# Form 45-106F1 Report of Exempt Distribution

BCSC EDER Reference Number 9075319

| ITEM 1 - REPORT TYPE  |  |  |  |  |  |  |  |  |
|---|--|--|--|--|--|--|--|--|
| ✓ New report  |  |  |  |  |  |  |  |  |
| Amended report    If amended, provide filing  | 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 guid<br>Instrument 81-106 Investment Fund Continuous Disclosure and | nuidance regarding whether an issuer is an investment fund, refer to section 1.1 of National |  |  |  |  |  |  |  |
| ☐ Investment fund issuer  | nd the companion policy to Wi 01-100.  |  |  |  |  |  |  |  |
| ✓ Issuer (other than an investment fund)  |  |  |  |  |  |  |  |  |
| Underwriter   |  |  |  |  |  |  |  |  |
| _   | -nc  |  |  |  |  |  |  |  |
| ITEM 3 - ISSUER NAME AND OTHER IDENTIFIER   |  |  |  |  |  |  |  |  |
| Provide the following information about the issuer, or if the issu  |  |  |  |  |  |  |  |  |
| Full legal name Newlook Capital Industrial Services Fund II   |  |  |  |  |  |  |  |  |
| Previous full legal name  |  |  |  |  |  |  |  |  |
| If the issuer's name changed in the last 12 months, prov  | rovide most recent previous legal name.  |  |  |  |  |  |  |  |
| Website   | (if applicable)  |  |  |  |  |  |  |  |
| If the issuer has a legal entity identifier provide below. Refer to   | to Part B of the Instructions for the definition of "legal entity identifier".               |  |  |  |  |  |  |  |
| Legal entity identifier   |  |  |  |  |  |  |  |  |
| If two or more issuers distributed a single security, provide the fu  | e full legal name(s) of the co-issuer(s) other than the issuer named above.                  |  |  |  |  |  |  |  |
| Full legal name(s) of co-issuer(s)  | (if applicable)  |  |  |  |  |  |  |  |
| ITEM 4 - UNDERWRITER INFORMATION  |  |  |  |  |  |  |  |  |
| If an underwriter is completing the report, provide the underwrit   | writer's full logal name and firm NPD number   |  |  |  |  |  |  |  |
| Full legal name   | which is fall tegal hame and fam two number.   |  |  |  |  |  |  |  |
| Firm NRD number (if applicable)   |  |  |  |  |  |  |  |  |
| If the underwriter does not have a firm NRD number, provide th  |  |  |  |  |  |  |  |  |
| Street address  | the nead office contact anormation of the underwitter.                                       |  |  |  |  |  |  |  |
| 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 6 9 8 9  |
| 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  |
| c) SEDAR profile number  |
| Does the issuer have a SEDAR profile?  |
| No  ✓ Yes If yes, provide SEDAR profile number  0 0 0 4 5 5 1 2  |
| 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 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  |
|                                  | blicly listed, provide the name of the exchange on which the investment fund's securities primarily trade. Provide only the oot a trading facility such as, for example, an automated trading system.                                     |
| Exchange on                      |   |
| -                                | 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. Currency Select the currency or currencies in which the distribution was made. All dollar amounts provided in the report must be in Canadian dollars. US dollar ✓ Canadian dollar Euro Other (describe) 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 End date 2020 03 20 2020 03 20 YYYY MM DD YYYY MM DD Detailed purchaser information Complete Schedule 1 of this form for each purchaser and attach the schedule to the completed report.

# 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<br>lowest<br>price | Highest price | Total amount |
| UNT           |                              | Series A4 Trust Units   | 14,466.00            | 100.0000                     |               | 1,446,600.00 |

#### 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.

| excl |  | nange | ivertible /<br>langeable<br>urity code |  |  |  | nderiying   ( |         |  | ise price<br>adian \$) | Expiry date<br>(YYYY- MM-DD) | Conversion ratio | Describe other items (if applicable) |
|------|--|-------|--|--|--|--|---------------|---------|--|------------------------|------------------------------|------------------|--------------------------------------|
|      |  |       |  |  |  |  | Lowest        | Highest |  |                        |                              |                  |                                      |
|      |  |       |  |  |  |  |               |         |  |                        |                              |                  |                                      |

