Form 45-106F1 Report of Exempt Distribution

BCSC EDER Reference Number 8728301

ITEM 1 - REPORT TYPE											
New report											
Amended report	If amen	ded, pro	vide fi	ling dat	e of	report	that is	being ame	ended 2019 02 22	(YYYY-MM-DD)	
ITEM 2 - PARTY CERTIFYI	NG THE	REPORT	ſ								
Indicate the party certifying the r Instrument 81-106 Investment Fu									restment fund, refer to sect	ion 1.1 of National	
Investment fund iss	suer										
✓ Issuer (other than a	an invest	ment fur	nd)								
			,								
ITEM 3 - ISSUER NAME A											
Provide the following information			-			-		ut the fund.			
-	al name	Antrim E	Baland	ed Mor	tgag	e Fund	ל Ltd.				
Previous full lega	Previous full legal name										
If the issuer's name chan	nged in the	last 12 mo	nths, pi	rovide mo	st rece	ent previ	ous lega	ıl name.			
\ \	Website	www.an	itrimin	vestme	nts.c	om		(if applicable	e)		
If the issuer has a legal entity ide	ntifier, pro	vide below	. Refer t	o Part B c	of the	Instructio	ons for ti	he definition o	of "legal entity identifier".		
Legal entity ic	dentifier										
If two or more issuers distributed	a single se	curity, pro	vide the	full legal	name	e(s) of th	e co-issu	uer(s) other th	an the issuer named abov	е.	
Full legal name(s) of co-is	ssuer(s)							(if applicable	e)		
ITEM 4 - UNDERWRITER I	NFORM	ATION									
If an underwriter is completing th	ne report, p	rovide the	underw	riter's full	legal	name a	nd firm I	NRD number.		_	
Full legal name											
Firm NRD number							(if app	olicable)			
If the underwriter does not have a	If the underwriter does not have a firm NRD number, provide the head office contact information of the underwriter.										
Street address]	
Municipality							Prov	ince/State			
Country					٦	Pos	tal code	e/Zip code			
Telephone number								Website		(if applicable)	

ITEM 5 - ISSUER INFORMATION
If the issuer is an investment fund, do not complete Item 5. Proceed to Item 6.
a) Primary industry
Provide the issuer's North American Industry Classification Standard (NAICS) code (6 digits only) that in your reasonable judgment most closely corresponds to the issuer's primary business activity.
NAICS industry code 5 2 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

pui cor	rcha nnec	sers tion	resident in that ,	iurisdi	ction of Canada	only. Do no	ot include in	diction of Canada, inc 1 Item 7 securities issu information provided	ied a	as payment of	comn	nissions or fi	nder's fees in	in
a)	(Curr	ency											
Sel	ect t	he c	urrency or curre	ncies i	in which the dist	ribution wa	s made. All	dollar amounts provi	ded	in the report i	nust l	pe in Canadi	an dollars.	
\checkmark	Ca	nac	lian dollar		US dollar	E	uro	Other (descrit	be)					
b)		Distr	ibution date(s))										
as	botł	n the	start and end d period covered	ates. I by the	f the report is be e report.			ecurities distributed c distributed on a contir	nuou					ıte
			St	art da	^{te} 2019	02	14	End d	ate	2019	02	21		
					YYYY	MM	DD			YYYY	MM	DD		
c)			iled purchase											
Co	omplete Schedule 1 of this form for each purchaser and attach the schedule to the completed report.													
d)														
	Provide the following information for all distributions reported on a per security basis. Refer to Part A(12) of the Instructions for how to indicate the security code. If providing the CUSIP number, indicate the full 9-digit CUSIP number assigned to the security being distributed.													
Canadian \$														
Security code CUSIP number (if applicable) Description of security Number of securities Single or lowest price Highest price Total amount														
Р	Class A Preferred Non-Voting 1 973 217 00 1 0000 1 973 217 00													
Р	R	s			ss B Series 'I ng Shares	B' Preferr	ed Non-	712,518.0	00	1.0000)	1.0000	712,518.0	00
Ρ	R	s			ss B Series '(ng Shares	C' Preferr	ed Non-	3,844,401.0	00	1.0000)	1.0000	3,844,401.0	00
e)		Deta	ils of rights an	id cor	nvertible/exch	angeable	securities							
we	re d	istrik	outed, provide th					e price and expiry dat rms for each converti					xchangeable securit	ties
e	chai	ertible ngea ity co	ble Underlyin			ise price adian \$) Highe	est	Expiry date (YYYY- MM-DD)	Co	onversion ratio	De	escribe other i	tems (if applicable)	
f)	S	umi	mary of the dis	stribut	tion by jurisdic	tion and e	exemption							
pu dis Th pu jur	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 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			Exemp	otion relied or	n	N	umber of unique purchasers	9 ^{2<u>9</u>}	Total ar	nount (Canadian \$)	
			Alberta		NI 45-106 2 (AB, SK, OI			nemorandum]			1		2,000	.00
	E	Briti	sh Columbia		NI 45-106 2 associates]	.5 [Famil	y, friends	and business			1		800,000	.00
	E	Briti	sh Columbia		NI 45-106 2 NL)	2.9(1) [Off	ering me	morandum] (BC			91		5,304,136	.00

