Form 45-106F1 Report of Exempt Distribution

BCSC EDER Reference Number 8704600

ITEM 1 - REPORT TYPE				
✓ Amended report If amended,	, provide filing date of report the	at is being am	ended 2019 01 18	(YYYY-MM-DD)
ITEM 2 - PARTY CERTIFYING THE REP	PORT			
Indicate the party certifying the report (select onl Instrument 81-106 Investment Fund Continuous			vestment fund, refer to section	on 1.1 of National
☐ Investment fund issuer		02 200.		
✓ Issuer (other than an investmen	nt fund)			
Underwriter	it rand)			
ITEM 3 - ISSUER NAME AND OTHER	IDENTIFIERS			
Provide the following information about the issue	er, or if the issuer is an investment fund,	about the fund.		
Full legal name Car	nnAmerica Brands Corp.			
Previous full legal name Trai	nsform Capital Corp.			
If the issuer's name changed in the last 1	1.2 months, provide most recent previous	legal name.		
Website http	s://cannamericabrands.com/	(if applicab	le)	
If the issuer has a legal entity identifier. provide b	below. Refer to Part B of the Instructions	for the definition	of "legal entity identifier".	
Legal entity identifier				
If two or more issuers distributed a single security	y, provide the full legal name(s) of the c	 o-issuer(s) other th	nan the issuer named above.	
Full legal name(s) of co-issuer(s)		(if applicab	e)	
ITEM 4 - UNDERWRITER INFORMATION	DN			
If an underwriter is completing the report, provide	e the underwriter's full legal name and	firm NRD number		1
Full legal name				
Firm NRD number (if applicable)				
If the underwriter does not have a firm NRD num	nber, provide the head office contact inf	ormation of the ur	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 3 1 1 9 9 0			
If the issuer is in the mining industry , indicate the stage of operations. This does not apply to issuers that provide services to issuers operating in the mining industry. Select the category that best describes the issuer's stage of operations.			
Exploration Development Production			
Is the issuer's primary business to invest all or substantially all of its assets in any of the following? If yes, select all that apply.			
☐ Mortgages ☐ Real estate ☐ Commercial/business debt ☐ Consumer debt ☐ Private companies			
☐ Cryptoassets			
b) Number of employees			
Number of employees: ✓ 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 4 5 3 4 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 MM DD MM DD			
f) Reporting issuer status			
Is the issuer a reporting issuer in any jurisdication of Canada? No Yes			
If yes, select the jurisdictions of Canada in which the issuer is a reporting issuer.			
AII AB BC MB NB NL NT			
□ NS □ NU □ ON □ PE □ QC □ SK □ YT			
g) Public listing status			
If the issuer has a CUSIP number, provide below (first 6 digits only)			
CUSIP number			
If the issuer is publicly listed, provide the name of the exchange on which the issuer's equity securities primarily trade. Provide only the name of an exchange and not a trading facility such as, for example, an automated trading system.			
Exchange and not a trading facility such as, for example, an automated trading system.			
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 inves	tment fund, provide the following information.			
a) Investment fund ma	anager information			
Full legal name				
Firm NRD number	(if applicable)			
If the investment fund mand	ager does not have a firm NRD number, provide the head office contact information of the investment fund manager.			
Street address				
Municipality	Province/State 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	d) Reporting issuer status 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			
	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 (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

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									
Sele	Select the currency or currencies in which the distribution was made. All dollar amounts provided in the report must be in Canadian dollars.									
√	Canadian dollar		3 dollar] Euro	Other (describe)				
b)	Distribution date(s)									
as l	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.									
	Sta	art date	2019	01	10	End date	2019	01	10	

YYYY

DD

c) Detailed purchaser information

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

DD

MM

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 \$	
3	Securi		CUSIP number (if applicable)	Description of security	Number of securities	Single or lowest price	Highest price	Total amount
L	В	s	13766C	Each Unit is comprised of one Common Share and one Common Share purchase warrant. Each Warrant entitles the holder thereof to purchase one Common Share at a price of \$0.80.	2,662,326.00	0.6000		1,597,396.60

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.