#### 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

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 2.9(2.1) [Offering memorandum] (AB, SK, ON, QC, NB, NS) | 11  | 148,800.00                 |
| Alberta             | NI 45-106 2.3 [Accredited investor]                               | 6   | 105,900.00                 |
| British Columbia    | NI 45-106 2.9(1) [Offering memorandum] (BC, NL)                   | 7   | 107,400.00                 |
| British Columbia    | NI 45-106 2.3 [Accredited investor]                               | 3   | 67,600.00                  |
| Manitoba            | NI 45-106 2.9(2) [Offering memorandum] (MB, PE, YT, NT, NU)       | 3   | 37,000.00                  |
| Ontario             | NI 45-106 2.9(2.1) [Offering memorandum] (AB, SK, ON, QC, NB, NS) | 8   | 124,700.00                 |
| Ontario             | NI 45-106 2.3 [Accredited investor]                               | 10  | 373,400.00                 |

| Québec       | NI 45-106 2.9(2.1) [Offering memorandum]<br>(AB, SK, ON, QC, NB, NS) | 2  | 40,000.00  |  |  |  |
|--------------|--|----|------------|--|--|--|
| Québec       | NI 45-106 2.3 [Accredited investor]                                  | 10 | 371,800.00 |  |  |  |
| Saskatchewan | NI 45-106 2.9(2.1) [Offering memorandum]<br>(AB, SK, ON, QC, NB, NS) | 2  | 70,000.00  |  |  |  |
|              | Total dollar amount of securities distributed                        |    |            |  |  |  |
|              | Total number of unique purchasers <sup>2</sup> b 62                  |    |            |  |  |  |

<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<br>(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.

<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.

### 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<br>delivered<br>(YYYY-MM-DD) |
|-----|--|---|--|---|
| 1.  | English Offering<br>Memorandum               | 2019-04-26                                      | Υ  | 2019-06-10  |
| 2.  | English OM Marketing<br>Materials (Overview) | 2019-05-01                                      | Υ  | 2019-06-10  |
| 3.  | English OM Marketing<br>Materials (Brochure) | 2019-05-01                                      | Υ  | 2019-06-10  |
| 4.  | English OM Marketing<br>Materials (Overview) | 2019-07-11                                      | Y  | 2019-09-05  |
| 5.  | English OM Marketing<br>Materials (Brochure) | 2019-07-11                                      | Υ  | 2019-09-05  |
|     | French Offering<br>Memorandum                | 2019-04-26                                      | Υ  | 2019-09-09  |
|     | French OM Marketing<br>Materials (Overview)  | 2019-07-11                                      | Υ  | 2019-09-09  |
|     | French OM Marketing<br>Materials (Brochure)  | 2019-07-11                                      | Υ  | 2019-09-09  |
| 9.  | English OM Marketing<br>Materials (Overview) | 2019-08-28                                      | Υ  | 2019-09-09  |
| 10. | English OM Marketing<br>Materials (Brochure) | 2019-08-28                                      | Υ  | 2019-09-09  |
| 11. | French OM Marketing<br>Materials (Overview)  | 2019-08-28                                      | Y  | 2019-09-09  |
| 12. | French OM Marketing<br>Materials (Brochure)  | 2019-08-28                                      | Y  | 2019-09-09  |
| 13. | English OM Marketing<br>Materials (Brochure) | 2020-03-03                                      | Υ  | 2020-03-04  |

