Form 45-106F1 Report of Exempt Distribution

BCSC EDER Reference Number 8782194

ITEM 1 - REPORT TYPE													
New report													
Amended report If amended, provide filing date of report that is being amended 2019 04 18 (YYYY-MM-DD)													
ITEM 2 - PARTY CERTIFYING T	ITEM 2 - PARTY CERTIFYING THE REPORT												
Indicate the party certifying the report (select only one). For guidance regarding whether an issuer is an investment fund, refer to section 1.1 of National Instrument 81-106 Investment Fund Continuous Disclosure and the companion policy to NI 81-106.													
Investment fund issuer													
✓ Issuer (other than an investment fund)													
Item 3 - Issuer Name and Other Identifiers													
Provide the following information about the issuer, or if the issuer is an investment fund, about the fund.													
	Full legal name Empower Clinics Inc.												
Previous full legal nam	he Adira Energy Ltd.												
If the issuer's name changed in	If the issuer's name changed in the last 12 months, provide most recent previous legal name.												
Websi	te www.empowerclinics.c	om (if applicab	le)										
If the issuer has a legal entity identifier.	provide below. Refer to Part B of t	the Instructions for the definition	of "legal entity identifier".										
Legal entity identifie	ər												
If two or more issuers distributed a sing	le security, provide the full legal n	ame(s) of the co-issuer(s) other th	an the issuer named above.										
Full legal name(s) of co-issuer(s)	(if applicabl	e)										
ITEM 4 - UNDERWRITER INFO	RMATION												
If an underwriter is completing the repo	rt, provide the underwriter's full le	gal name and firm NRD number		1									
Full legal name													
Firm NRD number		(if applicable)											
If the underwriter does not have a firm	NRD number, provide the head off	fice contact information of the un	derwriter.										
Street address													
Municipality		Province/State											
Country		Postal code/Zip code											
Telephone number		Website		(if applicable)									

ITEM 5 - ISSUER INFORMATION											
If the issuer is an investment fund, do not complete Item 5. Proceed to Item 6.											
a) Primary industry											
Provide the issuer's North American Industry Classification Standard (NAICS) code (6 digits only) that in your reasonable judgment most closely corresponds to the issuer's primary business activity.											
NAICS industry code 5 4 1 7 1 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.											
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											
b) Number of employees											
Number of employees: 🗸 0 - 49 🗍 50 - 99 🗌 100 - 499 🗍 500 or more											
c) SEDAR profile number											
Does the issuer have a SEDAR profile?											
No ✓ Yes If yes, provide SEDAR profile number 0 0 0 2 3 3 1 7											
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											
f) Reporting issuer status											
Is the issuer a reporting issuer in any jurisdication of Canada? No Yes											
If yes, select the jurisdictions of Canada in which the issuer is a reporting issuer.											
AII AB BC MB NB NL NT											
NS NU ON PE QC SK YT											
g) Public listing status											
If the issuer has a CUSIP number, provide below (first 6 digits only)											
CUSIP number											
If the issuer is publicly listed, provide the name of the exchange on which the issuer's equity securities primarily trade. Provide only the name of an exchange and not a trading facility such as, for example, an automated trading system.											
Exchange name											
h) Size of issuer's assets											
Select the size of the issuer's assets based on its most recently available annual financial statements (Canadian \$). If the issuer has not prepared annual financial statements for its first financial year, provide the size of the issuer's assets at the distribution end date.											