	Conve exchar securi	ngea	able			se price adian \$)	Expiry date (YYYY- MM-DD)	Conversion ratio	Describe other items (if applicable)		
							Lowest	Highest			
ſ	N I	N	Т	С	М	S	0.8000	0.8000	2021-01-10		

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]	1	30,000.00
Alberta	NI 45-106 2.3 [Accredited investor]	1	60,000.00
United States	NI 45-106 2.3 [Accredited investor]	5	957,377.00
Ontario	NI 45-106 2.3 [Accredited investor]	3	400,019.60
Switzerland	NI 45-106 2.3 [Accredited investor]	1	49,999.80

United Arab Emirates	NI 45-106 2.3 [Accredited investor]	1	100,000.20
	1,597,396.60		
	Total number of unique purchasers ^{2b}	12	

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

g) Net proceeds to the investment fund by jurisdiction

If the issuer is an investment fund, provide the net proceeds to the investment fund for each jurisdiction of Canada and foreign jurisdiction where a purchaser resides. 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)

^{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.

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. 5					

a) Name of person comp	ensated and regis	tration status						
Indicate whether the person co	mpensated is a regist	rant.	☐ No	✓ Yes				
If the person compensated is ar	n individual, provide t	he name of the indiv	ridual.					
Full legal name of indiv	/idual							
		Family name	Firs	st given name		Secondary	given names	<u> </u>
If the person compensated is no	ot an individual, prov	ide the following info	ormation.					
Full legal name	of non-individual	Canaccord Genu	ity Corp.					
F	irm NRD number	9 0 0		(i	if appl	icable)		
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal. • No : Yes								
b) Business contact infor	rmation							
If a firm NRD number is not pro	ovided in Item 8 (a), p	provide the business o	contact information	n of the person bein	ig com	pensated.		
Street address	609 Granville Stre	et, Suite 2200						
Municipality	Vancouver			Province/S	tate	British Colu	mbia	
Country	Canada		F	Postal code/Zip c	ode	V7Y 1H2		
Email address	info@canaccordg	enuity.com		Telephone num	ber	6046437300)	
c) Relationship to issuer	or investment fund	d manager						
Connect with the issu Director or officer of t None of the above	uer or investment fun	d manager		Insider of the issue Employee of the is	er (oth			
d) Compensation details								
Provide details of all compensate Canadian dollars. Include cash a incidental to the distribution, sur allocation arrangements with the	commissions, securition ch as clerical, printing the directors, officers o	es-based compensati g, legal or accounting r employees of a nor	ion, gifts, discounts g services. An issue	or other compensa r is not required to	tion. E ask fo	Do not report pa	yments for s	ervices
Cash commissions pa	26,24	48.99		Security coo	de 1	Security code 2	Security c	ode 3
Value of all securitie distributed as compensation	310.	48.20	Security codes	C M	S	WNT		
•		otions or other rights	53,247 Shares	s at \$0.60				
Describe terms of warrants, options or other rights 53,247 Shares at \$0.60 53,247 Warrants exercisable to purchase one common share at \$0.80 and one common share purchase warrant within 24 months of issuance.								
Other compensatio	n ⁵	Describe	Broker Units. Share and one	Warrants exerci Each Broker Uni e Broker Unit Wa isable to purchas	t is co arrant	omprised of or . Each Broker	ne Broker U Unit Warra	Jnit
Total compensation pa	58,19	97.19						
Check box if the pe	erson will or may rece	eive any deferred co	mpensation (desc	ribe the terms belo	w)			
⁴ Provide the aggregate value of additional securities of the issu- rights exercisable to acquire a ⁵ Do not include deferred comp	uer. Indicate the secu dditional securities o	ırity codes for all sed						er

