Form 45-106F1 Report of Exempt Distribution

BCSC EDER Reference Number 8836537

ITEM 1 - REPORT TYPE													
✓ New report													
Amended report If amended, provide filing date of report that is being amended (YYYY-MM-DD)													
TEM 2 - PARTY CERTIFYING THE REPORT													
Indicate the party certifying the Instrument 81-106 Investment										estment fund	l, refer to s	section 1.	1 of National
Investment fund is	ssuer												
✓ Issuer (other than	an inve	estm	nent fur	nd)									
				,									
ITEM 3 - ISSUER NAME													
Provide the following information		_							ut the fund.				
	gal nam		Antrim E	Baland	ced Mo	ortgag	e Fund	d Ltd.					
Previous full le	gal nam	e											
If the issuer's name changed in the last 12 months, provide most recent previous legal name.													
	Website www.antriminvestments.com (if applicable)												
If the issuer has a legal entity identifier, provide below. Refer to Part B of the Instructions for the definition of "legal entity identifier".													
Legal entity	identifie	r 🗌											
If two or more issuers distribute	ed a single	e secu	urity, pro	vide the	full lega	al name	e(s) of th	e co-issı	uer(s) other th	an the issuer	named at	bove.	
Full legal name(s) of co	-issuer(s)							(if applicable	e)			
ITEM 4 - UNDERWRITER		MA'	TION										
If an underwriter is completing	the repor	t, pro	vide the	underw	riter's fu	ll legal	name a	nd firm l	NRD number.				
Full legal name													
Firm NRD number								(if app	olicable)				
If the underwriter does not hav	e a firm N	IRD n	number, p	orovide	the head	l office	contact	informa	tion of the un	derwriter.			
Street address													
Municipality								Prov	ince/State				
Country							Pos	tal code	e/Zip code	·		\exists	
Telephone number									Website			(if a	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 2 2 9 9
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
Cryptoassets
b) Number of employees
Number of employees: 🔽 0 - 49 🗌 50 - 99 🗌 100 - 499 🗌 500 or more
c) SEDAR profile number
Does the issuer have a SEDAR profile?
No ✓ Yes If yes, provide SEDAR profile number 0 0 0 3 8 5 6 8
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

If the issue is an investment fund, provide the following information: a) Investment fund manager information Full legal name Furn 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 Province/State Guntry Postal code/Zip code Telephone number D Type of investment fund Tree of investment fund that most accurately identifies the issuer (select only one). Alternative strategies Cryptoasset Other (describe) Indicate whether one or both of the following apply to the investment fund. Investment fund that most accurately identifies the issuer (select only one). Alternative strategies Cryptoasset Other (describe) Indicate whether one or both of the following apply to the investment fund. Investment fund that most accurately identifies the issuer (select only one). Indicate whether one or both of the following apply to the investment fund. Investment fund issuers Is a UCIT's Fund' 'understaining for the Collective Investment fund issuers Is a UCIT's Fund' 'understaining for the Collective Investment of Transferable Securities funds (UCIT's Funds) are investment funds regulated by the European Union (C) Date of formation and financial year-end of the investment fund Suppresent fund a reporting issuer in any jurisdication of Canada? No Yes It he investment fund a reporting issuer in any jurisdication of Canada? No Yes It he investment fund hars a CUSP number, provide below (first 6 digits only) CUSP number On O Public listing status of the investment fund is a reporting issuer. All All All </th
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Firm NRD number (if applicable) 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 Province/State
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CUSIP number
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 \$).
L L \$\the under \$\mathbf{S}M \qquad L \qquad \mathbf{S}M \text{ to under \$\mathbf{S}M \qquad to
\$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