\$0 to under \$5M	\$5M to under \$25M	□ \$25M to under \$100M
S100M to under \$500M	S500M to under \$1B	S1B or over

ib close is an investment fund, provide the following information: iiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiii										
Full legal name										
Firm NRD number										
If the investment fund manager does not have a firm NRD number, provide the head office contact information of the investment fund manager. Street address Municipality Country Postal code/Zjp code Telephone number Website (if applicable) D Type of investment fund Type of investment fund fund that most accurately identifies the issuer (select only one). Money market Country Postal code/Zjp code Indicate whether one or both of the following apply to the investment fund. Invests primarily in other investment fund issuers Country Indicate whether one or both of the following apply to the investment fund. Invests primarily in other investment fund issuers Indicate whether one or both of the following apply to the investment fund. Invests primarily in other investment of Transferable Securities funds (UCITs Funds) are investment funds regulated by the European Union (EU) directives that allow collective investment fund Date of formation and financial year-end of the investment fund YYYY MM DD MM DD										
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If the investment fund has a CUSIP number, provide below (first 6 digits only) CUSIP number										
CUSIP number										
If the investment fund is publicly listed, provide the name of the exchange on which the investment fund's securities primarily trade. Provide only the										
name of an exchange and not a trading facility such as, for example, an automated trading system.										
Exchange name										
f) Net asset value (NAV) of the investment fund										
Select the NAV range of the investment fund as of the date of the most recent NAV calculation (Canadian \$).										
\$0 to under \$5M \$5M to under \$25M \$25M to under \$100M \$100M to under \$500M \$500M to under \$1B \$1B or over Date of NAV calculation:										

ITEM 7 - INFORMATION ABOUT THE DISTRIBUTION

If an issuer located outside of Canada completes a distribution in a jurisdiction of Canada, include in Item 7 and Schedule 1 information about purchasers resident in that jurisdiction of Canada only. Do not include in Item 7 securities issued as payment of commissions or finder's fees in connection with the distribution, which must be disclosed in Item 8. The information provided in Item 7 must reconcile with the information provided in Schedule 1 of the report.													
a) Currency													
Select the currency or currencies in which the distribution was made. All dollar amounts provided in the report must be in Canadian dollars.													
🗸 Ca	Canadian dollar US dollar Euro Other (describe)												
b) Distribution date(s)													
b) Distribution date(s) State the distribution start and end dates. If the report is being filed for securities distributed on only one distribution date, provide the distribution date as both the start and end dates. If the report is being filed for securities distributed on a continuous basis, include the start and end dates for the distribution period covered by the report. Start date 2019 04 02 YYYY MM DD YYYY													
c) D	Deta	ailed	purc	hase	r infc	ormation							
Comp	let	e Sch	nedu	le 1 d	of th	is form for eac	h purchaser and	attach the schedu	le to t	he complet	ted report.		
d) T	Гуре	es of	secu	urities	s dist	ributed							
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 \$												
Securi			SIP nu applica			Description	of security	Number of securities		Single or lowest price	Highest price	Total amount	
UВ	s	0	0169	96	con	ch unit consist nmon share a ire purchase v	nd one commor		21,115,000.00 0.100		0.1000	2,111,500.00	
c v	D	0	0169	96	inte anr	erest at a rate	ertible into units	799,500.	00	0.0000		799,500.00	
e) D	Deta	ails o	f righ	nts ar	nd co	nvertible/excha	ngeable securitie	S					
								cise price and expiry do terms for each conver				xchangeable securities	
Conve exchar securi	ngea	able		derlyir urity co			se price dian \$) Highest	Expiry date (YYYY- MM-DD)		nversion ratio	Describe other it	ems (if applicable)	
WI	N	т	С	М	S	0.1600	0.1600	2021-04-02	1:1 Each warrant is e into one common exercise price of			on share at an	
С	v	D	U	В	S	0.1100	0.1100	2020-04-02	1:1	C C W E C T	Each unit consists of one common share and one common share purchase warrant. Each warrant is exercisable into one additional common share for a period of two years at a price of \$0.16 per common share.		
f) S	um	mary	∕ of tł	ne dis	stribu	ition by jurisdict	ion and exemptic	n		÷			