| TEM 8 - COMPENSATION   | INFORMATION                                       |   |  |                             |                              |                     |            |             |                |
|--|---|---|--|-----------------------------|------------------------------|---------------------|------------|-------------|----------------|
| Provide information for each perso the distribution. <b>Complete additi</b>  |   |   |  |                             | •                            |                     | sation in  | connectio   | on with        |
| Indicate whether any compensati  | on was paid, or will                              | be paid, in connect                     | ion with the distribi                        | ution.                      |                              |                     |            |             |                |
| No ✓ Yes   | If yes, indicate                                  | number of person                        | ons compensate                               | d.                          | 5                            |                     |            |             |                |
| a) Name of person compen   | sated and registra                                | ation status                            |  |                             |                              |                     |            |             |                |
| Indicate whether the person compe  | ensated is a registrar                            | nt.                                     | ☐ No   | ✓ Ye                        | es                           |                     |            |             |                |
| If the person compensated is an inc  | dividual, provide the                             | name of the indivi                      | dual.  |                             |                              |                     |            |             |                |
| Full legal name of individu  | ıal   |   |  |                             |                              |                     |            |             |                |
|  | Fai   | mily name                               | First  | given name                  | 1                            | Seco                | ndary give | en names    |                |
| If the person compensated is not a   | n individual, provide                             | the following infor                     | mation.                                      |                             |                              |                     |            |             |                |
| Full legal name of   | non-individual L                                  | ahona Capital Ir                        | IC.  |                             |                              |                     |            |             |                |
| Firm   | NRD number  | 4 7 6                                   | 2 0  |                             | (if app                      | olicable)           |            |             |                |
| Indicate whether the person compe  | ensated facilitated th                            | e distribution thro                     | ugh a funding porto                          | al or an inte               | ernet-based                  | portal.             | <b>✓</b>   | No [        | ] Yes          |
| b) Business contact informa  | ation   |   |  |                             |                              |                     |            |             |                |
| If a firm NRD number is not provid   | led in Item 8 (a), pro                            | vide the business co                    | ontact information                           | of the pers                 | on being coi                 | mpensated.          |            |             |                |
| Street address   |   |   |  |                             |                              |                     |            |             |                |
| Municipality   |   |   |  | Prov                        | ince/State                   |                     |            |             |                |
| Country  |   |   | Po   | ostal code                  | e/Zip code                   |                     |            |             |                |
| Email address  |   |   |  | Telephor                    | ne number                    |                     |            |             |                |
| c) Relationship to issuer or   | investment fund r                                 | nanager                                 |  |                             |                              |                     |            |             |                |
| Indicate the person's relationship w<br>the Instructions and the meaning o   |   |   |  |                             |                              |                     | nnected'   | " in Part E | 3(2) of        |
| Connect with the issuer  | or investment fund r                              | nanager                                 | I  | nsider of th                | ne issuer (ot                | her than an         | investm    | ent fund)   |                |
| Director or officer of the   | investment fund or i                              | nvestment fund ma                       | anager                                       | Employee o                  | of the issuer                | or investme         | ent fund   | manager     |                |
| None of the above  |   |   |  |                             |                              |                     |            |             |                |
| d) Compensation details  |   |   |  |                             |                              |                     |            |             |                |
| Provide details of all compensation<br>Canadian dollars. Include cash com-<br>incidental to the distribution, such a<br>allocation arrangements with the d | missions, securities-<br>as clerical, printing, l | based compensatic<br>egal or accounting | n, gifts, discounts c<br>services. An issuer | or other cor<br>is not requ | npensation.<br>ired to ask f | Do not repo         | rt payme   | ents for se | ervices        |
| Cash commissions paid  | 6,400   | .00                                     |  | Sec                         | urity code 1                 | Security co         | ode 2      | Security co | de 3           |
| Value of all securities distributed as compensation <sup>4</sup>   |   |   | Security codes                               |                             |                              |                     |            |             |                |
| •  | ns of warrants, optic                             | ns or other rights                      |  |                             |                              |                     |            |             |                |
| Other compensation <sup>5</sup>  |   | Describe                                |  |                             |                              |                     |            |             |                |
| Total compensation paid  | 6,400   | 00                                      |  |                             |                              |                     |            |             |                |
| Check box if the perso   | n will or may receiv                              | e any deferred con                      | npensation (descril                          | be the tern                 | ns below)                    |                     |            |             |                |
|  |   |   |  |                             |                              |                     |            |             |                |
| <sup>4</sup> Provide the aggregate value of a  | Il securities distribut                           | ed as compensation                      | on, <u>exc</u> ludina optio                  | ns, warran                  | ts or other r                | ights exercis       | sable to   | acquire     |                |
| additional securities of the issuer. rights exercisable to acquire additional securities of the issuer.  | Indicate the securit                              | y codes for all sec                     | urities distributed a                        | s compens                   | sation, <u>inclu</u>         | <u>ding</u> options | s, warran  | ts or othe  | <del>?</del> r |

<sup>&</sup>lt;sup>5</sup>Do not include deferred compensation.

