Form 45-106F1 Report of Exempt Distribution

BCSC EDER Reference Number 9080244

ITEM 1 - REPORT TYPE							
✓ New report							
☐ Amended report If ame	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 (seld Instrument 81-106 Investment Fund Conti				estment fund, refer to secti	on 1.1 of National		
☐ Investment fund issuer	idous Disclosure and the comp	amon policy to twi or	100.				
✓ Issuer (other than an investment of the state of th	tment fund)						
Underwriter	anoni rana)						
ITEM 3 - ISSUER NAME AND OT							
Provide the following information about th			t the fund.				
Full legal name	Rokmaster Resources	Rokmaster Resources Corp.					
Previous full legal name							
If the issuer's name changed in the	e last 12 months, provide most	recent previous legal	name.				
Website	http://www.rokmaster.c	om	(if applicable)				
If the issuer has a legal entity identifier, pro	ovide below. Refer to Part B of t	he Instructions for the	e definition o	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-issue	er(s) other the	an the issuer named above	2.		
Full legal name(s) of co-issuer(s)			(if applicable	e)			
I							
ITEM 4 - UNDERWRITER INFORM							
If an underwriter is completing the report,	provide the underwriter's full le	gal name and firm N	IRD number.		1		
Full legal name							
Firm NRD number (if applicable)							
If the underwriter does not have a firm NR	D number, provide the head off	ice contact informatio	on of the und	derwriter.	_		
Street address							
Municipality		Provir	nce/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 2 1 2 2 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					
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:					
c) SEDAR profile number					
Does the issuer have a SEDAR profile?					
No ✓ Yes If yes, provide SEDAR profile number 0 0 0 3 1 9 2 3					
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 MM DD					
f) Reporting issuer status					
Is the issuer a reporting issuer in any jurisdication of Canada? No Yes					
If yes, select the jurisdictions of Canada in which the issuer is a reporting issuer.					
AII AB BC MB NB NL NT					
NS NU ON PE QC SK YT					
g) Public listing status					
If the issuer has a CUSIP number, provide below (first 6 digits only)					
CUSIP number					
If the issuer is publicly listed, provide the name of the exchange on which the issuer's equity securities primarily trade. Provide only the name of an exchange and not a trading facility such as, for example, an automated trading system.					
Exchange name					
h) Size of issuer's assets					

Select the size of the issuer's assets based on its most recently available annual financial statements (Canadian \$). If the issuer has not prepared annual financial statements for its first financial year, provide the size of the issuer's assets at the distribution end date.

☐ \$0 to under \$5M	☐ \$5M to under \$25M	☐ \$25M to under \$100M
\$100M to under \$500M	☐ \$500M to under \$1B	\$1B or over

ITEM 6 - INVESTMENT	FUND ISSUER INFORMATION				
If the issuer is an inves	tment fund, provide the following information.				
a) Investment fund ma	anager information				
Full legal name					
Firm NRD number	(if applicable)				
If the investment fund mand	ager does not have a firm NRD number, provide the head office contact information of the investment fund manager.				
Street address					
Municipality	Province/State				
Country	Postal code/Zip code				
Telephone number	Website (if applicable)				
b) Type of investment	fund				
Type of investment fund tha	it most accurately identifies the issuer (select only one) .				
Money market	☐ Equity ☐ Fixed income ☐ Balanced				
Alternative strate	gies Cryptoasset Other (describe)				
Indicate whether one or bot	h of the following apply to the investment fund .				
Invests primarily in	n other investment fund issuers				
☐ Is a UCITs Fund¹					
	tive Investment of Transferable Securities funds (UCITs Funds) are investment funds regulated by the European Union of 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 forma	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				
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					
-	AV) of the investment fund				
	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

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 cur	rencies in which the dist	tribution was made	All dollar amounts provided in t	he report must be in Canadian 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.

DD

Start date	2020	03	04	End date	2020	03
	YYYY	MM	DD		YYYY	MM

c) Detailed purchaser information

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

d) Types of securities distributed

Provide the following information for all distributions reported on a per security basis. Refer to Part A(12) of the Instructions for how to indicate the security code. If providing the CUSIP number, indicate the full 9-digit CUSIP number assigned to the security being distributed.

					Canadian \$	
Security code	CUSIP number (if applicable)	Description of security	Number of securities	Single or lowest price	Highest price	Total amount
UBS		Each unit consists of one common share and one non-transferable common share purchase warrant	6,666,667.00	0.0600		400,000.00

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.

е	xch	vertib angea urity c	able		derlyi			se price adian \$)	Expiry date (YYYY- MM-DD)	Conversion ratio	Describe other items (if applicable)
							Lowest	Highest			
V	V	Z	Т	С	М	S	0.1000		2022-03-04	1:1	If closing price of the Issuer's shares is \$0.12 or greater during any 20 consecutive trading day period after four months and a day from July 5, 2020; the warrants will expire, at Issuer's discretion on the 30th day after notice of such fact.