a) Name of person comp	ensated and registration	n status				
Indicate whether the person co.	mpensated is a registrant.		☐ No	✓ Yes		
If the person compensated is an	n individual, provide the nar	ne of the indiv	idual.			
Full legal name of indiv	vidual					
	Family ı	name	First	given name	Secondary	given names
If the person compensated is no	ot an individual, provide the	following info	rmation.			
Full legal name	of non-individual 2242	257 Ontario	Inc.			
	irm NRD number				licable)	
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal. Ves						
b) Business contact info	mation					
If a firm NRD number is not pro	<u> </u>		ontact information	of the person being con	npensated.	
Street address	333 Bay Street, Suite 1	700				
Municipality	Toronto			Province/State	Ontario	
Country	Canada		P	ostal code/Zip code	M5H 2R2	
Email address	info@gravitasfinancial.c	com		Telephone number	6472521674	
c) Relationship to issuer	or investment fund man	ager				
<u> </u>	ner or investment fund man	ager		Insider of the issuer (otl	her than an inves	,
d) Compensation details						
Provide details of all compensations of all compensations of all compensations of all compensations. Include cash control incidental to the distribution, surprise allocation arrangements with the	tion paid, or to be paid, to the commissions, securities-base ch as clerical, printing, legal directors, officers or emplo	ed compensation I or accounting	on, gifts, discounts services. An issuer	or other compensation. It is not required to ask fo	Do not report pay	ments for services
Cash commissions pa	21,874.15			Security code 1	Security code 2	Security code 3
Value of all securitie distributed as compensation	21 0/7 60		Security codes	C M S	W N T	
·	erms of warrants, options o	or other rights	53,246 Shares	s at \$0.60		
		3	53246 Warran	ts exercisable to pure common share pure		
Other compensation	n ⁵	Describe	Broker Units. E Share and one	Warrants exercisable Each Broker Unit is c Broker Unit Warran sable to purchase or	omprised of one t. Each Broker I	e Broker Unit Unit Warrant
Total compensation pa	53,821.75					
Check box if the pe	erson will or may receive an	y deferred cor	mpensation (descr	ibe the terms below)		
⁴ Provide the aggregate value of additional securities of the issuinghts exercisable to acquire a ⁵ Do not include deferred comp	uer. Indicate the security co dditional securities of the is	des for all sec				

a) Name of person comp	pensated and registratio	n status								
Indicate whether the person co	mpensated is a registrant.		☐ No	✓ Y	Yes					
If the person compensated is a	n individual, provide the nar	me of the indivi	dual.							
Full legal name of indi	vidual									
	Family	name	Firs	t given nan	ne		Seco	ondary give	n name	÷s
If the person compensated is n	ot an individual, provide the	following infor	mation.							
Full legal name	of non-individual PI Fi	nancial Corp.								
F	irm NRD number				(i	f appli	cable)			
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal.										
b) Business contact info	rmation									
If a firm NRD number is not pr	ovided in Item 8 (a), provide	the business co	ontact information	of the pe	erson bein	g com	pensated.			
Street address	666 Burrard Street - Su	ite 1900								
Municipality	VANCOUVER			Pro	ovince/S	tate	British (Columbia	ì	
Country	Canada] F	Postal co	de/Zip c	ode	V6C 3N	J 1		
Email address				Telepho	one num	ber				
c) Relationship to issuer	or investment fund man	nager								
Indicate the person's relationsh the Instructions and the meani	- T		-				ning of "co	onnected"	in Part	: B(2) of
	uer or investment fund man		· · · <u></u>	Insider of	-		er than an	investme	nt fund	d)
Director or officer of	the investment fund or inve	stment fund ma	anager \square	Employee	e of the is	suer o	r investm	ent fund r	nanage	er
✓ None of the above			<u>—</u>							
d) Compensation details	;									
Provide details of all compensa Canadian dollars. Include cash incidental to the distribution, su allocation arrangements with th	commissions, securities-bas uch as clerical, printing, lega	ed compensation lor accounting	n, gifts, discounts services. An issue	or other c r is not red	compensa quired to	tion. D ask for	o not repo	ort payme	nts for	services
Cash commissions pa	aid 17,499.32			Se	ecurity cod	le 1	Security c	ode 2 S	ecurity	code 3
Value of all securition distributed as compensation			Security codes	W	/ N	Т				
Describe	terms of warrants, options	or other rights	27,165 Warra \$0.60 for a pe							of
Other compensation	on ⁵	Describe	ψο.σο τοι α ρε	1100 01 2-	 11101101	3 11011	T date of	issuarice	-	
Total compensation pa	aid 17,499.32									
Check box if the pe	erson will or may receive ar	ny deferred con	npensation (desc	ribe the te	erms belo	w)				
⁴ Provide the aggregate value additional securities of the iss rights exercisable to acquire a ⁵ Do not include deferred comp	uer. Indicate the security conditional securities of the is	odes for all sect								