| a) Name of person compensate   | ed and registration status            |                      |                        |                      |                     |
|--|---------------------------------------|----------------------|------------------------|----------------------|---------------------|
| Indicate whether the person compensa   | ted is a registrant.                  | ☐ No                 | ✓ Yes                  |                      |                     |
| If the person compensated is an individ  | lual, provide the name of the indiv   | dual.                |                        |                      |                     |
| Full legal name of individual  |                                       |                      |                        |                      |                     |
| •  | Family name                           | First                | given name             | Secondary (          | given names         |
| If the person compensated is not an inc  | dividual, provide the following info  | rmation.             |                        |                      |                     |
| Full legal name of non   | -individual Pinnacle Wealth I         | Brokers Inc.         |                        |                      |                     |
| Firm NR  | D number 3 1 7                        | 4 0                  | (if ap                 | oplicable)           |                     |
| Indicate whether the person compensa   | ted facilitated the distribution thro | ugh a funding porta  | l or an internet-base  | d portal. ✓          | No Yes              |
| b) Business contact information  | 1                                     |                      |                        |                      |                     |
| If a firm NRD number is not provided in  | n Item 8 (a), provide the business c  | ontact information ( | of the person being co | ompensated.          |                     |
| Street address   |                                       |                      |                        |                      |                     |
| Municipality   |                                       |                      | Province/State         | Э                    |                     |
| Country  |                                       | Po                   | ostal code/Zip code    | e                    |                     |
| Email address  |                                       |                      | Telephone numbe        | r                    |                     |
| c) Relationship to issuer or inve  | estment fund manager                  |                      |                        |                      |                     |
| Indicate the person's relationship with the Instructions and the meaning of "co  |                                       |                      |                        |                      | ed" in Part B(2) of |
| Connect with the issuer or in  |                                       | · · · <u></u>        | nsider of the issuer ( |                      | tment fund)         |
| Director or officer of the inve  | stment fund or investment fund m      | anager               | mployee of the issue   | er or investment fun | nd manager          |
| ✓ None of the above  |                                       |                      |                        |                      |                     |
| d) Compensation details  |                                       |                      |                        |                      |                     |
| Provide details of all compensation paid   |                                       |                      |                        |                      |                     |
| Canadian dollars. Include cash commissincidental to the distribution, such as cl |                                       |                      |                        |                      |                     |
| allocation arrangements with the direct  | ors, officers or employees of a non   | -individual compens  | sated by the issuer.   |                      | ,                   |
| Cash commissions paid  | 57,789.20                             |                      | Security code 1        | Security code 2      | Security code 3     |
| Value of all securities distributed as compensation <sup>4</sup>                 |                                       | Security codes       |                        |                      |                     |
|  | warrants, options or other rights     |                      |                        |                      |                     |
| Other compensation <sup>5</sup>  | Describe                              |                      |                        |                      |                     |
| Total compensation paid  | 57,789.20                             |                      |                        |                      |                     |
| Check box if the person wi   | Il or may receive any deferred cor    | npensation (describ  | be the terms below)    |                      |                     |
|  |                                       |                      |                        |                      |                     |
| <sup>4</sup> Provide the aggregate value of all se                               | curities distributed as compensati    | on excluding ontion  | ne warrante or other   | riahts exercisable   | to cogniro          |
| additional securities of the issuer. Indi  |                                       |                      |                        |                      |                     |

| a) Name of person compe  | ensated and regi   | stration status                               |                                       |                                   |                     |   |  |                            |
|--|--|---|---------------------------------------|-----------------------------------|---------------------|---|--|----------------------------|
| Indicate whether the person compensated is a registrant. No Ves  |  |   |                                       |                                   |                     |   |  |                            |
| If the person compensated is an individual, provide the name of the individual.  |  |   |                                       |                                   |                     |   |  |                            |
| Full legal name of indivi  | dual   |   |                                       |                                   |                     |   |  |                            |
|  |  | Family name                                   |                                       | First giv                         | iven name           | e                                       | Secondary (                                      | given names                |
| If the person compensated is not an individual, provide the following information.   |  |   |                                       |                                   |                     |   |  |                            |
| Full legal name of   | Full legal name of non-individual Raintree Financial Solutions Inc.      |   |                                       |                                   |                     |   |  |                            |
| Fir  | Firm NRD number 3 2 4 1 0 (if applicable)                                |   |                                       |                                   |                     |   |  |                            |
| Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal.  Ves  |  |   |                                       |                                   |                     |   |  |                            |
| b) Business contact inforr   | nation   |   |                                       |                                   |                     |   |  |                            |
| If a firm NRD number is not prov   | vided in Item 8 (a),   | provide the business                          | contact info                          | rmation of                        | f the pers          | son being cor                           | mpensated.                                       |                            |
| Street address   |  |   |                                       |                                   |                     |   |  |                            |
| Municipality   |  |   |                                       |                                   | Prov                | /ince/State                             |  |                            |
| Country  |  |   |                                       | Pos                               | stal code           | e/Zip code                              |  |                            |
| Email address  |  |   |                                       | Т                                 | elepho              | ne number                               |  |                            |
| c) Relationship to issuer of   | or investment fun  | d 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 issuer or investment fund manager  Insider of the issuer (other than an investment fund) |  |   |                                       |                                   |                     |   |  |                            |
| _  |  | -   |                                       |                                   |                     | ,                                       |  | ,                          |
| ☐ Director or officer of th  ✓ None of the above   | e invesiment iuna  | or investment rund r                          | nanayei                               |                                   | прюуее              | oi trie issuei                          | or investment fun                                | u manager                  |
|  |  |   |                                       |                                   |                     |   |  |                            |
| d) Compensation details  |  | id to the many idea                           | - 4:6: - 4: - 14                      | 0(-) :                            |                     | الد داد داد داد                         | -tuibutian Dusuida                               | -11                        |
| Provide details of all compensation<br>Canadian dollars. Include cash continuities incidental to the distribution, such allocation arrangements with the Cash commissions pai  | ommissions, securit<br>h as clerical, printir<br>e directors, officers o | ies-based compensat<br>ng, legal or accountin | ion, gifts, dis<br>g services. A      | scounts or a                      | other co            | mpensation.<br>uired to ask fo          | Do not report pay                                | ments for services         |
| Cash commissions par   | u 31,0   | 507.60  |                                       |                                   | Sec                 | curity code 1                           | Security code 2                                  | Security code 3            |
| Value of all securities<br>distributed as compensation   |  |   | Security co                           | odes                              |                     |   |  |                            |
| Describe te  | rms of warrants, o   | ptions or other rights                        | 3                                     |                                   |                     |   |  |                            |
| Other compensation   | 5  | Describe                                      | •                                     |                                   |                     |   |  |                            |
| Total compensation pai   | d 31,8   | 07.60   |                                       |                                   |                     |   |  |                            |
| ✓ Check box if the person will or may receive any deferred compensation (describe the terms below)   |  |   |                                       |                                   |                     |   |  |                            |
| If term of Partnersl<br>month extension p<br>subscribers of Seri   | eriod of up to 1.5   |   |                                       |                                   |                     |   |  |                            |
| <sup>4</sup> Provide the aggregate value of<br>additional securities of the issue<br>rights exercisable to acquire ad<br><sup>5</sup> Do not include deferred compe  | er. Indicate the sec<br>Iditional securities d                           | urity codes for all se                        | tion, <u>exclud</u><br>curities disti | i <u>ng</u> options<br>ributed as | s, warrar<br>compen | nts or other n<br>nsation, <u>inclu</u> | ights exercisable i<br><u>ding</u> options, warr | o acquire<br>ants or other |

