Form 45-106F1 Report of Exempt Distribution

BCSC EDER Reference Number 8870096

ITEM 1 - REPORT TYPE										
✓ New report										
Amended report If amended, provide filing date of report that is being amended (YYYY-MM-DD)										
ITEM 2 - PARTY CERTIFYING THE REPORT										
Indicate the party certifying the report (select only one). For guidance regarding whether an issuer is an investment fund, refer to section 1.1 of National Instrument 81-106 Investment Fund Continuous Disclosure and the companion policy to NI 81-106.										
Investment fund issuer										
✓ Issuer (other than an inves	tment fund)									
Underwriter	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,									
ITEM 3 - ISSUER NAME AND OT	LIED IDENTIFIEDS									
Provide the following information about the		vestment fund, ab	out the fund							
Full legal name	Cielo Waste Solutions		out the juna.							
Previous full legal name	Cloid Wadto Colutions									
If the issuer's name changed in the	e last 12 months, provide most	recent nrevious lea	aal name							
Website	www.cielows.com	Previous leg	1	٥١						
		ha Instructions for	(if applicabl							
If the issuer has a legal entity identifier, pro Legal entity identifier	ovide below. Refer to Part B of t	ne instructions for	the definition (or tegat entity taentifier .						
If two or more issuers distributed a single s	ecurity provide the full legal no	ame(s) of the co-is	 suer(s) other th	an the issuer named above	o					
Full legal name(s) of co-issuer(s)	ecurity, provide the fact tegat he	mne(s) of the co is	(if applicable		~					
5 (, , , , , , , , , , , , , , , , , , ,				,						
ITEM 4 - UNDERWRITER INFORM	1ATION									
If an underwriter is completing the report,	provide the underwriter's full le	gal name and firn	n NRD number.		_					
Full legal name										
Firm NRD number		(if ap	oplicable)							
If the underwriter does not have a firm NR	D number, provide the head off	ice contact inform	ation of the un	derwriter.						
Street address	Street address									
Municipality	pality Province/State									
Country		Postal co	de/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 3 2 5 1 9 0										
If the issuer is in the mining industry, indicate the stage of operations. This does not apply to issuers that provide services to issuers operating in the mining industry. Select the category that best describes the issuer's stage of operations.										
Exploration Development Production										
Is the issuer's primary business to invest all or substantially all of its assets in any of the following? If yes, select all that apply.										
☐ Mortgages ☐ Real estate ☐ Commercial/business debt ☐ Consumer debt ☐ Private companies										
☐ Cryptoassets										
b) Number of employees										
Number of employees:										
c) SEDAR profile number										
Does the issuer have a SEDAR profile?										
No ✓ Yes If yes, provide SEDAR profile number 0 0 0 3 1 7 8 9										
If the issuer does not have SEDAR profile complete item 5(d) - (h).										
d) Head office address										
Street address Province/State										
Municipality Postal code/Zip code										
Country Telephone number										
e) Date of formation and financial year-end										
Date of formation Financial year-end										
YYYY MM DD MM DD										
f) Reporting issuer status										
Is the issuer a reporting issuer in any jurisdication of Canada? No Yes										
If yes, select the jurisdictions of Canada in which the issuer is a reporting issuer.										
AII AB BC MB NB NL NT										
NS NU ON PE QC SK YT										
g) Public listing status										
If the issuer has a CUSIP number, provide below (first 6 digits only)										
CUSIP number										
If the issuer is publicly listed, provide the name of the exchange on which the issuer's equity securities primarily trade. Provide only the name of an										
exchange and not a trading facility such as, for example, an automated trading system. Exchange name										
h) Size of issuer's assets										