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 ²⁹ purchasers	Total amount (Canadian \$)				
British Columbia	NI 45-106 2.3 [Accredited investor]	12	1,646,000.00				
Ontario	NI 45-106 2.3 [Accredited investor]	8	541,500.00				
Alberta	NI 45-106 2.3 [Accredited investor]	1	100,000.00				
Québec	NI 45-106 2.3 [Accredited investor]	6	168,500.00				
Panama	NI 45-106 2.3 [Accredited investor]	1	55,000.00				
Cayman Islands	NI 45-106 2.3 [Accredited investor]	1	50,000.00				
Thailand	NI 45-106 2.3 [Accredited investor]	1	50,000.00				
Bermuda	Other	2	100,000.00				
Germany	NI 45-106 2.3 [Accredited investor]	2	200,000.00				
	Total dollar amount of securities distributed						
	Total number of unique purchasers ^{2b} 34						

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

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

g) Net proceeds to the investment fund by jurisdiction

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

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

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

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

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

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

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

Ітем 8 - Со	MPENSATION	INFORMATION	
		on (as defined in NI 45-106) to whom the issuer directly provides, o tional copies of this page if more than one person was, or will	
Indicate wheth	her any compensa	tion was paid, or will be paid, in connection with the distribution.	
🗌 No	✓ Yes	If yes, indicate number of persons compensated.	5

a) Name of person comper	nsated and regis	tration	status										
Indicate whether the person compensated is a registrant. No Yes													
If the person compensated is an ir	ndividual, provide t	he nam	e of the indivi	dual.									
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	f non-individual	Canad	cord Genui	ty Corp.									
Firn	Firm NRD number 9 0 0 (if applicable)												
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal. Ves													
b) Business contact inform	ation												
If a firm NRD number is not provi	ded in Item 8 (a), p	rovide t	the business co	ontact infor	mation o	of the p	person b	eing com	pensated.				
Street address													
Municipality						P	rovince	/State				7	
Country]	Po	ostal c	ode/Zip	o code				7	
Email address						Telepl	hone n	umber					
c) Relationship to issuer or	· investment fund	d mana	ager						_				
Indicate the person's relationship the Instructions and the meaning									ning of "co	nnected" ii	1 Part B(2) c	of	
	the Instructions and the meaning of "control" in section 1.4 of NI 45-106 for the purposes of completing this section. Connect with the issuer or investment fund manager Insider of the issuer (other than an investment fund)												
Director or officer of the	investment fund o	or invest	tment fund ma	anager		molove	ee of the	e issuer o	or investme	ent fund ma	anager		
None of the above				J									
d) Compensation details													
Provide details of all compensation Canadian dollars. Include cash cor incidental to the distribution, such allocation arrangements with the d	nmissions, securitie as clerical, printing	es-based g, legal	d compensatic or accounting	n, gifts, dis services. A	counts o n issuer i	r other is not r	[.] comper equired	nsation. E to ask fo	Do not repo	rt payment	ts for service		
Cash commissions paid	35,00	00.00					Security	code 1	Security co	ode 2 Se	curity code 3	,	
Value of all securities distributed as compensation⁴			:	Security co	des	,	W N	Т					
Describe terr	ms of warrants, op	tions or	r other rights	30,000 I expiry d				an exe	rcise price	e of \$0.16	with an		
Other compensation ⁵			Describe									Ī	
Total compensation paid	35,00	00.00											
Check box if the perso	on will or may rece	eive any	v deferred con	npensation	(describ	be the t	terms be	elow)					
												7	
additional securities of the issuer rights exercisable to acquire add	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. ⁵ Do not include deferred compensation.												