a) Name of person comp	pensated and registration status						
Indicate whether the person co	mpensated is a registrant.	✓ No Yes					
If the person compensated is a	n individual, provide the name of the indiv	idual.					
Full legal name of indiv	vidual						
	Family name	First given name	Secondary given names				
If the person compensated is no	ot an individual, provide the following info	rmation.					
Full legal name	e of non-individual GMP Securities L	P					
F	Firm NRD number	(if app	licable)				
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal. V No Yes							
b) Business contact info	rmation						
If a firm NRD number is not pr	ovided in Item 8 (a), provide the business o	ontact information of the person being con	npensated.				
Street address	145 King Street West, Suite 300						
Municipality	Toronto	Province/State	Ontario				
Country	Canada	Postal code/Zip code	M5H 1J8				
Email address	investorrelations@gmpcapital.com	Telephone number	4163678600				
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.						
	uer or investment fund manager	<u> </u>	ner than an investment fund)				
<u> </u>	-		ŕ				
_	the investment fund or investment fund m	anager Employee or the issuer	or investment fund manager				
✓ None of the above							
d) Compensation details	3						
Canadian dollars. Include cash incidental to the distribution, su	commissions, securities-based compensati	tified in Item 8(a) in connection with the dis on, gifts, discounts or other compensation. I g services. An issuer is not required to ask fo -individual compensated by the issuer.	Do not report payments for services				
Cash commissions pa	aid 13,124.59	Security code 1	Security code 2 Security code 3				
Value of all securition distributed as compensation		Security codes W N T					
·	terms of warrants, options or other rights	20,374 Warrants exercisable to pur					
Other compensation	on ⁵ Describe	\$0.60 for a period of 24 months from	in date of issuance.				
Total compensation pa							
	erson will or may receive any deferred co	mpensation (describe the terms below)					
	, ,	,					
4 Daniel de Marie de la companya de	of all annualities all at the stand						
additional securities of the issa	uer. Indicate the security codes for all sec additional securities of the issuer.	ion, <u>excluding</u> options, warrants or other rigurities distributed as compensation, <u>includ</u>	gnts exercisable to acquire <u>ding</u> options, warrants or other				

a) Name of person com	pensated and registration statu	IS					
Indicate whether the person co	mpensated is a registrant.			✓ Yes			
If the person compensated is a	n individual, provide the name of th	ne individ	lual.				
Full legal name of indi	vidual						
	Family name		First give	en name	Secondary given names		
If the person compensated is n	ot an individual, provide the followi	ng inforr	nation.				
Full legal name	e of non-individual National Ba	ank Fina	ancial ITF INFOR F	inancial Inc.			
F	Firm NRD number			(if appl	icable)		
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal.							
b) Business contact info	rmation						
If a firm NRD number is not pr	rovided in Item 8 (a), provide the bu	siness co	ntact information of t	the person being com	pensated.		
Street address	M100-1010 de la Gauchetiere	Street	West				
Municipality	Montreal			Province/State	Québec		
Country	Canada		Post	al code/Zip code	H3B 5J2		
Email address	info@inforfg.com		Te	elephone number	4166462656		
c) Relationship to issue	or investment fund manager						
	nip with the issuer or investment fun ing of "control" in section 1.4 of NI 4				ning of "connected" in Part B(2) of		
	uer or investment fund manager	#J-100 f0	· · · · <u>—</u>	•	er than an investment fund)		
<u> </u>	_	£	_	·	ŕ		
Director or officer of	the investment fund or investment	runa ma	nager Em	ployee of the issuer (or investment fund manager		
✓ None of the above							
d) Compensation details	3						
Canadian dollars. Include cash incidental to the distribution, su	tion paid, or to be paid, to the perso commissions, securities-based comp uch as clerical, printing, legal or acco he directors, officers or employees o	pensatior ounting s	n, gifts, discounts or o services. An issuer is r	ther compensation. E not required to ask fo			
Cash commissions p	aid 8,749.61			Security code 1	Security code 2 Security code 3		
Value of all securiti distributed as compensati		S	ecurity codes	W N T			
·	terms of warrants, options or other	rights			chase a unit at a price of		
Other compensation	on ⁵ De	escribe	\$0.60 for a period	of 24 months from	n date of issuance		
Total compensation p							
Check box if the p	erson will or may receive any defer	red com	pensation (describe	the terms below)			
_							
⁴ Provide the aggregate value	of all securities distributed as comp	pensatio	n, <u>excluding</u> options.	warrants or other ric	ghts exercisable to acquire		
additional securities of the iss	uer. Indicate the security codes for additional securities of the issuer.						

