# Form 45-106F1 Report of Exempt Distribution

BCSC EDER Reference Number 8651203

ITEM 1 - REPORT TYPE							
□ New report							
✓ Amended report If amen	Amended report If amended, provide filing date of report that is being amended 2018 11 15 (YYYY-MM-DD)						
ITEM 2 - PARTY CERTIFYING THE	TEM 2 - PARTY CERTIFYING THE REPORT						
Indicate the party certifying the report (sele Instrument 81-106 Investment Fund Contin	, ,	•		vestment fund, refer to secti	on 1.1 of National		
☐ Investment fund issuer	γ						
✓ Issuer (other than an invest	tment fund)						
Underwriter	,						
ITEM 3 - ISSUER NAME AND OTI	HER IDENTIFIERS						
Provide the following information about the	e issuer, or if the issuer is an in	vestment fund, ab	out the fund.				
Full legal name	Calibre Mining Corp.						
Previous full legal name							
If the issuer's name changed in the	last 12 months, provide most	recent previous leg	gal name.				
Website	calibremining.com		(if applicable)				
If the issuer has a legal entity identifier. pro	vide 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 so	ecurity, provide the full legal no	ame(s) of the co-is	suer(s) other th	an the issuer named above	<u>.</u>		
Full legal name(s) of co-issuer(s)		(if applicable)					
ITEM 4 LINDEDWITTED INCOM	IATION		ı				
ITEM 4 - UNDERWRITER INFORM							
If an underwriter is completing the report, p	provide the underwriter's full le	gal name and firn	n NRD number.		]		
Firm NRD number							
	( Spp. 33.3)						
If the underwriter does not have a firm NRD number, provide the head office contact information of the underwriter.  Street address							
Municipality Municipality		Pro	ovince/State		]		
Country			de/Zip code		]		
Telephone number		. 33(4) 00	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 <b>mining industry</b> , 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					
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 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 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						
<sup>1</sup> 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?					
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						
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

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 o	r currencies in which the dist	ribution was made.	All dollar amounts provided in	the report must be in Canadian dollars.
✓ Canadian dolla	ar 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.

10

MM

30

DD

Start date		10	30	End date	2018
	YYYY	MM	DD	- -	YYYY

#### 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 \$			
S	Security CUSIP number (if applicable)			Description of security	Number of securities	Single or lowest price	Highest price	Total amount
U	В	S 08	Each unit consists of one common share and one common share warrant.		11,421,091.00	0.4400		5,025,280.00

#### 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.

e	xcha	vertib angea irity c	ble		derlyii urity c			se price dian \$)	Expiry date (YYYY- MM-DD)	Conversion ratio	Describe other items (if applicable)
							Lowest	Highest			
V	V	N	Т	С	М	S	0.9500		2023-10-30	1:1	Each warrant entitles the holder to purchase one common share of the Company.

#### 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 iurisdiction.

For jurisdictions within Canada, state the province or territory, otherwise state the country.

Province or country	Exemption relied on	Number of unique <sup>28</sup> purchasers	Total amount (Canadian \$)
Alberta	NI 45-106 2.3 [Accredited investor]	5	502,040.00
British Columbia	NI 45-106 2.3 [Accredited investor]	28	1,832,160.00
British Columbia	NI 45-106 2.5 [Family, friends and business associates]	5	329,560.00
Belgium	NI 45-106 2.3 [Accredited investor]	1	88,000.00
Switzerland	NI 45-106 2.3 [Accredited investor]	3	249,920.00

Switzerland	Distributions to purchasers outside of local jurisdiction (BC, AB, NB)	2	26,400.00
United States	Distributions to purchasers outside of local jurisdiction (BC, AB, NB)	7	1,670,720.04
Virgin Islands, British	NI 45-106 2.3 [Accredited investor]	2	74,800.00
Germany	NI 45-106 2.3 [Accredited investor]	3	187,440.00
Ontario	NI 45-106 2.3 [Accredited investor]	3	44,000.00
Ontario	NI 45-106 2.5 [Family, friends and business associates]	1	20,240.00
	5,025,280.04		

<sup>&</sup>lt;sup>2a</sup> 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	