| a) Name of person compensated and registration status   |  |  |  |  |                      |  |  |  |
|---|--|--|--|--|----------------------|--|--|--|
| Indicate whether the person compensated is a registrant.  No Ves  |  |  |  |  |                      |  |  |  |
| If the person compensated is an individual, provide the name of the individual.   |  |  |  |  |                      |  |  |  |
| Full legal name of individual   |  |  |  |  |                      |  |  |  |
|   | 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 Stevloc Management Inc.   |  |  |  |  |                      |  |  |  |
| Firm NRD number   | Firm NRD number 4 6 9 3 0 (if applicable)    |  |  |  |                      |  |  |  |
| Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal.  Ves   |  |  |  |  |                      |  |  |  |
| b) Business contact information   |  |  |  |  |                      |  |  |  |
| If a firm NRD number is not provided in Item 8 (a),   | provide the business co                      | ontact information                           | of the person being                        | g compensated.                                     |                      |  |  |  |
| Street address  |  |  |  |  |                      |  |  |  |
| Municipality  |  |  | Province/St                                | ate  |                      |  |  |  |
| Country   |  | Po   | ostal code/Zip co                          | ode  |                      |  |  |  |
| Email address   |  |  | Telephone num                              | ber  |                      |  |  |  |
| c) Relationship to issuer or investment fur   | nd manager                                   |  |  |  |                      |  |  |  |
| Indicate the person's relationship with the issuer or<br>the Instructions and the meaning of "control" in se  |  |  |  |  | ted" in Part B(2) of |  |  |  |
| Connect with the issuer or investment fu  |  | · · · <u>—</u>                               |  | r (other than an inves                             | stment fund)         |  |  |  |
| Director or officer of the investment fund  |  | _  |  | suer or investment fu                              |                      |  |  |  |
| <u></u>   |  |  |  | such of invocations to                             | na managor           |  |  |  |
| ✓ None of the above   |  |  |  |  |                      |  |  |  |
| d) Compensation details   |  |  |  |  |                      |  |  |  |
| Provide details of all compensation paid, or to be portion can dollars. Include cash commissions, securification incidental to the distribution, such as clerical, printical allocation arrangements with the directors, officers | ies-based compensationg, legal or accounting | n, gifts, discounts c<br>services. An issuer | or other compensat<br>is not required to a | ion. Do not report pay<br>isk for details about, c | ments for services   |  |  |  |
|   | 332.00                                       | matriduat compen                             | -  |  |                      |  |  |  |
|   |  |  | Security code                              | e 1 Security code 2                                | Security code 3      |  |  |  |
| Value of all securities distributed as compensation <sup>4</sup>  | ;  | Security codes                               |  |  |                      |  |  |  |
| Describe terms of warrants, or  | ptions or other rights                       |  |  |  |                      |  |  |  |
| Other compensation <sup>5</sup>   | Describe                                     |  |  |  |                      |  |  |  |
| Total compensation paid 22,8  | 332.00                                       |  |  |  |                      |  |  |  |
| Check box if the person will or may re-   | ceive any deferred con                       | npensation (descri                           | be the terms belov                         | v)   |                      |  |  |  |
|   |  |  |  |  |                      |  |  |  |
| <sup>4</sup> Provide the aggregate value of all securities dist.  | ibuted as compensation                       | on, excludina optio                          | ns, warrants or oth                        | ner rights exercisable                             | to acquire           |  |  |  |
| additional securities of the issuer. Indicate the sec<br>rights exercisable to acquire additional securities<br><sup>5</sup> Do not include deferred compensation.  | curity codes for all sect                    |  |  |  |                      |  |  |  |