purchasers resident in that jurisdie	nada completes a distribution in a juriso iction of Canada only. Do not include ir which must be disclosed in Item 8. The	n Item 7 securities issue	ed as payment of c	commissions or fi	inder's fees in					
a) Currency										
Select the currency or currencies i	in which the distribution was made. All	dollar amounts provia	led in the report m	nust be in Canadi	an dollars.					
Canadian dollar	US dollar Euro	Other (describ	e)							
b) Distribution date(s)										
			te 2019							
c) Detailed purchaser infor	rmation									
Complete Schedule 1 of this form for each purchaser and attach the schedule to the completed report.										
d) Types of securities distributed										
	n for all distributions reported on a per ISIP number, indicate the full 9-digit CL				ow to indicate the					
				Canadian \$	3					
Security code CUSIP number (if applicable)	Description of security	Number of securities	Single or lowest price	Highest price	Total amount					
P R S Clas	s A Preferred Non-Voting 698,762.00 1.0000 698,762.00									
	as B Series 'B' Preferred Non- 283,676.00 1.0000 283,676.00									
	ss B Series 'C' Preferred Non- ng Shares	4,573,555.0	0 1.0000		4,573,555.00					
e) Details of rights and cor	nvertible/exchangeable securities									
	ns) were distributed, provide the exercis aversion ratio and describe any other te				exchangeable securities					
Convertible / exchangeable security code security code	Exercise price (Canadian \$)	Expiry date (YYYY- MM-DD)	Conversion ratio		items (if applicable)					
	Lowest Highest									
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	Exemption relied of	-	Number of unique	²⁰ Total a	mount (Canadian \$)					
British Columbia	NI 45-106 2.9(1) [Offering me		purchasers	18	1,264,377.00					
British ColumbiaNI 45-106 2.3 [Accredited investor]83,975,740.00										
Alberta	NI 45-106 2.9(2.1) [Offering n (AB, SK, ON, QC, NB, NS)	nemorandum]		1	10,000.00					
Ontario	NI 45-106 2.3 [Accredited inv	estor]		2	80,000.00					

Ontario	NI 45-106 2.9(2.1) [C (AB, SK, ON, QC, NE		um]	2		168,676.00				
Québec	NI 45-106 2.3 [Accred	dited investor]	2		50,400.00					
Québec	NI 45-106 2.9(2.1) [C (AB, SK, ON, QC, NE		um]	1		6,800.00				
		Total dollar amo	unt of securit	es distributed	d 5,555,993.00					
	Total nu	umber of unique purc	hasers ^{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 inv	et proceeds to the investment fund by jurisdiction									
purchaser resides. ³ If an issuer lo	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 ne	t proceeds to the investme	ent fund			_					
³ "Net proceeds" means the gro. redemptions that occurred duri			ributions for w	hich the report is	 s being filed, less the	e gross				
h) Offering materials - Th	s section applies only in	Saskatchewan, Onta	rio, Québec,	New Brunswi	ck and Nova Scot	tia.				
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 f with or delivere regulator? (Y/N)	d to Date p	reviously filed or delivered YYY-MM-DD)					
1. Offering	Memorandum	2018-10-05	Y	20)18-10-10					

Ітем 8 - Со	MPENSATIO	N INFORMATION		
		rson (as defined in NI 45-106) to whom the issuer directly provides, o itional copies of this page if more than one person was, or will	,	
Indicate whet	her any compens	ation was paid, or will be paid, in connection with the distribution.		
🗌 No	✓ Yes	If yes, indicate number of persons compensated.	3	

a) Name of person compensat	ed and registra	tion status												
Indicate whether the person compense	ated is a registran	• 		No		\checkmark	Yes							
If the person compensated is an indivi	dual, provide the i	name of the	individ	ual.										
Full legal name of individual														
	Fam	ily name			First	t given n	ame			Seco	ondary g	jiven na	ames	
If the person compensated is not an ir	dividual, provide	the following	g inforn	nation.										
Full legal name of no	n-individual Ec	helon Wea	alth Pa	artners In	с.									
Firm N	RD number	3 2	4	2	0			(if ap	plicabl	e)				
Indicate whether the person compense	ated facilitated the	e distributior	n throug	gh a fundi.	ng port	al or an	intern	et-based	d portal] No	\checkmark] Yes
b) Business contact informatio	n													
If a firm NRD number is not provided	in Item 8 (a), prov	ide the busir	ness col	ntact infor	mation	of the	person	being co	ompens	ated.				
Street address														
Municipality						Р	rovinc	e/State	e 🗌					
Country					Р	ostal c	ode/Z	ip code	•					
Email address						Telep	hone r	numbei	r 🗌					
c) Relationship to issuer or inv	estment fund m	anager												
Indicate the person's relationship with										of "co	onnecte	ed″ in F	Part B	8(2) of
the Instructions and the meaning of "o			-106 fo	or the purp			•							
Connect with the issuer or in	nvestment fund m	anager			\checkmark	Insider	of the i	ssuer (c	other th	an an	invest	ment f	und)	
Director or officer of the inve	estment fund or in	vestment fu	ind mai	nager		Employ	ee of th	ne issue	er or inv	estm	ent fun	d man	ager	
None of the above														
d) Compensation details														
Provide details of all compensation par Canadian dollars. Include cash commi- incidental to the distribution, such as c allocation arrangements with the direc	ssions, securities-b lerical, printing, le	ased compe gal or accou	nsation Inting s	n, gifts, dis services. Ai	counts o n issuer	or othei ˈis not ı	r compe required	ensation I to ask	. Do no	t repo	ort payı	ments (for se	rvices
Cash commissions paid	41.	59					Security	code 1	Sec	urity c	nde 2	Secu	rity co	de 3
Value of all securities			0				Geodiny		000			Jecu	ity co	
distributed as compensation ⁴			5	ecurity co	aes									
Describe terms of	of warrants, optior	ns or other r	ights											
Other compensation ⁵		Dese	cribe											
Total compensation paid	41.5	59												
\checkmark Check box if the person w	vill or may receive	any deferre	ed com	pensation	(descr	ibe the	terms b	oelow)						
Echelon Wealth Partne Non-Voting Shares, 1% Non-Voting Shares.														red
⁴ Provide the aggregate value of all so additional securities of the issuer. Inc rights exercisable to acquire addition ⁵ Do not include deferred compensati ⁵ Do not include deferred compensati	licate the security al securities of the	, codes for a												er