<sup>&</sup>lt;sup>3</sup>"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)	

<sup>&</sup>lt;sup>2b</sup> 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 V 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. 7

a) Name of person com	pensated and regis	tration status							
Indicate whether the person co	mpensated is a regist	ant.	☐ No	✓ Yes	S				
If the person compensated is a	n individual, provide t	he name of the indivi	dual.						
Full legal name of indi	vidual								
Family name First given name Secondary given names									
If the person compensated is n	ot an individual, provi	de the following infor	mation.						
Full legal name of non-individual PI Financial Corp.									
Firm NRD number 5 2 9 0 (if applicable)									
Indicate whether the person co	mpensated facilitated	the distribution thro	ıgh a funding port	tal or an inte	rnet-based po	ortal.  Ves			
b) Business contact info	rmation								
If a firm NRD number is not pr	ovided in Item 8 (a), p	rovide the business co	ontact information	of the perso	on being com	pensated.			
Street address	Suite 1900, 666 B	urrard Street							
Municipality	Vancouver			Provi	nce/State	British Columbia			
Country	Canada		F	ostal code	/Zip code	V6C 3N1			
Email address	gbekmonte@pifina	ancial.com		Telephone	e number	6046642900			
c) Relationship to issuer or investment fund manager									
Indicate the person's relations! the Instructions and the mean	•		-			ning of "connected" in Part B(2) of			
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	<b>S</b>								
Canadian dollars. Include cash	commissions, securitien commissions, securitien commissions, securities commissions are commissions.	es-based compensation, legal or accounting	n, gifts, discounts services. An issuei	or other com r is not requi	npensation. D red to ask for	ribution. Provide all amounts in o not report payments for services details about, or report on, internal			
Cash commissions p	aid 6,0°	9.20		Secu	rity code 1	Security code 2 Security code 3			
Value of all securiti distributed as compensation		:	Security codes	W	N T				
Describe terms of warrants, options or other rights  11,400 warrants. Each warrant is exercisable into 1 additional common share, at a price of \$0.95 per share until Oct. 30, 2023.									
Other compensation	on <sup>5</sup>	Describe		,	7 7				
Total compensation p	aid 6,01	9.20							
Check box if the p	erson will or may rece	ive any deferred con	npensation (descr	ibe the term	s below)				
<sup>4</sup> Provide the aggregate value additional securities of the iss rights exercisable to acquire a <sup>5</sup> Do not include deferred com	uer. Indicate the secu additional securities o	rity codes for all sec							

a) Name of person comp	pensated and regis	tration status									
Indicate whether the person co	mpensated is a registi	rant.	✓ No		Yes	6					
If the person compensated is a	n individual, provide t	he name of the indi	vidual.								
Full legal name of indi	vidual Nerrell		Andei	'S							
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.											
b) Business contact info	rmation										
If a firm NRD number is not pr	ovided in Item 8 (a), p	rovide the business	contact info	rmation of t	he perso	n being (	comp	ensated.			
Street address	81/80 Land & Hou	se, Chaofa									
Municipality	Chalong				Provir	nce/Sta	te	Phuket			
Country	Thailand			Posta	al code	/Zip cod	de	83160			
Email address	a@geckoresearch	ı.com		Tel	lephone	e numbe	er	351211	126845		
c) Relationship to issuer or investment fund manager											
Indicate the person's relationsh the Instructions and the meani	•		-		-			ing of "co	onnected"	in Part	: B(2) of
	uer or investment fun		, , , ,					er than an	investme	nt fund	d)
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	3										
Provide details of all compensa Canadian dollars. Include cash incidental to the distribution, su allocation arrangements with the	tion paid, or to be paid commissions, securitie uch as clerical, printing	es-based compensat g, legal or accountin	ion, gifts, di g services. A	scounts or ot In issuer is n	ther com ot requii	npensatio red to asi	n. Do	not repo	ort payme	nts for	services
Cash commissions pa	aid 6,01	19.20			Secu	rity code	1 :	Security c	ode 2 S	ecurity	code 3
Value of all securition distributed as compensation			Security co	odes	W	N T	Г				
Describe	terms of warrants, op	tions or other rights		warrants. I n share, at							
Other compensation	on <sup>5</sup>	Describe			. ч рос	- σ. φσ			<u> </u>		
Total compensation pa	aid 6,01	9.20									
	erson will or may rece	· 		`						<u> </u>	
<sup>4</sup> Provide the aggregate value additional securities of the iss rights exercisable to acquire a <sup>5</sup> Do not include deferred comp	uer. Indicate the secu additional securities of	ırity codes for all se									