|  | bensated and registrati  | on status  | a) Name of person compensated and registration status  |  |   |  |  |  |
|--|--|--|--|--|---|--|--|--|
| Indicate whether the person compensated is a registrant. No Ves  |  |  |  |  |   |  |  |  |
| If the person compensated is an individual, provide the name of the individual.  |  |  |  |  |   |  |  |  |
| Full legal name of indiv   | /idual   |  |  |  |   |  |  |  |
|  | Famil  | y name   | First  | given name   | Secondary given names   |  |  |  |
| If the person compensated is n   | ot an individual, provide th   | ne following info  | mation.  |  |   |  |  |  |
| Full legal name  | of non-individual Tri  | View Capital L   | td.  |  |   |  |  |  |
| F  | Firm NRD number 4 0 8 3 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), provid   | de the business c  | ontact information   | of the person being co   | mpensated.  |  |  |  |
| Street address   |  |  |  |  |   |  |  |  |
| Municipality   |  |  |  | Province/State   |   |  |  |  |
| Country  |  |  | ]<br>  P(  | ostal code/Zip code  |   |  |  |  |
| Email address  |  |  | ]  | Telephone number   |   |  |  |  |
| c) Relationship to issuer  | or investment fund ma  | anager   |  |  |   |  |  |  |
|  |  |  | nger (select all that  | apply). Refer to the me  | eaning of "connected" in Part B(2) of   |  |  |  |
| the Instructions and the meani   |  |  |  |  |   |  |  |  |
| Connect with the issu  | uer or investment fund ma  | nager  |  | nsider of the issuer (o  | ther than an investment fund)   |  |  |  |
| Director or officer of   | he investment fund or inv  | estment fund m   | anager 🔲 E   | Employee of the issue  | r or investment fund manager  |  |  |  |
| None of the above  |  |  |  |  |   |  |  |  |
| d) Compensation details  |  |  |  |  |   |  |  |  |
|  |  |  |  |  | istribution. 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  |  |  |  |  |   |  |  |  |
| incidental to the distribution, su   |  | al or accounting   |  |  |   |  |  |  |
| incidental to the distribution, su<br>allocation arrangements with th  | ch as clerical, printing, leg  |  | services. An issuer  | is not required to ask f   |   |  |  |  |
|  | ch as clerical, printing, leg<br>ne directors, officers or em  | ployees of a non-  | services. An issuer  | is not required to ask f   |   |  |  |  |
| allocation arrangements with th  | nch as clerical, printing, legate directors, officers or empaid 9,432.0  | ployees of a non-  | services. An issuer  | is not required to ask to sak to ask to a                          | or details about, or report on, internal  |  |  |  |
| allocation arrangements with the Cash commissions particles of all securities distributed as compensation  | nch as clerical, printing, legate directors, officers or empaid 9,432.0  | ployees of a non-  | services. An issuer<br>-individual compen  | is not required to ask to sak to ask to a                          | or details about, or report on, internal  |  |  |  |
| allocation arrangements with the Cash commissions particles of all securities distributed as compensation  | nch as clerical, printing, legale directors, officers or emplaid 9,432.0  es on 4 terms of warrants, options   | ployees of a non-  | services. An issuer<br>-individual compen  | is not required to ask to sak to ask to a                          | or details about, or report on, internal  |  |  |  |
| allocation arrangements with the Cash commissions parallel Value of all securities distributed as compensation discribered.  | nch as clerical, printing, legate directors, officers or emplaid 9,432.0  es on 4  terms of warrants, options  | ployees of a non-  o  s or other rights  Describe  | services. An issuer<br>-individual compen  | is not required to ask to sak to ask to a                          | or details about, or report on, internal  |  |  |  |
| allocation arrangements with the Cash commissions parallel Value of all securities distributed as compensation Describes Other compensation parallel Compensation parallel Compensation parallel Cash Cash Cash Cash Cash Cash Cash Cash   | nch as clerical, printing, legate directors, officers or emplaid 9,432.0  es on 4  terms of warrants, options  | ployees of a non-  | services. An issuer<br>individual compen<br>Security codes   | is not required to ask to sated by the issuer.  Security code 1  | or details about, or report on, internal  |  |  |  |
| allocation arrangements with the Cash commissions parallel Value of all securities distributed as compensation Describes Other compensation parallel Compensation parallel Compensation parallel Cash Cash Cash Cash Cash Cash Cash Cash   | nch as clerical, printing, legal directors, officers or emplaid 9,432.0  es on terms of warrants, options on the second of the s | ployees of a non-  | services. An issuer<br>individual compen<br>Security codes   | is not required to ask to sated by the issuer.  Security code 1  | or details about, or report on, internal  |  |  |  |
| allocation arrangements with the Cash commissions parallel Value of all securities distributed as compensation Describes Other compensation parallel Compensation parallel Compensation parallel Cash Cash Cash Cash Cash Cash Cash Cash   | nch as clerical, printing, legale directors, officers or emplaid 9,432.0  es on terms of warrants, options on the second of the  | ployees of a non-  | services. An issuer<br>individual compen<br>Security codes   | is not required to ask to sated by the issuer.  Security code 1  | or details about, or report on, internal  |  |  |  |
| allocation arrangements with the Cash commissions paragraph of all securiting distributed as compensation.  Describe of the compensation paragraph of the period of the pe | nch as clerical, printing, legate directors, officers or emplaid 9,432.0  es on 4  terms of warrants, options of terms of warrants, options of terms of warrants, options of terms of warrants of terms of warrants, options of all securities distributed of all securities distributed of all securities distributed on the distributed of the | ployees of a non- one of a non | services. An issuer individual compenservices. Security codes  | s not required to ask to sated by the issuer.  Security code 1  be the terms below)  Ins., warrants or other in the sate of the terms.   | Security code 2 Security code 3  Security code 2 Security code 3  Graphics exercisable to acquire   |  |  |  |