Ontario		NI 45-106 2.9(2.1) [O (AB, SK, ON, QC, NE		um]		5		422,000.00			
British Colur	nbia	NI 45-106 2.3 [Accred	dited investor]			1		2,000.00			
			Total dollar amo	unt of sec	curities distr	ibuted		6,530,136.00			
		Total nu	mber of unique purc	hasers ^{2b}		88					
^{2a} In calculating the r	number of u	inique purchasers per row, co	unt each purchaser on	y once. Joi	int purchasers	s may be	counted as one pu	rchaser.			
5	^{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	estment fund by jurisdicti	on								
purchaser resides. ³ If	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 cou	ntry		Net proceed (Canadian \$						
	-			_							
	l otal ne	t proceeds to the investme	ent fund								
		ns proceeds realized in the ju ag the distribution period cov		ributions f	or which the i	report is l	being filed, less the	e gross			
h) Offering mate	rials - Thi	s section applies only in S	Saskatchewan, Onta	ario, Quél	bec, New Bi	runswicł	< and Nova Scot	ia.			
materials that are req those jurisdictions. In Ontario, if the offer	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)	Previo with or de regula (Y/	ator?	de	viously filed or elivered (Y-MM-DD)				

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 compens	ated and regis	tration	status													
Indicate whether the person compe	nsated is a registi	rant.			🗌 No		\checkmark	Yes								
If the person compensated is an ind	ividual, provide t	he nam	e of the ir	ndivid	ual.											
Full legal name of individua	al															
	F	amily na	ame			First	t given n	name				Sec	ondary g	given na	ames	
If the person compensated is not an	individual, provi	de the f	ollowing	inforn	nation.											
Full legal name of r	non-individual	Echelo	on Wealt	th Pa	arnters In	с.										
Firm	NRD number	3	2	4	2	0				(if app	olicat	ole)				
Indicate whether the person compe	nsated facilitated	the dist	tribution t	throug	gh a fundi	ng port	al or ar	n interi	net-l	based	porte	al.] No	\checkmark] Yes
b) Business contact information	tion															
If a firm NRD number is not provide	ed in Item 8 (a), p	rovide t	he busine	ess coi	ntact infor	mation	of the	persor	n bei	ng coi	mper	nsated.				
Street address																
Municipality							P	Provin	ce/S	State						
Country						Р	ostal o	code/2	Zip d	code						
Email address							Telep	hone	nur	nber						
c) Relationship to issuer or i	nvestment fund	d mana	iger													
Indicate the person's relationship w the Instructions and the meaning o												g of "c	onnecte	ed" in I	Part E	3(2) of
Connect with the issuer o	r investment fun	d mana	ger				Insider	of the	issu	ier (ot	ther t	han ar	n invest	ment f	iund)	
Director or officer of the in	nvestment fund c	or invest	ment fun	d mai	nager		Employ	/ee of	the i	issuer	r or ir	nvestm	ent fun	d mar	ager	
✓ 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 g, legal d	compens or accoun	sation ting s	n, gifts, dis services. Ai	counts o n issuer	or othe is not i	r comp require	oenso ed to	ation. ask fo	Do n	ot rep	ort payl	ments	for se	ervices
Cash commissions paid	2	45.25					Г	Securi	tv co	de 1	Se	ecurity c	ode 2	Secu	rity co	ode 3
Value of all securities				ç	ecurity co	des			.,						,	
distributed as compensation ⁴						ues										