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

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

ITEM 6 - INVESTMENT	FUND ISSUER INFORMATION									
If the issuer is an investment fund, provide the following information.										
a) Investment fund ma	anager information									
Full legal name										
Firm NRD number	(if applicable)									
If the investment fund mand	ager does not have a firm NRD number, provide the head office contact information of the investment fund manager.									
Street address										
Municipality	Province/State									
Country	Postal code/Zip code									
Telephone number	Website (if applicable)									
b) Type of investment	fund									
Type of investment fund tha	it most accurately identifies the issuer (select only one) .									
Money market	☐ Equity ☐ Fixed income ☐ Balanced									
Alternative strate	gies Cryptoasset Other (describe)									
Indicate whether one or bot	h of the following apply to the investment fund .									
Invests primarily in	n other investment fund issuers									
☐ Is a UCITs Fund¹										
	tive Investment of Transferable Securities funds (UCITs Funds) are investment funds regulated by the European Union of ollective investment schemes to operate throughout the EU on a passport basis on authorization from one member state.									
c) Date of formation a	nd financial year-end of the investment fund									
Date of forma	tion Financial year-end MM DD									
d) Reporting issuer st	atus of the investment fund									
Is the investment fund a rep	orting issuer in any jurisdication of Canada? No Yes									
If yes, select the jurisdictions	s of Canada in which the investment fund is a reporting issuer.									
AII	AB BC MB NB NL NT									
☐ NS ☐	NU ON PE QC SK T									
e) Public listing status	s of the investment fund									
If the investment fund has a	CUSIP number, provide below (first 6 digits only)									
	CUSIP number									
	blicly listed, provide the name of the exchange on which the investment fund's securities primarily trade. Provide only the									
_	name of an exchange and not a trading facility such as, for example, an automated trading system. Exchange name									
-	AV) of the investment fund									
	investment fund as of the date of the most recent NAV calculation (Canadian \$).									
\$0 to under \$5M	\$5M to under \$25M \$25M to under \$100M									
\$100M to under \$500	DM S500M to under \$1B S1B or over Date of NAV calculation:									
	YYYY MM DD									

ITEM 7 - INFORMATION ABOUT THE DISTRIBUTION

If an issuer located outside of Canada completes a distribution in a jurisdiction of Canada, include in Item 7 and Schedule 1 information about purchasers resident in that jurisdiction of Canada only. Do not include in Item 7 securities issued as payment of commissions or finder's fees in connection with the distribution, which must be disclosed in Item 8. The information provided in Item 7 must reconcile with the information provided in Schedule 1 of the report.

a)	Currency											
Select the currency or currencies in which the distribution was made. All dollar amounts provided in the report must be in Canadian dollars.												
√ (✓ Canadian dollar US dollar Dther (describe)											
b)	Distribution date(s)											
as b	State the distribution start and end dates. If the report is being filed for securities distributed on only one distribution date, provide the distribution date as both the start and end dates. If the report is being filed for securities distributed on a continuous basis, include the start and end dates for the distribution period covered by the report.											
	Start date	2019	07	09	End date	2019	07	16				
	•	YYYY	ММ	DD		YYYY	ММ	DD	•			

c) Detailed purchaser information

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

d) Types of securities distributed

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

						Canadian \$		
Security CUSIP number (if applicable)			Description of security	Number of securities	Single or lowest price	Highest price	Total amount	
U	В	S		Units consisting of one \$10,000 convertible debenture and 5,000 warrants, together with 2 years prepaid interest payable in common shares	77.60	10,000.000	10,000.000	776,000.00
U	В	s		Units consisting of one \$10,000 convertible debenture and 5,000 warrants, together with 2 years prepaid interest payable in common shares	153.00	10,000.000	10,000.000	1,530,000.00
U	В	S			0.00	0.0000	0.0000	0.00
U	В	S			0.00	0.0000	0.0000	0.00
С	М	S	17178D	Common Shares	1,660,400.00	0.1000	0.1000	166,040.00

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.

							<u> </u>			· · · · · · · · · · · · · · · · · · ·														
Convertible / exchangeable security code		Underlying security code		Underlying security code																		Expiry date (YYYY- MM-DD)	Conversion ratio	Describe other items (if applicable)
				Lowest	Highest																			
С	V	D	С	М	S	0.0600	0.1000	2019-07-09	\$0.06 per dollar of principal, \$0.10 per dollar of	2 years of prepaid interest paid by the issuance of common shares at \$0.10 per common share on closing														
С	V	D	С	М	S	0.0600	0.1000	2019-07-16	\$0.06 per dollar of principal, \$0.10 per dollar of	2 years of prepaid interest paid by the issuance of common shares at \$0.10 per common share on closing														