| allocation arrangements with the Cash commissions paragraph of all securities distributed as compensation Describe.  Other compensation paragraph of the paragraph of the aggregate value additional securities of the issurights exercisable to acquire as  | nch as clerical, printing, legale directors, officers or emplaid 9,432.0  es on 4  terms of warrants, options and 9,432.0  erson will or may receive a conful securities distributed and and securities of the diditional securities of the  | ployees of a non- one of a non | services. An issuer individual compenservices. Security codes  | s not required to ask to sated by the issuer.  Security code 1  be the terms below)  Ins., warrants or other in the sate of the terms.   | Security code 2 Security code 3   |  |  |  |
| allocation arrangements with the Cash commissions paragraph of all securities distributed as compensation.  Describe of the compensation paragraph of the paragraph of the aggregate value additional securities of the issue  | nch as clerical, printing, legale directors, officers or emplaid 9,432.0  es on 4  terms of warrants, options and 9,432.0  erson will or may receive a conful securities distributed and and securities of the diditional securities of the  | ployees of a non- one of a non | services. An issuer individual compenservices. Security codes  | s not required to ask to sated by the issuer.  Security code 1  be the terms below)  Ins., warrants or other in the sate of the terms.   | Security code 2 Security code 3  Security code 2 Security code 3  Graphics exercisable to acquire   |  |  |  |
| allocation arrangements with the Cash commissions paragraph of all securities distributed as compensation Describe.  Other compensation paragraph of the paragraph of the aggregate value additional securities of the issurights exercisable to acquire as  | ach as clerical, printing, legale directors, officers or empaid 9,432.0  es on 4  terms of warrants, options and 9,432.0  erson will or may receive a conful securities distributed user. Indicate the security additional securities of the pensation.  | ployees of a non- o o o o o o o o o o o o o o o o o o  | services. An issuer individual compensation (descripensation) (des | is not required to ask to sated by the issuer.  Security code 1  be the terms below)  Ins., warrants or other is compensation, included. | Security code 2 Security code 3  Security code 2 Security code 3  Graphics exercisable to acquire   |  |  |  |
| allocation arrangements with the Cash commissions particle.  Value of all securities distributed as compensation.  Describe of the compensation particle.  Total compensation particle.  Check box if the particle.  AProvide the aggregate value additional securities of the issuing the compensation of the issuing the iss | ch as clerical, printing, legale directors, officers or emplaid 9,432.0  es on 4  terms of warrants, options and 9,432.0  erson will or may receive a confusional securities distributed user. Indicate the security additional securities of the pensation.   | ployees of a non- o o o o o o o o o o o o o o o o o o  | services. An issuer individual compensation (description, excluding option unities distributed at the other contents of the other co | is not required to ask to sated by the issuer.  Security code 1  be the terms below)  Ins., warrants or other is compensation, included. | Security code 2 Security code 3  Security code 2 Security code 3  Graphics exercisable to acquire   |  |  |  |
| allocation arrangements with the Cash commissions particular Cash commissions particular Value of all securitic distributed as compensation Described Other compensation Described Total compensation particular Check box if the period Check box if  | ch as clerical, printing, legale directors, officers or emplaid 9,432.0  es on 4  terms of warrants, options on 5  aid 9,432.0  erson will or may receive a conful securities distributed user. Indicate the security additional securities of the pensation.  ECCUTIVE OFFICERS  It fund, do not complete   | ployees of a non- o o o o o o o o o o o o o o o o o o  | services. An issuer individual compensation (descripensation) (descripensation), excluding option, excluding option, excluding option on, excluding option of the later 10.  | sated by the issuer.  Security code 1  be the terms below)  ISSUER   | Security code 2 Security code 3 Security code 2 Security code 3 Security code 4 Security code 4 Security code 4 Security code 4 Security code 5 Security code 5 Security code 5 Security code 5 Security code 6 Security code |  |  |  |
| Allocation arrangements with the Cash commissions provided in the Cash commissions provided in the Cash commissions provided in the Cash compensation of the Cash compensat | ch as clerical, printing, legale directors, officers or emplaid 9,432.0  es on 4  terms of warrants, options on 5  aid 9,432.0  erson will or may receive a conful securities distributed user. Indicate the security additional securities of the pensation.  ECCUTIVE OFFICERS  It fund, do not complete   | ployees of a non- o o o o o o o o o o o o o o o o o o  | services. An issuer individual compensation (descripensation) (descripensation), excluding option, excluding option, excluding option on, excluding option of the later 10.  | sated by the issuer.  Security code 1  be the terms below)  ISSUER   | Security code 2 Security code 3 Security code 2 Security code 3 Security code 4 Security code 4 Security code 4 Security code 4 Security code 5 Security code 5 Security code 5 Security code 5 Security code 6 Security code |  |  |  |

