ode/Zip	code	T2P 3H9)			
Email address				Telepl	hone nı	umber					
c) Relationship to issue	r or investment fund manage	r									
the Instructions and the mean	hip with the issuer or investment ing of "control" in section 1.4 of f	NI 45-106 fc	or the purposes of	^c complet	ting this	section.	-			(2) of	
	uer or investment fund manager						er than an i				
Director or officer of	the investment fund or investme	ent fund ma	nager	Employe	ee of the	issuer o	or investme	nt fund n	nanager		
None of the above											
d) Compensation details	3										
Canadian dollars. Include cash incidental to the distribution, su allocation arrangements with t	tion paid, or to be paid, to the pe commissions, securities-based co uch as clerical, printing, legal or c he directors, officers or employee	mpensation	n, gifts, discounts services. An issuer	or other r is not re	compen equired t	sation. E to ask foi	Do not repor	t paymer	nts for ser	rvices	
Cash commissions p	aid			:	Security c	ode 1	Security co	de 2 S	ecurity coo	de 3	
Value of all securiti distributed as compensation		S	Security codes								
·	terms of warrants, options or ot	ner rights									
Other compensation	on⁵ 21,927.42	Describe	2% Managem	ent Fee)						
Total compensation p	aid 21,927.42]	
Check box if the p	erson will or may receive any de	ferred com	pensation (descr	ibe the t	terms be	low)					
additional securities of the iss	of all securities distributed as co suer. Indicate the security codes additional securities of the issuer pensation.	for all secu] r	

a) Name of person com	pensated and regist	ration status									
Indicate whether the person co	ompensated is a registr	ant.	✓ No		Yes						
If the person compensated is an individual, provide the name of the individual.											
Full legal name of individual Hooda Shaheel											
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											
Firm NRD number (if applicable)											
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal. Ves											
b) Business contact info	rmation										
If a firm NRD number is not pr	ovided in Item 8 (a), pr	rovide the business o	contact informatio	n of the	person b	eing com	pensated.				
Street address	9219 77 Street NW	I									
Municipality	Edmonton			Р	rovince	e/State	Alberta				
Country	Canada			Postal c	code/Zip	o code	T6M 0R	1			
Email address				Telep	hone n	umber					
c) Relationship to issuer	or investment fund	manager									
the Instructions and the means	Indicate the person's relationship with the issuer or investment fund manager (select all that apply). Refer to the meaning of "connected" in Part B(2) of the Instructions and the meaning of "control" in section 1.4 of NI 45-106 for the purposes of completing this section. Connect with the issuer or investment fund manager Director or officer of the investment fund or investment fund manager Employee of the issuer or investment fund manager										
✓ None of the above			· _						U		
d) Compensation details	3										
Provide details of all compensa Canadian dollars. Include cash incidental to the distribution, su allocation arrangements with t	tion paid, or to be paid commissions, securitie uch as clerical, printing he directors, officers or	s-based compensati , legal or accounting employees of a non	on, gifts, discounts g services. An issue	s or othei er is not i	r compei required	nsation. E to ask foi	Do not repo	rt paym	ents for	services	
Cash commissions p	aid 60	0.00			Security	code 1	Security co	ode 2	Security	code 3	
Value of all securit distributed as compensation			Security codes								
Describe	terms of warrants, opt	ions or other rights									
Other compensation	on ⁵	Describe									
Total compensation p	aid 60	0.00	L								
Check box if the p	erson will or may rece	ive any deferred co	mpensation (desc	cribe the	terms b	elow)					
⁴ Provide the aggregate value additional securities of the iss rights exercisable to acquire a ⁵ Do not include deferred com	uer. Indicate the secu additional securities of	rity codes for all sec									

a) Name of person com	pensated and registration	on status									
Indicate whether the person co	ompensated is a registrant.		✓ No		Yes						
If the person compensated is a	n individual, provide the n	ame of the indivi	dual.								
Full legal name of indi	vidual										
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 Access2Capital											
Firm NRD number (if applicable)											
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal. \checkmark No \Box Yes											
b) Business contact info	ormation										
If a firm NRD number is not pr	rovided in Item 8 (a), provid	le the business co	ontact informatio	n of the p	person b	eing com	pensated.				
Street address	1071 Connelly Way										
Municipality	Edmonton			Р	rovince	/State	Alberta				
Country	Canada			Postal c	ode/Zip	o code	T6W 0R4	1			
Email address				Telep	hone n	umber					
c) Relationship to issue	r or investment fund ma	nager	1				L				
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 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. 											
Value of all securiti	ies	_ 			Security		Security cod		rity code 3		
distributed as compensation	on ⁴		Security codes								
Describe	terms of warrants, options	or other rights									
Other compensation	on⁵	Describe									
Total compensation p	aid 260.49	9									
Check box if the p	erson will or may receive a	iny deferred con	npensation (desc	ribe the	terms be	elow)					
⁴ Provide the aggregate value additional securities of the iss rights exercisable to acquire a ⁵ Do not include deferred com,	suer. Indicate the security of additional securities of the	odes for all secu									

ITEM 9 - DIRECTORS, EXECU	JTIVE OFFICERS	AND PROMO	TERS OF THE IS	SUER						
If the issuer is an investment fun	d, do not complete	ttem 9. Procced to	Item 10.							
Indicate whether the issuer is any c	of the following (sele	ct the one that appli	es - if more than on	e applies, select onl	y 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 o	f foreign public issu	er]		
Issuer distributing only elig	ible foreign securitie	es and the distribution	on is to permitted cli	ients only ⁷				_		
If the issuer is at least one of the	above, do not com	nplete 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 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 office	rs 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. Business location of									
Organization or company name	Family name	First given name	Secondary giver names	non-individu resident jurisdictio individu	ail n of		Relationship to is (select all that a			
				Province or	country	D	0	Р		
Old Kent Road Premium Fund III Trustee Inc.				Alberta				✓		
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 individualRelationship to prod (select one or both if approximation of countryProvince or countryD						
							С)		
Old Kent Road Premium Fund III Trustee Inc.	NEALE	JASON		British Columbia	~		~	/		
Old Kent Road Premium Fund III Trustee Inc.	THOMPSON	R.	STEWART	Alberta	~		~	/		
c) Residential address of eac	ch individual									
Complete Schedule 2 of this form completed report. Schedule 2 also					(a) and (b)) and a	ttach 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	Old Kent Road Premium Fund III								
Full legal name	THOMPSON	R.	S	STEWART					
	Family name	First given name		Secondary given names					
Title	Officer and Director of the Trustee of the Issuer								
Telephone number	4033830106	Email address	randythompson@okrfinancial.com						
Signature	R. STEWART THOMPSON	Date	2019	07	17				
			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	GINN	KAREN		Tit	tle	N/A
	Family name	First given name	Secondary give	n names	-	
Name of company	N/A					
Telephone number	4032294430	Err	ail address ka	s karen@missionlaw.ca		à

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.