a) Name of person comp	pensated and registration status									
Indicate whether the person co	mpensated is a registrant.	✓ No  Yes								
If the person compensated is a	n individual, provide the name of the indivi	idual.								
Full legal name of indiv	vidual									
	Family name	First given name	Secondary given 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 Pretium Commincations										
Firm NRD number (if 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	rmation									
If a firm NRD number is not pr	ovided in Item 8 (a), provide the business c	ontact information of the person being con	pensated.							
Street address	3104 30 Ave, Suite 369									
Municipality	Vernon	Province/State	British Columbia							
Country	Canada	Postal code/Zip code	V1T 9M9							
Email address	info@pretiumgroup.ca	Telephone number	2505588340							
c) Relationship to issuer or investment fund manager										
		ager (select all that apply). Refer to the med for the purposes of completing this section.	ning of "connected" in Part B(2) of							
			per than an investment fund)							
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	<b>3</b>									
Canadian dollars. Include cash incidental to the distribution, su	commissions, securities-based compensation	ified in Item 8(a) in connection with the dis on, gifts, discounts or other compensation. I services. An issuer is not required to ask fo -individual compensated by the issuer.	Do not report payments for services							
Cash commissions pa	aid 30,756.00	Security code 1	Security code 2 Security code 3							
Value of all securitie distributed as compensation		Security codes W N T								
•	terms of warrants, options or other rights	58,250 warrants. Each warrant is excommon share, at a price of \$0.95								
Other compensation	on <sup>5</sup> Describe	common share, at a price of \$0.95 p	Der Share until Oct. 30, 2023.							
Total compensation pa										
Check box if the pe	erson will or may receive any deferred cor	npensation (describe the terms below)								
<sup>4</sup> Provide the aggregate value	of all securities distributed as compensati	on, <u>excluding</u> options, warrants or other rig	ahts exercisable to acquire							
additional securities of the issu	uer. Indicate the security codes for all sec additional securities of the issuer.	urities distributed as compensation, <u>includ</u>	ing options, warrants or other							

a) Name of person comp	pensated and regis	stration status								
Indicate whether the person co	mpensated is a regist	trant.	☐ No	<b>√</b>	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 Secondary given names										
If the person compensated is no	ot an individual, prov	ride the following info	rmation.							
Full legal name	of non-individual	Canaccord Genu	ity Corp.							
Firm NRD number 9 0 0 (if applicable)										
Indicate whether the person co	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), <sub>I</sub>	provide the business o	contact informatio	n of the p	erson bein	ng com	pensated.			
Street address	Suite 2200, 609 0	Granville Street								
Municipality	Vancouver			Pr	rovince/S	tate	British (	Columbia		
Country	Canada			Postal co	ode/Zip c	ode	V7Y 1H	12		
Email address	Alicia.Roache@c	anaccord.com		Teleph	none num	nber	604643	7300		
c) Relationship to issuer or investment fund manager										
Indicate the person's relationsh the Instructions and the meani			-				ning of "co	onnected" in	Part B(2	2) of
	-		for the purposes t	•	_		er than an	investment	fund)	
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	<b>;</b>									
Provide details of all compensations of all compensations and canadian dollars. Include cash incidental to the distribution, surplication arrangements with the	commissions, securiti Ich as clerical, printin	es-based compensati g, legal or accounting	on, gifts, discount g services. An issu	s or other er is not re	compensa equired to	tion. D ask for	o not repo	ort payments	for serv	vices
Cash commissions pa	aid 25,5	81.60		8	Security cod	de 1	Security co	ode 2 Sec	urity cod	le 3
Value of all securition distributed as compensation			Security codes	V	W N	Т				
Describe terms of warrants, options or other rights  48,450 warrants. Each warrant is exercisable into 1 additional common share, at a price of \$0.95 per share until Oct. 30, 2023.										
Other compensation	on <sup>5</sup>	Describe	common sna	re, at a p	orice of \$0	0.95 p	er snare	until Oct. 3	30, 202	23.
Total compensation pa		81.60								
Check box if the pe	erson will or may rec	eive any deferred co	mpensation (des	cribe the t	erms belo	w)				
<sup>4</sup> Provide the aggregate value	of all securities distri	buted as compensati	ion, <u>excludina</u> op	tions, wari	rants or ot	ther rig	hts exerci	isable to acq	uire	
additional securities of the issa rights exercisable to acquire a <sup>5</sup> Do not include deferred comp	uer. Indicate the sec additional securities o	urity codes for all sed								
2.2.2.2.2.3.000 30111										