| 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 issuer  |
| Issuer distributing only eligible foreign securities and the distribution is to permitted clients only <sup>7</sup>  |
| If the issuer is at least one of the above, do not complete Item 9(a) – (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   |
| Provide the following information for each director, executive officer and promoter of the issuer. For locations within Canada, state the province or  |

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 | Family name First given name |         | Secondary given names | Business location of<br>non-individual or<br>residentail<br>jurisdiction of<br>individual | Relationship to issuer (select all that apply) |   |   |
|------------------------------|------------------------------|---------|-----------------------|---|--|---|---|
|                              |                              |         |                       | Province or country   | D  | 0 | Р |
|                              | Gust                         | Elroy   |                       | Ontario   | ✓  | ✓ |   |
|                              | Diab                         | Anthony |                       | Ontario   | ✓  | ✓ |   |
|                              | Osman                        | Abbas   | Ontario               |   | ✓  | ✓ |   |
|                              | Treanor                      | Gavin   | Ontario               |   | ✓  | ✓ |   |
| Newlook Capital Inc.         |                              |         |                       | Ontario   |  |   | ✓ |

## b) Promoter information

If the promoter listed above is not an individual, provide the following information for each director and executive officer of the promoter. For locations within Canada, state the province or territory; otherwise state the country. For "Relationship to promoter", "D" – Director, "O" – Executive Officer.

| 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  | 0 |
| Newlook Capital Inc.         | Gust        | Elroy            |                       | Ontario                                | ✓  | ✓ |
| Newlook Capital Inc.         | Diab        | Anthony          |                       | Ontario                                | ✓  | ✓ |
| Newlook Capital Inc.         | Osman       | Abbas            |                       | Ontario                                | ✓  | ✓ |
| Newlook Capital Inc.         | Treanor     | Gavin            |                       | Ontario                                | ✓  | ✓ |

### c) Residential address of each individual

Complete Schedule 2 of this form providing the full residential address for each individual listed in Item 9(a) and (b) and attach to the completed report. Schedule 2 also requires information to be provided about control persons.

# 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/<br>investment fund manager/agent | Newlook Capital Industrial Services Fund II   |                  |         |                        |    |  |  |
|--|---|------------------|---------|------------------------|----|--|--|
| Full legal name  | Diab Anthony  |                  |         |                        |    |  |  |
|  | Family name   | First given name |         | Secondary given names  |    |  |  |
| Title  | Chief Financial Officer of Newlook Capital Services II Inc., the administrator of the |                  |         |                        |    |  |  |
| Telephone number   | 9053313697  | Email address    | tony@ne | ony@newlookcapital.com |    |  |  |
| Signature  | (s) "Anthony Diab"  |                  | 2020    | 03                     | 25 |  |  |
|  |   |                  | 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 individua  | I 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.