Form 45-106F1 Report of Exempt Distribution

BCSC EDER Reference Number 8724700

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 investment of the state of the s	ent fund)									
Underwriter	om rama)									
ITEM 3 - ISSUER NAME AND OTHE										
Provide the following information about the is:			out the fund.							
	reveceutical Medical I									
Previous full legal name C	arrara Exploration Co	rp.								
If the issuer's name changed in the las	st 12 months, provide most r	ecent previous leg	ıal name.							
Website ht	ttps://preveceutical.co	m	(if applicable	e)						
If the issuer has a legal entity identifier_ provid	le below. Refer to Part B of ti	he Instructions for	the definition o	of "legal entity identifier".						
Legal entity identifier										
If two or more issuers distributed a single secu	rity, provide the full legal na	me(s) of the co-is.	suer(s) other th	an the issuer named above	2.					
Full legal name(s) of co-issuer(s)			(if applicable	e)						
ITEM 4 - UNDERWRITER INFORMAT										
If an underwriter is completing the report, prov	vide the underwriter's full leg	gal name and firm	NRD number.		1					
Full legal name]					
Firm NRD number		(if ap	oplicable)							
If the underwriter does not have a firm NRD no	umber, provide the head offi	ice contact inform	ation of the un	derwriter.	_					
Street address										
Municipality		Pro	vince/State							
Country		Postal cod	de/Zip code							
Telephone number			(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 4 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.								
Exploration Development Production								
Is the issuer's primary business to invest all or substantially all of its assets in any of the following? If yes, select all that apply.								
☐ Mortgages ☐ Real estate ☐ Commercial/business debt ☐ Consumer debt ☐ Private companies								
☐ Cryptoassets								
b) Number of employees								
Number of employees: ✓ 0 - 49								
c) SEDAR profile number								
Does the issuer have a SEDAR profile?								
No ✓ Yes If yes, provide SEDAR profile number 0 0 0 3 9 7 9 5								
If the issuer does not have SEDAR profile complete item 5(d) - (h).								
d) Head office address								
Street address Province/State								
Municipality Postal code/Zip code								
Country Telephone number								
e) Date of formation and financial year-end								
Date of formation Financial year-end MM DD 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 ☐ NT								
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 manager 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 Province/State							
Country	Postal code/Zip code							
Telephone number	Website (if applicable)							
b) Type of investment	fund							
Type of investment fund tha	nt most accurately identifies the issuer (select only one) .							
Money market	☐ Equity ☐ Fixed income ☐ Balanced							
Alternative strateg	gies Cryptoasset Other (describe)							
	h of the following apply to the investment fund .							
	n other investment fund issuers							
☐ Is a UCITs Fund¹								
¹ Undertaking for the Collec (EU) directives that allow co	tive Investment of Transferable Securities funds (UCITs Funds) are investment funds regulated by the European Union ollective investment schemes to operate throughout the EU on a passport basis on authorization from one member state.							
c) Date of formation a	nd financial year-end of the investment fund							
Date of format	tion Financial year-end MM DD							
d) Reporting issuer st	atus of the investment fund							
Is the investment fund a rep	orting issuer in any jurisdication of Canada? No Yes							
If yes, select the jurisdictions	s of Canada in which the investment fund is a reporting issuer.							
AII	AB BC MB NB NL NT							
□ NS □	NU ON PE QC SK T							
e) Public listing status	s of the investment fund							
If the investment fund has a	CUSIP number, provide below (first 6 digits only)							
	CUSIP number							
	blicly listed, provide the name of the exchange on which the investment fund's securities primarily trade. Provide only the oot a trading facility such as, for example, an automated trading system.							
Exchange n								
f) Net asset value (NA	AV) 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 \$500	DM S500M to under \$1B S1B or over Date of NAV calculation: YYYY MM DD							

ITEM 7 - INFORMATION ABOUT THE DISTRIBUTION

US dollar

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
Selec	t the currency or currencies in which the distribution was made. All dollar amounts provided in the report must be in Canadian dollars.

Euro

b) Distribution date(s)

✓ Canadian dollar

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.

Other (describe)

Start date 2019 02 11 YYYY MM DD

End date 2019 02 11

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 \$		
		CUSIP number (if applicable)	Description of security	Number of securities	Single or lowest price	Highest price	Total amount	
U	В	S	74141E104	Units consisting of one common share and one common share purchase warrant	6,100,000.00	0.0500	0.0500	305,000.00

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.