a) Name of person compe	ensated and regis	stration	status											
Indicate whether the person com	npensated is a regist	rant.			🗌 No		\checkmark	Yes						
If the person compensated is an	individual, provide	the name	e of the i	ndivid	ual.									
Full legal name of indivi	dual													
		Family na	ame			First	t given n	ame	I	Seco	ondary g	given nar	nes	
If the person compensated is not an individual, provide the following information.														
Full legal name	of non-individual	Indust	rielle Al	liance	e Valeurs	Mobil	lieres I	nc.						
Fi	m NRD number	1	5	4	0	0			(if app	licable)				
Indicate whether the person con	pensated facilitated	l the dist	ribution	throug	gh a fundi.	ng port	al or an	interne	et-based	portal.] No	\checkmark	Yes
b) Business contact inform	nation													
If a firm NRD number is not pro	vided in Item 8 (a), p	orovide t	he busine	ess coi	ntact infor	mation	of the p	person l	being con	npensated.				
Street address														
Municipality							Р	rovince	e/State					
Country						Ρ	ostal c	ode/Zi	p code					
Email address							Telep	hone r	umber					
c) Relationship to issuer of	or investment fun	d mana	ger											
Indicate the person's relationshi the Instructions and the meaning											onnecte	ed" in Po	art B(2	?) of
				100 10	n the purp			-			n invest	ment fu	nd)	
	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													
		JIIIVESI	mentiu	iu mai	nager		спроу		ie issuei	or investin		u mana	iyei	
✓ None of the above														
d) Compensation details														
Provide details of all compensati Canadian dollars. Include cash co incidental to the distribution, suc allocation arrangements with the	ommissions, securiti h as clerical, printin	es-basea g, legal o	l compen or accour	sation nting s	n, gifts, dis services. Ai	counts o n issuer	or other ⁻ is not r	r compe requirea	nsation. to ask fo	Do not repo	ort payr	nents fo	or serv	rices
Cash commissions pai	[5.04				,		-		-				-
							-	Security	code 1	Security c	ode 2	Securit	ty code	e 3
Value of all securities distributed as compensatior				S	ecurity co	des								
Describe te	erms of warrants, or	otions or	other rig	phts										
Other compensation	5		Desc	ribe										
Total compensation pai	d	5.04												
Check box if the per	son will or may rec	eive any	deferred	d com	pensation	(descr	ibe the	terms b	elow)					
Industrielle Allianc Preferred Non-Vot Preferred Non-Vot	ing Shares, 1% o													A
⁴ Provide the aggregate value o additional securities of the issue rights exercisable to acquire ad ⁵ Do not include deferred compe-	er. Indicate the secu Iditional securities d	urity cod	les for all											