a) Name of person comp	pensated and regist	ration status										
Indicate whether the person co	mpensated is a registro	int.	✓ No	Yes								
If the person compensated is a	n individual, provide th	e name of the individ	dual.									
Full legal name of indiv	vidual											
Family name First given name Secondary given names												
If the person compensated is not an individual, provide the following information.												
Full legal name	Full legal name of non-individual Boom Capital Markets Inc.											
Firm NRD number (if applicable)												
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal. Ves												
b) Business contact info	rmation											
If a firm NRD number is not pr	ovided in Item 8 (a), pr	ovide the business co	ontact information	of the person being co	mpensated.							
Street address	8 The Esplanade, S	Suite 2705										
Municipality	Toronto			Province/State	Ontario							
Country	Canada		Po	ostal code/Zip code	M5E 0A6							
Email address				Telephone number								
c) Relationship to issuer	or investment fund	manager										
Indicate the person's relationsh the Instructions and the meani					eaning of "connected" in Part B(2) of							
	uer or investment fund		· · ·		". ther than an investment fund)							
		-										
	the investment fund or	investment fund ma		Imployee of the issue	r or investment fund manager							
✓ None of the above												
d) Compensation details	;											
Canadian dollars. Include cash	commissions, securities Ich as clerical, printing,	-based compensatio legal or accounting	n, gifts, discounts c services. An issuer	or other compensation is not required to ask	istribution. Provide all amounts in Do not report payments for services for details about, or report on, internal							
Cash commissions pa	aid 29,85	5.00		Security code 1	Security code 2 Security code 3							
Value of all securiti distributed as compensatio			Security codes	W N T								
	terms of warrants, opti	ons or other rights			xercise price of \$0.16 with an							
Other compensation	n ⁵	Describe	expiry date of A	April 2, 2021.								
Total compensation pa												
	erson will or may recei		nensation (descri	he the terms helow)								
⁴ Provide the aggregate value additional securities of the iss rights exercisable to acquire a ⁵ Do not include deferred comp	uer. Indicate the secur additional securities of	ity codes for all secu			rights exercisable to acquire <u>uding</u> options, warrants or other							

a) Name of person compe	nsated and regis	stration	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													s	
If the person compensated is not an individual, provide the following information.														
Full legal name of non-individual EMD Financial Inc.														
Firm NRD number36480(if applicable)														
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal.														
b) Business contact inform	nation													
If a firm NRD number is not prov	ided in Item 8 (a), J	orovide t	the business	contact info	rmation	of the	perso	n beir	ng con	npenso	ited.			
Street address														
Municipality						F	Provin	nce/S	State					
Country					Ρ	ostal o	code/	Zip c	code					
Email address						Telep	phone	e nun	nber					
c) Relationship to issuer o	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 or investment fund manager Insider of the issuer (other than an investment fund) Director or officer of the investment fund or investment fund manager														
✓ None of the above				nanager	L ,	Linploy			33001		Suno		manage	
d) Compensation details														
Provide details of all compensation paid, or to be paid, to the person identified in Item 8(a) in connection with the distribution. Provide all amounts in Canadian dollars. Include cash commissions, securities-based compensation, gifts, discounts or other compensation. Do not report payments for services incidental to the distribution, such as clerical, printing, legal or accounting services. An issuer is not required to ask for details about, or report on, internal allocation arrangements with the directors, officers or employees of a non-individual compensated by the issuer. Cash commissions paid 8,000.00 Security code 1 Security code 2 Security code 3														
Value of all securities	10	00.00		Security co	odes		С	М	S	W	Ν	Т		
distributed as compensation ⁴ 4,000.00 Describe terms of warrants, options or other rights 40,000 Common Shares at a deemed price of \$0.10 per share. 40,000 Finder's Warrants at an exercise price of \$0.16 with an expiry date of April 2, 2021.														
Other compensation ⁵	5		Describe	•										
Total compensation paid	12,00	00.00												
Check box if the pers	son will or may rec	eive any	/ deferred co	ompensatior	ı (descri	be the	terms	s belo	ow)					
⁴ Provide the aggregate value of additional securities of the issue rights exercisable to acquire add ⁵ Do not include deferred compe	er. Indicate the secu ditional securities c	urity cod	les for all se											her