Convertible / exchangeable security code		able L		hangeable		xchangeable		exchangeable		derlyi			se price idian \$)	Expiry date (YYYY- MM-DD)	Conversion ratio	Describe other items (if applicable)
						Lowest	Highest									
W	N	Т	С	М	S	0.0800	0.0800	2021-02-11		Each common share purchase warrant entitles the holder thereof to acquire one common share at \$0.08 per share for a period of 24 months from the date of 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 \$)					
British Columbia	NI 45-106 2.3 [Accredited investor]	9	305,000.00					
	Total dollar amount of securities distributed							
	Total number of unique purchasers ^{2b}	9						

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

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. 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)			

ITEM 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 compensated and registration status											
Indicate whether the person compensated is a registrant. No Ves											
If the person compensated is an individual, provide the name of the individual.											
Full legal name of indiv	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	Full legal name of non-individual Haywood Securities Inc.										
Firm NRD number 1 6 3 0 (if applicable)											
Indicate whether the person co	Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal.										
b) Business contact infor	mation										
If a firm NRD number is not pro	ovided in Item 8 (a), p	provide the busin	ess co	ontact info	rmation	of the	person b	eing con	npensated.		
Street address											
Municipality						F	Province	e/State			
Country					Po	ostal	code/Zip	o code			
Email address						Telep	ohone n	umber			
c) Relationship to issuer	or investment fun	d manager		•							
	Indicate the person's relationship with the issuer or investment fund manager (select all that apply). Refer to the meaning of "connected" in Part B(2) of the Instructions and the meaning of "control" in section 1.4 of NI 45-106 for the purposes of completing this section.										
<u> </u>		-						,	ner than an invest	,	
Director or officer of t	he investment fund (or investment fu	nd ma	anager		Emplo	yee of the	e issuer	or investment fun	d manager	
✓ None of the above											
d) Compensation details											
Provide details of all compensate Canadian dollars. Include cash of incidental to the distribution, surallocation arrangements with the	commissions, securiti ch as clerical, printin	es-based compei g, legal or accou	nsatio nting	n, gifts, dis services. A	counts c n issuer	or othe is not	er compei required	nsation. to ask fo	Do not report pay	ments for servi	ices
Cash commissions pa	aid 11,2	00.00				Г	Security	code 1	Security code 2	Security code	3
Value of all securities	es			Security co	ndes		W N				
distributed as compensation	n ⁴									 	
Describe t	Describe terms of warrants, options or other rights Finder's warrants equal to 8% of the number of securities issued to subscribers introduced to the Issuer by the finder, each warrant entitles the holder thereof to purchase one common share at the exercise price of \$0.08 per share for a period of 24 months										
Other compensatio	n ⁵	Desc	cribe								
Total compensation pa	id 11,20	00.00									
Check box if the pe	rson will or may rec	eive any deferre	d com	npensatior	descri	be the	terms b	elow)			
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 secu dditional securities d	urity codes for a									

a) Name of person comp	a) Name of person compensated and registration status										
Indicate whether the person compensated is a registrant. No Yes											
If the person compensated is ar	n individual, provide	the name	of the indiv	ridual.							
Full legal name of indiv	Full legal name of individual										
		Family nan	ne	•	First o	given n	name	•	Secondar	given names	
If the person compensated is no	·	•									
Full legal name of non-individual Mackie Research Capital Corporation											
Firm NRD number 3 0 7 0 (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 info	mation										
If a firm NRD number is not pro	ovided in Item 8 (a), p	orovide th	e business c	contact info	rmation o	of the	person b	eing con	npensated.		
Street address											
Municipality						F	Province	/State			
Country				Ī	Po	ostal o	code/Zip	code			_
Email address				Ī	-	Telep	hone n	umber			
c) Relationship to issuer	or investment fun	d manag	jer								
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)											
✓ None of the above	Director or officer of the investment fund or investment fund manager Employee of the issuer or investment fund manager										
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 pa	aid						Security	code 1	Security code 2	Security co	ode 3
Value of all securitie		00.00		Security co	odes		СМ	S	W N T		
Describe terms of warrants, options or other rights Finder's warrants equal to 8% of the number of securities issued to subscribers introduced to the Issuer by the finder, each warrant entitles the holder thereof to purchase one common share at the exercise price of \$0.08 per share for a period of 24 months											
Other compensatio	n ⁵		Describe								
Total compensation pa	8,00	00.00		L							
Check box if the person will or may receive any deferred compensation (describe the terms below)											
⁴ Provide the aggregate value of additional securities of the issurights exercisable to acquire a ⁵ Do not include deferred comp	uer. Indicate the secu dditional securities o	urity code	s for all sec								ər