a) Name of person comp	pensated and registration status									
Indicate whether the person co	mpensated is a registrant.	✓ No  Yes								
If the person compensated is a	n individual, provide the name of the indi	vidual.								
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	Full legal name of non-individual Sprott Global Resources Investments, Inc.									
Firm NRD number (if 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	rmation									
If a firm NRD number is not pr	ovided in Item 8 (a), provide the business	contact information of the person being con	npensated.							
Street address	Suite 200, 1910 Palomar Way									
Municipality	Carlsbad	Province/State	California							
Country	United States	Postal code/Zip code	92008							
Email address	info@sprottcapital.com	Telephone number	17609433939							
c) Relationship to issuer or investment fund manager										
		nager (select all that apply). Refer to the med 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	3									
Canadian dollars. Include cash incidental to the distribution, su	commissions, securities-based compensat	ntified in Item 8(a) in connection with the dis ion, gifts, discounts or other compensation. I g services. An issuer is not required to ask fo n-individual compensated by the issuer.	Do not report payments for services							
Cash commissions pa	aid 97,603.20	Security code 1	Security code 2 Security code 3							
Value of all securition distributed as compensation		Security codes W N T								
·	terms of warrants, options or other rights	_ ,								
Other compensation	on <sup>5</sup> Describe	share, at a price of \$0.95 per share	untii Oct. 30, 2023.							
Total compensation pa										
Check box if the pe	erson will or may receive any deferred co	empensation (describe the terms below)								
	· · ·	· · · · · · · · · · · · · · · · · · ·								
4 Dravida tha comments of	of all acquisition distributed as a series	tion evolution entires are the set	ahta ayaraisahla taii							
additional securities of the iss	uer. Indicate the security codes for all se additional securities of the issuer.	tion, <u>excluding</u> options, warrants or other ri curities distributed as compensation, <u>includ</u>	ynts exercisable to acquire <u>ding</u> options, warrants or other							

a) Name of person com	pensated and registration sta	tus								
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 indi	vidual									
	Family name		First	given na	ame		Seco	ndary giver	names	
	ot an individual, provide the follow	-								
Full legal name of non-individual Haywood Securities Inc.										
Firm NRD number 1 6 3 0 (if applicable)										
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal.  V No Yes										
b) Business contact info	rmation									
If a firm NRD number is not pr	rovided in Item 8 (a), provide the b	ousiness co	ntact information	of the p	person beir	ng com	pensated.			
Street address	Suite 700, 200 Burrard Stree	et								
Municipality	Vancouver			Pi	rovince/S	State	British C	olumbia		
Country	Canada		Po	ostal c	ode/Zip c	code	V6C 3L6	3		
Email address	rrongavilla@haywood.com			Teleph	hone num	nber	6046977	7100		
c) Relationship to issuer or investment fund manager										
	nip with the issuer or investment fing of "control" in section 1.4 of N						ning of "coi	nnected" i	n Part E	3(2) of
Connect with the iss	uer or investment fund manager			nsider (	of the issu	er (oth	er than an	investme	nt 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	<b>S</b>									
Provide details of all compensa Canadian dollars. Include cash incidental to the distribution, so	tion paid, or to be paid, to the per commissions, securities-based cor uch as clerical, printing, legal or ac the directors, officers or employees	mpensation ccounting s	n, gifts, discounts c services. An issuer	or other is not r	compensa equired to	ation. D ask for	o not repoi	rt paymen	its for se	ervices
Cash commissions p	aid 8,712.00				Security cod	de 1	Security co	de 2 Se	ecurity co	ode 3
Value of all securiti distributed as compensation		S	Security codes	,	WN	Т				
Describe terms of warrants, options or other rights  16,500 warrants. Each warrant is exercisable into 1 additional common share, at a price of \$0.95 per share until Oct. 30, 2023.										
Other compensation	on <sup>5</sup>	Describe	Common share	, at a p	σπου στ φ	0.00 p	or snare			020.
Total compensation p	8,712.00									
Check box if the p	erson will or may receive any def	erred com	pensation (descri	be the t	terms belo	ow)				
additional securities of the iss	of all securities distributed as con suer. Indicate the security codes the additional securities of the issuer. pensation.	for all secu	n, <u>excluding</u> optio vities distributed a	ns, war as comp	rrants or or pensation,	ther rig <u>includi</u>	hts exercis ing options	able to ac , warrants	cquire or othe	er