W	N	Т	С	M	S	0.1000	0.1000	2019-07-09	1 full warrant for 1 common share	In the event that the market price remains at or above \$0.50 for 5 or more consecutive days, the term of the warrants may be reduced upon notice to the holders (after 4 months and a day from issuance).
W	N	Т	С	M	S	0.2500	0.2500	2023-07-16	1 full warrant for 1 common share	In the event that the market price remains at or above \$0.50 for 5 or more consecutive days, the term of the warrants may be reduced upon notice to the holders (after 4 months and a day from issuance).

f) Summary of the distribution by jurisdiction and exemption

State the total dollar amount of securities distributed and the number of purchasers for each jurisdiction of Canada and foreign jurisdiction where a purchaser resides and for each exemption relied on in Canada for that distribution. However, if an issuer located outside of Canada completes a distribution in a jurisdiction of Canada, include distributions to purchasers resident in that jurisdiction of Canada only.

This table requires a separate line item for: (i) each jurisdiction where a purchaser resides, (ii) each exemption relied on in the jurisdiction where a purchaser resides, if a purchaser resides in a jurisdiction of Canada, and (iii) each exemption relied on in Canada, if a purchaser resides in a foreign jurisdiction.

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

Province or country	Exemption relied on	Number of unique ²⁸ purchasers	Total amount (Canadian \$)				
United States	Other	1	250,000.00				
British Columbia	NI 45-106 2.3 [Accredited investor]	2	31,000.00				
British Columbia	NI 45-106 2.5 [Family, friends and business associates]	1	10,000.00				
Ontario	NI 45-106 2.14 [Securities for debt]	1	20,000.00				
Alberta	NI 45-106 2.3 [Accredited investor]	15	868,000.00				
Alberta	NI 45-106 2.5 [Family, friends and business associates]	2	57,000.00				
Ontario	NI 45-106 2.10 [Minimum amount investment]	1	600,000.00				
Ontario	NI 45-106 2.3 [Accredited investor]	2	40,000.00				
Alberta	Alberta NI 45-106 2.14 [Securities for debt]						
	Total dollar amount of se	curities distributed	2,472,040.00				
	Total number of unique purchasers ^{2b}	31					

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

g) Net proceeds to the investment fund by jurisdiction

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

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

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

²⁶ 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 delivered (YYYY-MM-DD)

TEM 8 - COMPENSATION INFORMATION											
Provide information for each person (as defined in NI 45-106) to whom the issuer directly provides, or will provide, any compensation in connection with the distribution. Complete additional copies of this page if more than one person was, or will be, compensated.											
Indicate whether any compensation was paid, or will be paid, in connection with the distribution.											
No ✓ Yes If yes, indicate number of persons compensated.											
a) Name of person compens	ated and regis	tration stat	us								
Indicate whether the person compe	nsated is a regist	ant.		☐ No	v	✓ Yes					
If the person compensated is an inc	If the person compensated is an individual, provide the name of the individual.										
Full legal name of individu	Full legal name of individual										
	- 1	amily name			First give	n name	Sec	condary given names			
If the person compensated is not ar	individual, provi	de the follow	ing infor	mation.							
Full legal name of	non-individual	Retire Firs	t Ltd.								
Firm	NRD number	2 2	5	8	0	(if a	applicable)				
Indicate whether the person compe	nsated facilitated	the distribut	tion throu	ıgh a fundi	ng portal or	an internet-bas	ed portal.	✓ No ☐ Yes			
b) Business contact informa	tion										
If a firm NRD number is not provide	ed in Item 8 (a), p	rovide the bi	usiness co	ontact infor	mation of th	ne person being	compensated.				
Street address											
Municipality						Province/Sta	te				
Country					Posta	ıl code/Zip cod	de				
Email address					Tel	ephone numb	er				
c) Relationship to issuer or i	nvestment fund	l manager									
Indicate the person's relationship w the Instructions and the meaning o								connected" in Part B(2) of			
✓ Connect with the issuer of	r investment fun	d manager			Insid	er of the issuer	(other than a	n investment fund)			
Director or officer of the i	nvestment fund o	r investmen	t fund ma	anager	Empl	loyee of the issu	uer or investm	nent fund manager			
None of the above											
d) Compensation details											
Provide details of all compensation Canadian dollars. Include cash com- incidental to the distribution, such a allocation arrangements with the di	missions, securitie s clerical, printing	es-based com g, legal or ac	npensatio counting	n, gifts, dis services. A	counts or oti n issuer is no	her compensation ot required to as	n. Do not rep	ort payments for services			
Cash commissions paid	43,44	10.00				Security code	1 Security	code 2 Security code 3			
Value of all securities distributed as compensation ⁴	43,44	10.00	\$	Security co	des	W N 7	г				
Describe term	s of warrants, op	tions or othe	er rights	Exercisa	able at \$0.	10 for 48 mon	ths.				
Other compensation ⁵		D	escribe								
Total compensation paid											
Check box if the person will or may receive any deferred compensation (describe the terms below)											
additional securities of the issuer.	⁴ Provide the aggregate value of all securities distributed as compensation, <u>excluding</u> options, warrants or other rights exercisable to acquire additional securities of the issuer. Indicate the security codes for all securities distributed as compensation, <u>including</u> options, warrants or other rights exercisable to acquire additional securities of the issuer.										