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 ²² purchasers	Total amount (Canadian \$)
British Columbia	NI 45-106 2.5 [Family, friends and business associates]	5	38,000.00
British Columbia	NI 45-106 2.3 [Accredited investor]	15	212,000.00

Ontario	NI 45-106 2.3 [Accredited investor]	4	39,000.00		
Australia	NI 45-106 2.5 [Family, friends and business associates]	1	24,000.00		
China	NI 45-106 2.3 [Accredited investor]	1	9,000.00		
Monaco	NI 45-106 2.3 [Accredited investor]	1	21,000.00		
Bermuda	NI 45-106 2.3 [Accredited investor]	1	18,000.00		
Germany	NI 45-106 2.3 [Accredited investor]	1	18,000.00		
Austria	NI 45-106 2.3 [Accredited investor]	1	9,000.00		
Switzerland	NI 45-106 2.3 [Accredited investor]	1	12,000.00		
	Total dollar amount of securities distributed				

^{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.

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.	ITEM 8 - COMPENSATION INFORMATION								
No ✓ Yes If yes, indicate number of persons 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. 3								

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												
	F	amily n	ame			Firs	t given r	name		Secor	ndary give	n names	
If the person compensated is no	If the person compensated is not an individual, provide the following information.												
Full legal name	of non-individual	Ascen	ıta Fina	nce (Corp.								
F	irm NRD number	2	3	8	0	0			(if app	licable)			
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal. V No Yes													
b) Business contact info	rmation												
If a firm NRD number is not pr	ovided in Item 8 (a), p	rovide t	the busin	ness co	ontact info	rmatior	of the	person b	eing cor	npensated.			
Street address													
Municipality							F	Province	e/State				
Country						F	Postal	code/Zi	p code				
Email address							Telep	ohone n	umber				
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.													
Connect with the issu	uer or investment fund	d mana	ger				Insider	of the is	suer (ot	her than an i	nvestme	nt fund)	
Director or officer of	he investment fund c	r inves	tment fu	nd ma	anager		Employ	ee of th	e issuer	or investme	nt fund n	nanager	
✓ None of the above													
d) Compensation details													
Provide details of all compensate Canadian dollars. Include cash incidental to the distribution, suallocation arrangements with the	tion paid, or to be paid commissions, securitie ch as clerical, printing	es-based g, legal	d compei or accou	nsatio Inting	n, gifts, di: services. A	scounts In issue	or othe r is not	r compe required	nsation. to ask fo	Do not repor	t paymei	nts for sei	vices
Cash commissions pa	aid 18,00	00.00						Security	code 1	Security cod	de 2 S	ecurity cod	de 3
Value of all securiti				9	Security co	odes		U B	S				
distributed as compensation ⁴ Describe terms of warrants, options or other rights													
Other compensation ⁵ Describe 300,000 finder's compensation options each of which entitles the holder to purchase a unit of the Issuer at a price of \$0.06 per unit for a period of one year. Each unit consists of one common share and one non-transferable common share purchase warrant.													
Total compensation pa	aid 18,00	00.00											
Check box if the pe	erson will or may rece	eive any	deferre	d con	npensation	n (desci	ribe the	terms b	elow)				
⁴ Provide the aggregate value additional securities of the iss rights exercisable to acquire a ⁵ Do not include deferred comp	uer. Indicate the secu additional securities of	rity cod	les for a										r

a) Name of person comp	ensated and regi	stration status							
Indicate whether the person co	Indicate whether the person compensated is a registrant. No V Yes								
If the person compensated is an individual, provide the name of the individual.									
Full legal name of indiv	vidual								
		Family name	F	First given name	Secondary given names				
If the person compensated is no	ot an individual, prov	vide the following info	ormation.						
Full legal name	of non-individual	PI Financial Corp).						
F	irm NRD number	5 2 9	0	(i	f applicable)				
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal. V No Yes									
b) Business contact info	mation								
If a firm NRD number is not pro	ovided in Item 8 (a),	provide the business o	contact informat	ion of the person bein	g compensated.				
Street address									
Municipality				Province/S	tate				
Country				Postal code/Zip c	ode				
Email address				Telephone num	nber				
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.									
Connect with the issu	ier or investment fur	nd manager		Insider of the issue	er (other than an investment fund)				
Director or officer of t	he investment fund	or investment fund m	nanager	Employee of the is	suer or investment fund manager				
✓ None of the above									
d) Compensation details									
Canadian dollars. Include cash	commissions, securit ch as clerical, printir	ies-based compensati ng, legal or accounting	on, gifts, discour g services. An iss	nts or other compensa uer is not required to	he distribution. Provide all amounts in tion. Do not report payments for services ask for details about, or report on, internal r.				
Cash commissions pa	aid 4	80.00		Security cod	le 1 Security code 2 Security code 3				
Value of all securitie			Security codes	U B	S				
distributed as compensation ⁴ Describe terms of warrants, options or other rights									
Other compensation ⁵ Describe 8,000 finder's compensation options each of which entitles the									
holder to purchase a unit of the Issuer at a price of \$0.06 per unit for a period of one year. Each unit consists of one common share and one non-transferable common share purchase warrant.									
Total compensation pa	aid 4	80.00							
Check box if the pe	erson will or may rec	eive any deferred co	mpensation (de	scribe the terms belo	w)				
	uer. Indicate the sec dditional securities o	curity codes for all sec			her rights exercisable to acquire including options, warrants or other				