a) Name of person compensated and registration status									
Indicate whether the person compensated is a registrant. No Ves									
If the person compensated is an individual, provide the name of the individual.									
Full legal name of individual									
	Family name	First given	name	Secondary (given names				
If the person compensated is not an individual, provide the following information.									
Full legal name of non-individual Canaccord Genuity Corp.									
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. V No Yes									
b) Business contact information									
If a firm NRD number is not provided in I	em 8 (a), provide the business c	ontact information of the	person being co	ompensated.					
Street address									
Municipality		F	Province/State	•					
Country		Postal	code/Zip code	,					
Email address		Telep	ohone number						
c) Relationship to issuer or invest	ment 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 inve		· · · · <u>—</u>	•	". other than an invest	tment fund)				
Director or officer of the investr		_		r or investment fun					
_	lent fand of investment fand me	anagei Emplo	yee of the issue	i or investment tun	u manager				
None of the above									
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	4,000.00	, , , , , , , , , , , , , , , , , , , ,							
Value of all securities			Security code 1	Security code 2	Security code 3				
distributed as compensation ⁴		Security codes							
Describe terms of warrants, options or other rights									
Other compensation ⁵	Describe								
Total compensation paid	4,000.00								
Check box if the person will or may receive any deferred compensation (describe the terms below)									
⁴ Provide the aggregate value of all secu	rities distributed as compensation	on, <u>excluding</u> options, wa	arrants or other	rights exercisable t	to acquire				
additional securities of the issuer. Indica rights exercisable to acquire additional s ⁵ Do not include deferred compensation.	te the security codes for all sec								

тем 9 - Directors, Execu	TIVE OFFICERS	AND PROMOT	ERS OF THE I SS	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 juris	sdiction 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 issu	ıer ⁶						_	
Provide name of	foreign public issue	r						7	
Issuer distributing only eligil	ble foreign securities	and the distribution	on 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 box 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									
Provide the following information for each director, executive officer and promoter of the issuer. For locations within Canada, state the province or territory; otherwise state the country. For "Relationship to issuer", "D" – Director, "O" – Executive Officer, "P" – Promoter.									
Organization or company name	Organization or company name Family name First given name Secondary given names Secondary given names Business location of non-individual or residentail jurisdiction of individual Relationship to issuer (select all that apply)								
				Province or	country	D	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	jurisdiction of (select o		tionship to promoter one or both if applicable		
				Province or country			C)	
c) Residential address of each individual									
Complete Schedule 2 of this form providing the full residential address for each individual listed in Item 9(a) and (b) and attach to the completed report. Schedule 2 also requires information to be provided about control persons.									

ITEM 10 - CERTIFICATION

Provide the following certification and business contact information of an officer, director or agent of the issuer or underwriter. If the issuer or underwriter is not a company, an individual who performs functions similar to that of a director or officer may certify the report. For example, if the issuer is a trust, the report may be certified by the issuer's trustee. If the issuer is an investment fund, a director or officer of the investment fund manager (or, if the investment fund manager is not a company, an individual who performs similar functions) may certify the report if the director or officer has been authorized to do so by the investment fund.

The certification may be delegated, but only to an agent that has been authorized by an officer or director of the issuer or underwriter to prepare and certify the report on behalf of the issuer or underwriter. If the report is being certified by an agent on behalf of the issuer or underwriter, provide the applicable information for the agent in the boxes below.

If the individual completing and filing the report is different from the individual certifying the report, provide the name and contact details for the individual completing and filing the report in Item 11.

The signature on the report must be in typed form rather than handwritten form. The report may include an electronic signature provided the name of the signatory is also in typed form.

Securities legislation requires an issuer or underwriter that makes a distribution of securities under certain prospectus exemptions to file a completed report of exemt distribution.

By completing the information below, I certify, on behalf of the issuer/underwriter/investment fund manager, to the securities regulatory authority or regulator, as applicable, that I have reviewed this report and to my knowledge, having exercised reasonable diligence, the information provided in this report is true and, to the extent required, complete.

Name of issuer/underwriter/ investment fund manager/agent	PreveCeutical Medical Inc.							
Full legal name	Rajan							
	Family name	•	Secondary given names					
Title	Chief Financial Officer, Controller and Corporate Secretary							
Telephone number	6044167777	Email address	shabira@	shabira@preveceutical.com				
Signature	Shabira Rajan	Date	2019	02	15			
			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	Lotz	Jonathan	Christopher	Title	Solicitor				
	Family name	First given name	Secondary given names						
Name of company	Lotz & Company								
Telephone number	6046990110	Em	ail address jlotz@lotzar	ndco.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.