not include deferred compensation

a) Name of person compe	ensated and regis	tration status								
Indicate whether the person com	npensated is a regist	rant.	✓ No	Yes						
If the person compensated is an individual, provide the name of the individual.										
Full legal name of indivi	dual									
		Family name	First giv	ven name	Secondary g	jiven names				
If the person compensated is not an individual, provide the following information.										
Full legal name	of non-individual	Merchant Equities	Capital Corp.							
Fii	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 inforr	mation									
If a firm NRD number is not pro	vided in Item 8 (a), p	provide the business co	ontact information of	the person being com	pensated.					
Street address F	Private, ask issue	 r								
Municipality F	Private, ask issue	<u> </u>		Province/State	Alberta					
Country	Canada		Pos	tal code/Zip code	T2R 1J6					
Email address			Т.	elephone number						
c) Relationship to issuer or investment fund manager										
Indicate the person's relationship with the issuer or investment fund manager (select all that apply). Refer to the meaning of "connected" in Part B(2) of										
the Instructions and the meaning	-		· · · <u></u>							
Connect with the issue	er or investment fun	a manager	ins	ider of the issuer (oth	ier than an invest	ment funa)				
Director or officer of the	ne investment fund o	or investment fund ma	anager	nployee of the issuer	or investment fun	d manager				
✓ None of the above										
d) Compensation details										
Provide details of all compensation										
Canadian dollars. Include cash co incidental to the distribution, suc										
allocation arrangements with the										
Cash commissions pai	id 11,68	80.00		Security code 1	Security code 2	Security code 3				
Value of all securities	1169	80.00	Security codes	WNT						
distributed as compensation	'	30.00	-	0 40 for 40 months						
		otions or other rights	Exercisable at \$0	0.10 for 48 months.						
Other compensation		Describe								
Total compensation pai	id									
Check box if the per	son will or may rece	eive any deferred con	npensation (describe	the terms below)						
⁴ Provide the aggregate value of	f all securities distril	buted as compensation	on excluding ontions	s warrants or other ric	ahts exercisable t	o acquire				
additional securities of the issue rights exercisable to acquire ad	er. Indicate the secน	ırity codes for all secu								
Do not include deferred compe		i uio issuot.								