a) Name of person comp	ensated and regi	stration statu	JS								
Indicate whether the person co	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	vidual										
		Family name			First	given	name		Secondar	y given names	;
If the person compensated is no	ot an individual, prov	ride the follow	ing infor	rmation.							
Full legal name	of non-individual	Leede Jon	es Gab	le Inc.							
F	irm NRD number	5 7	7	0				(if app	licable)		
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal. V No Yes											
b) Business contact info	rmation										
If a firm NRD number is not pro	ovided in Item 8 (a),	provide the bu	ısiness c	ontact info	ormation	of the	person b	eing con	npensated.		
Street address											
Municipality						F	Province	e/State			
Country				1	Р	ostal	code/Zi _l	p code			
Email address]		Tele	ohone n	umber			
c) Relationship to issuer	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.											
Connect with the issu	ier or investment fur	nd manager			ו 🗆 י	Insider	of the is	suer (oth	ner than an inve	stment fund)	1
Director or officer of t	he investment fund	or investment	fund m	anager		Emplo	yee of th	e issuer	or investment f	und manager	ı
✓ None of the above											
d) Compensation details											
Provide details of all compensations of all compensations of all compensations of the compensation of the distribution, sure allocation arrangements with the	commissions, securit ch as clerical, printir	ies-based com g, legal or acc	pensatio counting	on, gifts, di services. A	scounts d An issuer	or othe	er compei required	nsation. I to ask fo	Do not report po	nyments for se	ervices
Cash commissions pa	aid 4,8	00.00					Security	code 1	Security code 2	Security co	ode 3
Value of all securities			;	Security c	odes		U B	S			
distributed as compensation ⁴											
Describe terms of warrants, options or other rights											
Other compensation ⁵ Describe 80,0000 finder's compensation options each of which entitles the holder to purchase a unit of the Issuer at a price of \$0.06 per unit for a period of one year. Each unit consists of one common share and one non-transferable common share purchase warrant.											
Total compensation pa	aid 4,8	00.00									
Check box if the pe	erson will or may rec	eive any defe	rred con	mpensation	n (descri	ibe the	terms b	elow)			
⁴ Provide the aggregate value additional securities of the issinghts exercisable to acquire a ⁵ Do not include deferred comp	uer. Indicate the sec dditional securities o	urity codes fo									er

тем 9 - Directors, Execu	TIVE OFFICERS	AND PROMOT	ERS OF THE ISS	SUER						
If the issuer is an investment fund	d, do not complete l	Item 9. Procced to	Item 10.							
Indicate whether the issuer is any o	f the following (select	t the one that appli	es - if more than one	applies, select onl	y one).					
✓ Reporting issuer in any juris	sdiction of Canada									
Foreign public issuer										
Wholly owned subsidiary of a reporting issuer in any jurisdiction of Canada ⁶										
Provide name of reporting issuer										
Wholly owned subsidiary of a foreign public issuer ⁶										
Provide name of	foreign public issue	r						7		
Issuer distributing only eligil	ble foreign securities	and the distribution	n is to permitted clie	ents only ⁷				_		
If the issuer is at least one of the	above, do not comp	olete Item 9(a) – (d	c). Proceed to Item	10.						
⁶ An issuer is a wholly owned subsidiary of a reporting issuer or a foreign public issuer if all of the issuer's outstanding voting securities, other than securities that are required by law to be owned by its directors, are beneficially owned by the reporting issuer or the foreign public issuer, respectively. ⁷ Check this box if it applies to the current distribution even if the issuer made previous distributions of other types of securities to non-permitted clients. Refer to the definitions of "eligible foreign security" and "permitted client" in Part B(1) of the Instructions.										
If the issuer is none of the above, check this box and complete Item 9(a) - (c).										
a) Directors, executive 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 Secondary given names Business location of non-individual or residentail jurisdiction of individual Relationship to issuer (select all that apply)										
				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	Rokmaster Resources Corp.					
Full legal name	Cojuco	Dennis				
	Family name	First given name		Seconda	ary given n	ames
Title	Chief Financial Officer					
Telephone number	6047223956	Email address	dcojuco@	rokmas	ter.com	
Signature		Date	2020	03	30	
			YYYY	MM	DD	

ITEM 11- CONTACT F	PERSON				
	ness contact information for this report, if different than t			regulator ma	ay contact with any questions
Same as individua	al certifying the report				
Full legal name				Title	
•	Family name	First given name	Secondary given names		
Name of company					
Telephone number		Er	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.