Describe term	s of warrants, op	tions or	other rig	hts												
Other compensation ⁵			Descr	ibe												
Total compensation paid	4	15.25														
Check box if the persor	n will or may rece	eive any	deferred	l com	pensation	(descr	ibe the	terms	belo	ow)						
Echelon Wealth Partr Non-Voting Shares, 1 Non-Voting Shares.																red
⁴ Provide the aggregate value of all additional securities of the issuer, rights exercisable to acquire additi ⁵ Do not include deferred compens.	Indicate the secu onal securities of	irity cod	les for all													ər

a) Name of person comp	ensated and regis	stration	status											
Indicate whether the person cor	npensated is a regist	rant.			No		\checkmark	Yes						
If the person compensated is an	individual, provide	the nam	e of the l	individ	lual.									
Full legal name of indiv	idual													
		Family na	ame			First	t given n	ame		Seco	ondary g	given nar	nes	
If the person compensated is no	t an individual, prov	ide the f	ollowing	inforn	nation.									
Full legal name	of non-individual	Indust	rielle A	lliance	e Valeurs	s Mobil	lieres							
Fi	irm NRD number	1	5	4	0	0			(if app	licable)				
Indicate whether the person cor	npensated facilitated	the dist	tribution	throug	gh a fundi	ng port	al or an	interne	et-based	portal.] No	\checkmark	Yes
b) Business contact infor	mation													
If a firm NRD number is not pro	ovided in Item 8 (a), j	orovide t	he busin	iess co	ntact infor	mation	of the	person l	being cor	npensated.				
Street address														
Municipality							Р	rovinc	e/State					
Country						Р	ostal c	ode/Zi	p code					
Email address							Telep	hone r	umber					
c) Relationship to issuer	or investment fun	d mana	iger							L				
Indicate the person's relationshi											onnecte	ed" in Po	art B(2	2) of
the Instructions and the meanir	-			- 106 70	or the purp		-	-		her than an	invoct	mont fu	und)	
			-										,	
Director or officer of the	he investment fund	or invest	ment fui	nd ma	nager		Employ	ee of th	e issuer	or investm	ent fun	d mana	iger	
✓ None of the above														
d) Compensation details														
Provide details of all compensat Canadian dollars. Include cash c incidental to the distribution, su allocation arrangements with th	ommissions, securiti ch as clerical, printin	es-based g, legal d	l compei or accou	nsatior nting s	n, gifts, dis services. Al	counts n issuer	or othei • is not i	r compe required	nsation. to ask fo	Do not repo	ort payr	ments fo	or serv	vices
Cash commissions pa	id	3.16						Security	anda 1	Security c	odo 2	Securit	tu oodu	. 2
Value of all securitie							-	Security	code i	Security c		Securi		33
distributed as compensatio	-			S	ecurity co	des								
Describe t	erms of warrants, op	otions or	other rig	ghts										
Other compensation	n ⁵		Desc	ribe										
Total compensation pa	id	3.16												
Check box if the pe	rson will or may rec	eive any	deferre	d com	pensation	(descr	ibe the	terms b	elow)					
Industrielle Alliano Preferred Non-Vo Preferred Non-Vo	ting Shares, 1% c													4
⁴ Provide the aggregate value of additional securities of the issu- rights exercisable to acquire and ⁵ Do not include deferred comp	ier. Indicate the sec dditional securities d	urity coa	les for al											