a) Name of person comp	pensated and regist	ration status				
Indicate whether the person co	mpensated is a registro	int.	✓ No	Yes		
If the person compensated is a	n individual, provide th	e name of the indivi	dual.			
Full legal name of indiv	/idual					
	Fa	amily name	Fir	st given name		Secondary given names
If the person compensated is no	ot an individual, provid	e the following infor	mation.			
Full legal name	of non-individual	Favros Capital				
F	irm NRD number				(if appl	icable)
Indicate whether the person co.	mpensated facilitated t	he distribution throu	igh a funding poi	rtal or an inter	met-based p	oortal. 🗹 No 🗌 Yes
b) Business contact info	rmation					
If a firm NRD number is not pro	ovided in Item 8 (a), pr	ovide the business co	ontact informatio	n of the persor	n being com	ppensated.
Street address	1706-2345 Madisor	n Ave				
Municipality	Burnaby			Provin	ce/State	British Columbia
Country	Canada			Postal code/2	Zip code	V5C 0B4
Email address				Telephone	number	
c) Relationship to issuer	or investment fund	manager	1			
						ning of "connected" in Part B(2) of
the Instructions and the meaning	ler or investment fund		or the purposes t			or than an invoctment fund
		-				er than an investment fund)
Director or officer of t	he investment fund or	investment fund ma	anager	Employee of	the issuer of	or investment fund manager
✓ None of the above						
d) Compensation details	i					
Canadian dollars. Include cash	commissions, securities och as clerical, printing,	-based compensatio legal or accounting	n, gifts, discounts services. An issue	s or other comp er is not require	pensation. E ed to ask for	tribution. Provide all amounts in Do not report payments for services r details about, or report on, internal
Cash commissions pa	aid 2,450	0.00		Securi	ity code 1	Security code 2 Security code 3
Value of all securition distributed as compensation			Security codes	W	N T	
Describe	terms of warrants, opti	ons or other rights	21,000 Finde expiry date of			rcise price of \$0.16 with an
Other compensatio	n ⁵	Describe		<i>`</i>		
Total compensation pa	aid 2,450	0.00	L			
Check box if the pe	erson will or may recei	ve any deferred con	pensation (desc	cribe the terms	below)	
⁴ Provide the aggregate value additional securities of the issurities rights exercisable to acquire a ⁵ Do not include deferred comp	uer. Indicate the secur dditional securities of	ity codes for all secu				

a) Name of person comp	ensated and regis	tration status					
Indicate whether the person cor	mpensated is a regist	rant.	✓ No	Ye	es		
If the person compensated is ar	n individual, provide t	he name of the indivi	dual.				
Full legal name of indiv	ridual						
		Family name	Fire	st given name	e	Secondary	given names
If the person compensated is no	-	-	mation.				
Full legal name	of non-individual	Dragon Capital					
F	irm NRD number				(if appli	cable)	
Indicate whether the person co	mpensated facilitatea	the distribution throu	ıgh a funding poı	tal or an in	ternet-based p	ortal. 🔽	🖊 No 🗌 Yes
b) Business contact infor	mation						
If a firm NRD number is not pro	ovided in Item 8 (a), p	provide the business co	ontact informatio	n of the per	rson being com	pensated.	
Street address	Suite 2A Camino	Real					
Municipality	Calle Winston Chu	urchill		Prov	vince/State	Panama	
Country	Panama			Postal cod	le/Zip code		
Email address				Telepho	one number		
c) Relationship to issuer	or investment fund	d manager					
Indicate the person's relationsh the Instructions and the meanir						ning of "connect	ed" in Part B(2) of
Connect with the issu	-				-	er than an inves	stment fund)
		-					·
Director or officer of t	ne investment fund c	or investment fund ma	anager	Employee	of the issuer d	or investment fu	nd manager
✓ None of the above							
d) Compensation details							
Provide details of all compensat Canadian dollars. Include cash o incidental to the distribution, su allocation arrangements with th	commissions, securitie ch as clerical, printing	es-based compensatio g, legal or accounting	n, gifts, discounts services. An issue	s or other co er is not requ	ompensation. D uired to ask for	o not report pay	ments for services
Cash commissions pa	aid 5,00	05.00			curity code 1	Security code 2	Security code 3
Value of all securitie			Security codes	W	N T		
distributed as compensation ⁴ Describe terms of warrants, options or other rights 42,900 Finder's Warrants at an exercise price of \$0.16 with an							
	-		expiry date of	April 2, 2	021.		
Other compensatio	n ⁵	Describe					
Total compensation pa	id 5,00	05.00					
Check box if the pe	rson will or may rece	eive any deferred con	pensation (desc	ribe the ter	ms below)		
⁴ Provide the aggregate value of additional securities of the issu- rights exercisable to acquire an ⁵ Do not include deferred comp	ier. Indicate the secu dditional securities o	irity codes for all secu	on, <u>excluding</u> opt urities distributea	ions, warrai 'as comper	nts or other rig nsation, <u>includi</u>	hts exercisable ing options, war	to acquire rants or other