a) Name of person comp	pensated and registration status									
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 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 1045373 BC Ltd.										
Firm NRD number (if 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	rmation									
If a firm NRD number is not pr	rovided in Item 8 (a), provide the business co	ontact information of the person being con	mpensated.							
Street address	15th Floor, 10140 West Georgia Stre	eet								
Municipality	Vancouver	Province/State	British Columbia							
Country	Canada	Postal code/Zip code	V6E 4H1							
Email address	anish@firstglobecapital.com	Telephone number	6046175355							
c) Relationship to issuer or investment fund manager										
	nip with the issuer or investment fund manding of "control" in section 1.4 of NI 45-106									
	uer or investment fund manager		her 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										
Canadian dollars. Include cash incidental to the distribution, su	tion paid, or to be paid, to the person ident commissions, securities-based compensatic uch as clerical, printing, legal or accounting he directors, officers or employees of a non-	n, gifts, discounts or other compensation. services. An issuer is not required to ask fo	Do not report payments for services							
Cash commissions p	aid 25,581.60	Security code 1	Security code 2 Security code 3							
Value of all securiti	· · · · · · · · · · · · · · · · · · ·	Security codes W N T								
distributed as compensation <sup>4</sup> Describe terms of warrants, options or other rights  48,450 warrants. Each warrant is exercisable into 1 additional										
Other compensation	Describe	common share, at a price of \$0.95	per share until Oct. 30, 2023.							
Total compensation pa										
Check box if the pe	erson will or may receive any deferred con	npensation (describe the terms below)								
additional securities of the iss	of all securities distributed as compensation of all security codes for all security codes for all securities of the issuer. Opensation.	on, <u>excluding</u> options, warrants or other ruurities distributed as compensation, <u>includ</u>	ights exercisable to acquire <u>ding</u> options, warrants or other							

тем 9 - Directors, Execu	TIVE OFFICERS	AND PROMOT	ERS OF THE <b>I</b> SS	SUER							
If the issuer is an investment fund, do not complete 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 <sup>6</sup>											
Provide name of reporting issuer											
Wholly owned subsidiary of a foreign public issuer <sup>6</sup>											
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 <sup>7</sup>				_			
If the issuer is at least one of the	above, do not comp	olete Item 9(a) – (d	c). Proceed to Item	10.							
<sup>6</sup> 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. <sup>7</sup> 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											
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. For "Relationship to issuer", "D" – Director, "O" – Executive Officer, "P" – Promoter.											
Organization or company name	Organization or company name  Family name  First given name  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  Relationship to promoter (select one or both if applicable)											
				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	Calibre Mining Corp.							
Full legal name	Dagsaan Kristian							
	Family name	First given name	•	Seconda	ary given na	ames		
Title	Chief Financial Officer							
Telephone number		Email address						
Signature	Kristian Dagsaan	Date	2018	11	07			
		•	YYYY	MM	DD			

TEM 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	Gunasekera	David			Title	Lawyer			
	Family name	First given name	Secondary give	ven names					
Name of company	DuMoulin Black LLP								
Telephone number	6046871224	Em	ail address	dgunasekera	a@dumo	ulinblack.com			

#### 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.