тем 9 - Directors, Execu	TIVE OFFICERS	AND PROMOT	ERS OF THE I SS	SUER					
If the issuer is an investment fund	d, do not complete l	Item 9. Procced to	Item 10.						
Indicate whether the issuer is any o	f the following (select	t the one that appli	es - if more than one	applies, select onl	y one).				
✓ Reporting issuer in any jurisdiction of Canada									
Foreign public issuer									
Wholly owned subsidiary of	a reporting issuer in	any jurisdiction of	Canada ⁶						
Provide name of reporting issuer									
Wholly owned subsidiary of	a foreign public issu	ıer ⁶						_	
Provide name of	foreign public issue	r						7	
Issuer distributing only eligil	ble foreign securities	and the distribution	n is to permitted clie	ents only ⁷				_	
If the issuer is at least one of the	above, do not comp	olete Item 9(a) – (d	c). Proceed to Item	10.					
⁶ An issuer is a wholly owned subsidiary of a reporting issuer or a foreign public issuer if all of the issuer's outstanding voting securities, other than securities that are required by law to be owned by its directors, are beneficially owned by the reporting issuer or the foreign public issuer, respectively. ⁷ Check this box if it applies to the current distribution even if the issuer made previous distributions of other types of securities to non-permitted clients. Refer to the definitions of "eligible foreign security" and "permitted client" in Part B(1) of the Instructions.									
If the issuer is none of the	above, check this b	ox and complete	Item 9(a) - (c).						
a) Directors executive officer	e and promoters of	of the issuer							
<u> </u>	a) Directors, executive officers and promoters of the issuer Provide the following information for each director, executive officer and promoter of the issuer. For locations within Canada, state the province or								
territory; otherwise state the country.							province		
Organization or company name	Organization or company name Family name First given name Secondary given names 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			to promo		
				Province or country	D		C)	
c) Residential address of eac	h individual								
Complete Schedule 2 of this form completed report. Schedule 2 also					(a) and (b)	and at	tach to t	he	

ITEM 10 - CERTIFICATION

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

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

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

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

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

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

Name of issuer/underwriter/ investment fund manager/agent	CannAmerica Brands Corp.					
Full legal name	Morrison Jon					
	Family name	First given name	Secondary given names			
Title	Chief Financial Officer					
Telephone number	6046026815	Email address	jon@cannamericabrands.com			
Signature	Jon Morrison	Date	2019 01 18			
			YYYY MM DD			

TEM 11- CONTACT PERSON								
Provide the following business contact information for the individual that the securities regulatory authority or regulator may contact with any questions regarding the contents of this report, if different than the individual certifying the report in Item 10.								
Same as individual certifying the report								
Full legal name	Deans	Brandon		Title	Associate			
	Family name	First given name	Secondary given names	_				
Name of company	DuMoulin Black LLP							
Telephone number	6046026815	Em	ail address skavanagh	@dumoul	inblack.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.