a) Name of person compe	ensated and regis	stration	status										
Indicate whether the person com	ppensated is a regist	rant.			🗌 No		\checkmark	Yes					
If the person compensated is an	individual, provide i	he nam	e of the ir	ndivid	ual.								
Full legal name of indivi	dual												
		Family na	ame			First	t given na	ame		Seco	ondary giv	/en name	es
If the person compensated is not an individual, provide the following information.													
Full legal name of	of non-individual	Genes	sis Weal	th Ma	anageme	ent Co	rporatio	on					
Fir	m NRD number	6	4	5	7	0			(if appl	icable)			
Indicate whether the person com	pensated facilitated	the dist	tribution t	throug	gh a fundi	ng port	al or an	interne	t-based p	ortal.	\checkmark	No [Yes
b) Business contact inform	nation												
If a firm NRD number is not prov	vided in Item 8 (a), p	orovide t	he busine	ess coi	ntact infor	mation	of the p	person b	eing com	pensated.			
Street address													
Municipality							Р	rovince	e/State				
Country						Р	ostal c	ode/Zi	p code				
Email address							Telepl	hone n	umber				
c) Relationship to issuer c	or investment fun	d mana	iger										
Indicate the person's relationship the Instructions and the meaning										ning of "co	onnected	" in Par	t B(2) of
Connect with the issue	er or investment fun	d mana	ger				Insider	of the is	suer (oth	er than an	investm	ient fun	d)
Director or officer of the investment fund or investment fund manager													
✓ None of the above													
d) Compensation details													
Provide details of all compensation Canadian dollars. Include cash co incidental to the distribution, succ allocation arrangements with the	ommissions, securiti h as clerical, printin	es-basea g, legal d	compens or accoun	sation ting s	n, gifts, dis ervices. Al	counts o n issuer	or other • is not r	compe equired	nsation. E to ask foi	Do not repo	ort paym	ents for	services
Cash commissions pai	d	5.48						Security	code 1	Security c	ode 2	Security	code 3
Value of all securities	3 			6	o ourity oo	doo							
distributed as compensation	1 ⁴			5	ecurity co	ues							
Describe te	erms of warrants, or	otions or	other rig	hts									
Other compensation	5		Descr	ibe									
Total compensation pai	d	5.48											
Check box if the per	son will or may rece	eive any	deferred	l com	pensation	(descr	ibe the	terms b	elow)				
Genesis Wealth M Preferred Non-Voti Preferred Non-Voti	ing Shares, 1% o												
⁴ Provide the aggregate value of additional securities of the issue rights exercisable to acquire ad ⁵ Do not include deferred compe-	er. Indicate the secu ditional securities o	irity cod	les for all										

ITEM 9 - DIRECTORS, EXECU	ITIVE OFFICERS	AND PROMOT	ERS OF THE ISS	UER						
If the issuer is an investment fun	d, do not complete	Item 9. Procced to	ltem 10.							
Indicate whether the issuer is any o	f the following (seled	t the one that applie	es - if more than one	applies, select onl	y one).					
Reporting issuer in any juri	sdiction of Canada									
Foreign public issuer										
Wholly owned subsidiary of	f a reporting issuer i	n any jurisdiction of	Canada ⁶							
Provide nar	me of reporting issue	er								
Wholly owned subsidiary of	f a foreign public iss	uer ⁶						_		
Provide name o	f foreign public issue	er]		
Issuer distributing only eligi	ble foreign securitie	s and the distributio	n is to permitted clie	nts only7						
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 subsic securities that are required by law t respectively. ⁷ Check this box if it applies to the c clients. Refer to the definitions of "e	o be owned by its di urrent distribution ev	rectors, are benefic ven if the issuer mad	ially owned by the re de previous distributi	porting issuer or t ions of other types	he foreign	public is	suer,			
<i>clients. Refer to the definitions of "eligible foreign security" and "permitted client" in Part B(1) of the Instructions.</i> If the issuer is none of the above, check this box and complete Item 9(a) - (c).										
a) Directors, executive officer	rs and promoters	of the issuer								
Provide the following information fo territory; otherwise state the country						tate the j	province	or		
Organization or company name	Organization or company name Early name Eight siven name Secondary given Relationship to (select all that									
				names Jurisdiction of individual Province or country D		D	0	Р		
	Granleese	William		British Columb	a	~	~			
	Granleese	William	R.	British Columb	a	~				
	Worsnup	Christopher	Gavin	British Columb	a	✓				
b) Promoter information										
If the promoter listed above is not ar within Canada, state the province or										
Organization or company name	Family name	First given name	Secondary given names	Residential jurisdiction of individual		ationship one or bo				
				Province or country	D		C)		
c) Residential address of sea	hindividual									
c) Residential address of eac		racidantial address	for each individua-	listed in Item 0	(a) and (L)) and at	ach to t	ha		
Complete Schedule 2 of this form completed report. Schedule 2 also					u) una (D)	, ana ati				

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	Antrim Balanced Mortgage Fu	ind Ltd.									
Full legal name	Granleese	anleese William R.									
	Family name	Family name First given name Secondary given names									
Title	Portfolio Manager										
Telephone number	6045302301	Email address	will@ar	ntriminvest	ments.co	om					
Signature	"William Granleese"	2019	05	31							
			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				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.