a) Name of person compensated and	d registration status										
Indicate whether the person compensated is a	registrant.	☐ No	✓ Yes								
If the person compensated is an individual, provide the name of the individual.											
Full legal name of individual											
	Family name	First given name Secondary given names									
If the person compensated is not an individuo	l, provide the following info	rmation.									
Full legal name of non-indiv	idual ECHELON WEAI	TH PARTNERS	INC.								
Firm NRD nu	mber 3 2 4	2 0	(if ap	pplicable)							
Indicate whether the person compensated fac	Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal. V No Yes										
b) Business contact information											
If a firm NRD number is not provided in Item	8 (a), provide the business (ontact information o	of the person being co	ompensated.							
Street address											
Municipality			Province/State	;							
Country] Po	estal code/Zip code								
Email address		_ 	Telephone numbe	r							
c) Relationship to issuer or investment fund manager											
Indicate the person's relationship with the iss					" in Part B(2) of						
the Instructions and the meaning of "control"		· · · <u></u>									
Connect with the issuer or investm	ent fund manager	∐ In	nsider of the issuer (c	other than an investm	ient fund)						
Director or officer of the investmen	fund or investment fund m	anager E	mployee of the issue	er or investment fund	manager						
✓ None of the above											
d) Compensation details											
Provide details of all compensation paid, or to											
Canadian dollars. Include cash commissions, s incidental to the distribution, such as clerical,											
allocation arrangements with the directors, of	ficers or employees of a non	-individual compens	sated by the issuer.								
Cash commissions paid	50,400.00		Security code 1	Security code 2	Security code 3						
Value of all securities distributed as compensation ⁴	50,400.00	Security codes	WNT								
	ints, options or other rights	Exercisable at 9	\$0.10 for 48 month	ıs.							
Other compensation ⁵	Describe										
Total compensation paid											
Check box if the person will or may receive any deferred compensation (describe the terms below)											
	•		•								
⁴ Provide the aggregate value of all securitie additional securities of the issuer. Indicate to											
rights exercisable to acquire additional secusive 5Do not include deferred compensation.			, <u></u>		-						
20 morado deserrod compensadon.											

a) Name of person comper	nsated and regist	ration status										
Indicate whether the person comp	ensated is a registr	ant.		✓ No			Yes					
If the person compensated is an individual, provide the name of the individual.												
Full legal name of individ	ual Mehrotra			Neetil	ka							
	F	amily name			Firs	t given	name		Seco	ndary g	iven na	ames
If the person compensated is not o	an individual, provid	de the following	inforn	nation.								
Full legal name of	f non-individual											
Firn	n NRD number							(if app	licable)			
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal.												
b) Business contact information												
If a firm NRD number is not provi	ded in Item 8 (a), pr	rovide the busin	ess co	ntact info	rmation	of the	person	being con	npensated.			
Street address Pr	rivate, ask issuer											
Municipality Pr	rivate, ask issuer					F	Provinc	e/State	Alberta			
Country	anada				F	Postal	code/Z	ip code	X1X 1X	1		
Email address	dress Telephone number											
c) Relationship to issuer or investment fund manager												
	Indicate the person's relationship with the issuer or investment fund manager (select all that apply). Refer to the meaning of "connected" in Part B(2) of the Instructions and the meaning of "control" in section 1.4 of NI 45-106 for the purposes of completing this section.											
Connect with the issuer			- 100 0	r trie pur		•	-		ner than an	invastr	ment f	fund)
<u> </u>		•						,				,
Director or officer of the	investment fund o	r investment fu	nd ma	nager	Ш	Emplo	yee of t	he issuer	or investme	nt fund	d man	ager
✓ None of the above												
d) Compensation details												
Provide details of all compensation												
Canadian dollars. Include cash con incidental to the distribution, such												
allocation arrangements with the o	directors, officers or	employees of a	non-i	ndividual	! compe	nsated	by the is	ssuer.				
Cash commissions paid	24,08	0.00					Security	y code 1	Security co	de 2	Secu	rity code 3
Value of all securities distributed as compensation ⁴			S	Security codes								
·	ms of warrants, opt	ions or other ri	ahts									
Other compensation ⁵	mo or warranto, opt	Desc										
Total compensation paid												
Check box if the person will or may receive any deferred compensation (describe the terms below)												
Check box if the person			u 00111	portoation	(4656)							
⁴ Provide the aggregate value of a additional securities of the issuer												
rights exercisable to acquire add	litional securities of		i secui	านธอ นเอเ	i ibuleu i	us cull	ιρ υ τιδαί	ιστι, <u>πτυτάθ</u>	<u>iii ig</u> options	, vvaiia	iiio Ui	- Juigi
⁵ Do not include deferred compen	isalion.											