a) Name of person comp	ensated and regis	stration	status												
Indicate whether the person con	npensated is a regist	trant.		[No		\checkmark	Yes							
If the person compensated is an	individual, provide	the nam	e of the	individ	ual.										
Full legal name of indivi	idual														
		Family na	ame		-	First	t given n	name			Sec	ondary (given na	ames	
If the person compensated is no	t an individual, prov	ide the f	following	ı inform	nation.										
Full legal name	of non-individual	PI Fin	ancial												
Fi	rm NRD number	5	2	9	0				(if	appli	cable)				
Indicate whether the person con	npensated facilitated	d the dist	tribution	throug	gh a fund	ng port	al or ar	n intern	et-bas	sed po	ortal.] No	\checkmark	Yes
b) Business contact inform	mation														
If a firm NRD number is not pro	vided in Item 8 (a), j	provide t	the busir	ness cor	ntact info	mation	of the	person	being	com	pensated.				
Street address															
Municipality							F	Provinc	e/Sta	ate				-	
Country						Ρ	ostal o	code/Z	ip co	de					
Email address							Telep	hone	numb	er					
c) Relationship to issuer	or investment fun	d mana	ager												
Indicate the person's relationshi the Instructions and the meanin											ning of "c	onnecte	ed" in P	ort B	(2) of
Connect with the issue	-				r - r			-			er than ar	n invest	ment f	und)	
Director or officer of th	ne investment fund	or invest	tment fu	nd mar	nager		Employ	vee of t	he iss	uer o	r investm	ent fun	d man	ader	
✓ None of the above							1-7								
d) Compensation details															
Provide details of all compensati	on naid or to he na	id to the	nerson	identifi	ed in Iter	2 8(a) ir	n conne	ection w	ith th	o dist	ribution I	Provide	all am	ounts	in
Canadian dollars. Include cash c	ommissions, securiti	es-based	d compe	nsation	, gifts, dis	counts	or othe	r comp	ensatio	on. D	o not repo	ort payı	ments f	for sei	rvices
incidental to the distribution, suc allocation arrangements with the										sk for	details al	bout, or	report	on, ii	nternal
Cash commissions pa		19.28	<i>yees of e</i>	i non a	latitudut	comper	.succu c								
		10.20					-	Securit	y code	1	Security c	ode 2	Secur	rity coo	de 3
Value of all securitie distributed as compensation	-			S	ecurity co	des									
Describe te	erms of warrants, or	otions or	r other ri	ghts											
Other compensatior	۱ ⁵		Desc	cribe											
Total compensation pai	id	19.28		L											
Check box if the per	rson will or may rec	eive any	deferre	d comp	pensatior	(descr	ibe the	terms	below)					
PI Financial will re Shares, 1% on Cla Shares.															
⁴ Provide the aggregate value o additional securities of the issu rights exercisable to acquire ac ⁵ Do not include deferred compo- ⁵ Do not include deferred compo- ⁵ Do not include deferred compo- action of the security of the sec	er. Indicate the sec Iditional securities c	urity coa	les for a												r

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,	
✓ If the issuer is none of the	above, check this l	box and complete I	ltem 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	Family name	First given name	Secondary given names	Business loc non-individe resident jurisdictio individu	ual or ail n of		onship to ct all that	
				Province or	country	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	h individual							
c) Residential address of eac		racidantial address	for each individua-	listed in Item O	(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	nleese William R.								
	Family name	Family name First given name Secondary given names								
Title	Portfolio Manager	rtfolio Manager								
Telephone number	6045302301	Email address will@antriminvestments.com								
Signature	"William Granleese"	Date	2019	09	04					
			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.