ITEM 9 - DIRECTORS, EXECUTIVE OFFICERS AND PROMOTERS OF THE ISSUER								
If the issuer is an investment fund	l, do not complete	Item 9. Procced to	Item 10.					
Indicate whether the issuer is any o	f the following (seled	t the one that appli	es - if more than one	e applies, select onl	y one).			
Reporting issuer in any juris	diction of Canada							
Foreign public issuer								
Wholly owned subsidiary of	a reporting issuer i	n any jurisdiction of	Canada ⁶					
Provide nan	ne of reporting issue	ər						
Wholly owned subsidiary of	a foreign public iss	uer ⁶						_
Provide name of	foreign public issue	er]
Issuer distributing only eligi	ble foreign securitie	s and the distributio	n is to permitted clie	ents only ⁷				
If the issuer is at least one of the	above, do not com	plete 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.								
a) Directors, executive officer	s and promoters	of the issuer						
Provide the following information for territory; otherwise state the country.						tate the	province	or
Organization or company name	Family name	First given name	Secondary given names	Business location of non-individual or residentail jurisdiction of individual				
				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	Family name First given name		Residential jurisdiction of individual	jurisdiction of individual (select of		tionship to promoter one or both if applicable)	
				Province or country	D		C)
c) Residential address of eac	h 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/ investment fund manager/agent	Empower Clinics Inc.						
Full legal name	McAuley Steven			l.			
	Family name	First given name		Secondary given names			
Title	Chief Executive Officer						
Telephone number	6047892146	Email address	uley@empowerclinics.com				
Signature	"Steven McAuley"	Date	2019	06	11		
			YYYY	MM	DD	-	

ITEM 11- CONTACT PERSON

Provide the following business contact information for the individual that the securities regulatory authority or regulator may contact with any questions regarding the contents of this report, if different than the individual certifying the report in Item 10.

Same as individual certifying the report

Full legal name	Blundy	Katie			Title	Lawyer
	Family name	First given name	Secondary giv	ven names		
Name of company	Bennett Jones LLP					
Telephone number	6048915369	Er	nail address	olundyk@be	ennettjone	es.com

Notice - Collection and use of personal information

The personal information required under this form is collected on behalf of and used by the securities regulatory authority or regulator under the authority granted in securities legislation for the purposes of the administration and enforcement of the securities legislation.

If you have any questions about the collection and use of this information, contact the securities regulatory authority or regulator in the local jurisdiction(s) where the report is filed, at the address(es) listed at the end of this form.

The attached Schedules 1 and 2 may contain personal information of individuals and details of the distribution(s). The information in Schedules 1 and 2 will not be placed on the public file of any securities regulatory authority or regulator. However, freedom of information legislation may require the securities regulatory authority or regulator to make this information available if requested.

By signing this report, the issuer/underwriter confirms that each individual listed in Schedule 1 or 2 of the report who is resident in a jurisdiction of Canada:

- a) has been notified by the issuer/underwriter of the delivery to the securities regulatory authority or regulator of the information
 pertaining to the individual as set out in Schedules 1 or 2, that this information is being collected by the securities regulatory
 authority or regulator under the authority granted in securities legislation, that this information is being collected for the purposes of
 the administration and enforcement of the securities legislation of the local jurisdiction, and of the title, business address and
 business telephone number of the public official in the local jurisdiction, as set out in this form, who can answer questions about the
 security regulatory authority's or regulator's indirect collection of the information, and
- b) has authorized the indirect collection of the information by the securities regulatory authority or regulator.