a) Name of person com	pensated and re	gistration status									
Indicate whether the person co	ompensated is a reg	gistrant.	✓ No		Yes						
If the person compensated is an individual, provide the name of the individual.											
Full legal name of ind	ividual Orobetz		Cole								
		Family name	Fir	st given n	name		Se	condary (given n	ames	,
If the person compensated is r	not an individual, pi	rovide the following info	ormation.								
Full legal name	e of non-individu	al									
J	Firm NRD numbe	er				(if ap	plicable)				
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal. No Yes											
b) Business contact information											
If a firm NRD number is not p	rovided in Item 8 (d), provide the business	contact informatio	on of the	person	being co	ompensated	<i>d</i> .			
Street address	Private, ask iss	uer									
Municipality	Private, ask iss	uer		P	Provin	ce/State	Albert	a			
Country	Canada		Ī	Postal o	code/2	Zip code	× X1X 1	X1			
Email address			<u> </u>	Telep	hone	numbe	r				
c) Relationship to issuer or investment fund manager											
Indicate the person's relationship with the issuer or investment fund manager (select all that apply). Refer to the meaning of "connected" in Part B(2) of											
the Instructions and the mean	•		for the purposes o		_					IV	
Connect with the iss	suer or investment	rund manager	Ш	insider	or the	issuer (c	other than a	an invesi	ment	runa)	
Director or officer of	the investment fur	nd or investment fund n	nanager	Employ	ee of	the issue	er or investi	ment fun	ıd mar	ager	
✓ None of the above											
d) Compensation details	S										
Provide details of all compensor											
Canadian dollars. Include cash incidental to the distribution, s											!
allocation arrangements with t	the directors, officer	rs or employees of a noi	n-individual comp	ensated b	by the	issuer.					
Cash commissions p	paid	800.00			Securi	ty code 1	Security	code 2	Secu	rity code 3	
Value of all securit distributed as compensati		800.00	Security codes		W	N T					
·		options or other rights	Exercisable a	at \$0.10	for 48	3 month	ıs.				
Other compensati	on ⁵	Describe									
Total compensation p											
		eceive any deferred co	mpensation (desc	cribe the	terms	below)					
⁴ Provide the aggregate value additional securities of the iss											
rights exercisable to acquire	additional securitie				,	,		,		-	
_ 3											

тем 9 - Directors, Execu	TIVE OFFICERS	AND PROMOT	ERS OF THE ISS	SUER							
If the issuer is an investment fund, do not complete Item 9. Procced to Item 10.											
Indicate whether the issuer is any of the following (select the one that applies - if more than one applies, select only one).											
Reporting issuer in any jurisdiction of Canada											
Foreign public issuer											
Wholly owned subsidiary of a reporting issuer in any jurisdiction of Canada ⁶											
Provide name of reporting issuer											
Wholly owned subsidiary of a foreign public issuer ⁶											
Provide name of	foreign public issue	r						7			
Issuer distributing only eligil	ble foreign securities	and the distribution	n is to permitted clie	ents only ⁷				_			
If the issuer is at least one of the	above, do not comp	olete Item 9(a) – (d	c). Proceed to Item	10.							
⁶ An issuer is a wholly owned subsidiary of a reporting issuer or a foreign public issuer if all of the issuer's outstanding voting securities, other than securities that are required by law to be owned by its directors, are beneficially owned by the reporting issuer or the foreign public issuer, respectively. ⁷ Check this box if it applies to the current distribution even if the issuer made previous distributions of other types of securities to non-permitted clients. Refer to the definitions of "eligible foreign security" and "permitted client" in Part B(1) of the Instructions.											
If the issuer is none of the	above, check this b	ox and complete	Item 9(a) - (c).								
a) Directors executive officer	e and promoters of	of the issuer									
a) Directors, executive officers and promoters of the issuer Provide the following information for each director, executive officer and promoter of the issuer. For locations within Canada, state the province or											
territory; otherwise state the country.							province				
Organization or company name	Family name	First given name	Secondary given names	given residentall			lationship to issuer elect all that apply)				
				Province or	Province or country		0	Р			
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 prorelect one or both if ap					
				Province or country	1 1		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	CIELO WASTE SOLUTIONS CORP.									
Full legal name	ALLAN									
	Family name	First given name	Secondary given names							
Title	PRESIDENT, CEO, DIRECTO									
Telephone number	4033482972	Email address	donallan@	cielows	s.com					
Signature	Don Allan	2019	07	19						
			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 individual certifying the report									
Full legal name	Szaszkiewicz	Antonina				Title	Legal Counsel		
	Family name	First given na	ame	Secondary	given names	•			
Name of company	ECS Law Corporation								
Telephone number	4169662188		Ema	ail address	antonina@e	ecslaw.ca			

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.