# Form 45-106F1 Report of Exempt Distribution

## IT IS AN OFFENCE TO MAKE A MISREPRESENTATION IN THIS REPORT

ITEM 1 - REPORT TYPE										
<ul> <li>New report</li> <li>Amended report If amended, provide filing date of report that is being amended (YYYY-MM-DD)</li> </ul>										
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 invest	stment fund)									
Item 3 - Issuer Name and Ot	HER IDENTIFIERS									
Provide the following information about th		vestment fund, about the fund.								
Full legal name	Antrim Balanced Morte									
Previous full legal name										
If the issuer's name changed in	the last 12 months provide m	ost recent previous legal name								
Website	www.antriminvestment	-	(if applicable)							
If the issuer has a legal entity identifier, pro Legal entity identifier	Svide below. Refer to Part B of t		oj legal entity taentifier							
ITEM 4 - UNDERWRITER INFORM	IATION									
If an underwriter is completing the report,	provide the underwriter's full le	gal name and firm National Reg	gistration Database (NRD	) number.						
Full legal name										
Firm NRD number	(if applicable)									
If the underwriter does not have a firm NR.	D number, provide the head of	fice contact information of the u	nderwriter.							
Street address	Street address									
Municipality Province/State										
Country										
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 corresponds to the issuer's primary business activity. For more information on finding the NAICS industry code go to <b>Statistics Canada's NAICS industry search tool</b> .									
NAICS industry code522299									
If the issuer is in the <b>mining industry</b> , 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 Commerial/business debt Consumer debt Private companies									
b) Number of employees									
Number of employees:         Image: O - 49         Image: 50 - 99         Image: 100 - 499         Image: 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									
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.									
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 names of all exchanges on which its securities are listed. Include only the names of exchanges for which the issuer has applied for and received a listing, which excludes, for example, automated trading systems.									
Exchange name(s):									
h) Size of issuer's assets									
Select the size of the issuer's assets for its most recent financial year-end (Canadian \$). If the issuer has not existed for a full 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 \$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 manager does not have a firm NRD number, provide the head office contact information of the investment fund manager.											
Street address											
Municipality	Province/State										
Country	Postal code/Zip code										
Telephone number	Website (if applicable)										
b) Type of investment	fund										
Type of investment fund that	most accurately identifies the issuer (select only one) .										
Money market	Equity Fixed income										
Balanced	Alternative strategies Other (describe)										
Indicate whether one or both	of the following apply to the investment fund .										
Invests primarily in	other investment fund issuers										
Is a UCITs Fund <sup>1</sup>											
<sup>1</sup> Undertaking for the Collectiv directives that allow collective	re Investment of Transferable Securities funds (UCITs Funds) are investment funds regulated by the European Union (EU) e investment schemes to operate throughout the EU on a passport basis on authorization from one member state.										
	nd financial year-end of the investment fund										
Date of formati											
	YYYY MM DD MM DD										
d) Reporting issuer sta	atus of the investment fund										
	orting issuer in any jurisdication of Canada? 🔲 No 🗌 Yes										
If yes, select the jurisdictions of All	of Canada in which the investment fund is a reporting issuer.           AB         BC         MB         NL         NT										
e) Public listing status	NU         ON         PE         QC         SK         YT           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 names of all exchanges on which its securities are listed. Include only the names of exchanges for											
which the issuer has applied for and received a listing, which excludes, for example, automated trading systems.											
Exchange name											
f) Net asset value (NAV) of the investment fund											
Select the NAV range of the investment fund as of the date of the most recent NAV calculation (Canadian \$).											
\$0 to under \$5M	S5M to under \$25M \$25M to under \$100M										
\$100M to under \$500											
	YYYY MM DD										

Iten	ITEM 7 - INFORMATION ABOUT THE DISTRIBUTION													
puro	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, which should be disclosed in Item 8. The information provided in Item 7 must reconcile with the information provided in Schedule 1 of the report.													
a)	a) Currency													
Sele	ct tł	ne ci	urre	ency or currer	ncies in	which the di	istribution was ma	ide. All doi	llar amounts	provided i	in the report mus	st be in Canadian	dollars.	
V	] (	Can	adi	an dollar		US dollar	🗌 Eur	0	Other	(describe	e)			
b)	D	)istr	ibu	ition date(s)	1									
as	State the distribution start and end dates. If the report is being filed for securities distributed on only one distribution date, provide the distribution date as both the start and end dates. If the report is being filed for securities distributed on a continuous basis, include the start and end dates for the distribution period covered by the report. Start date             Start date           2018         07         18           Provide the distribution date of the distributed on a continuous basis, include the start and end dates for the distribution period covered by the report.													
c)	D	eta	ileo	d purchase	inforn	nation								
Con	ple	ete	Scl	hedule 1 of	this f	orm for ea	ch purchaser a	nd attac	h the sche	dule to t	he completed	report.		
d)	Т	ype	es o	of securities	distrik	outed								
In di	stru strik	ctio oute	ns † d. T	for how to inc	licate th	he security co	ibutions that take ode. If providing th 7d must reconcile	ne CUSIP r	umber, indic	ate the ful	ll 9-digit CUSIP r	number assigned i	to the security	
	_											Canadian \$		
		curi		CUSIP numb (if applicable		Desc	cription of security		Numbe secur		Single or lowest price	Highest price	Total amou	nt
	Р	R	S			ass A Pref ares	erred Non-Vo	ting	674	l,903.00	1.0000	1.0000	674,90	)3.00
	Р	R	S			ass B Series 'B' Preferred Non- ting Shares 1,661,745.00 1.0000 1.0000 1					1,661,74	15.00		
	Р	R	S			ass B Seri ting Share	es 'C' Preferre es	ed Non-	1,702	2,986.00	1.0000	1.0000	1,702,98	36.00
e)	D	)eta	ils	of rights an	d conv	vertible/exc	changeable sec	urities						
							ibuted, provide the and describe any						changeable se	curities
	S	Secu coo		Underlyin security co			ise price adian \$) Highest		ry date - MM-DD)	Convers ratio		ibe other items (if a	pplicable)	
f)	S	umr	na	ry of the dis	tributio	on by jurisc	diction and exen	nption						
<ul> <li>f) Summary of the distribution by jurisdiction and exemption</li> <li>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.</li> <li>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.</li> <li>For jurisdictions within Canada, state the province or territory, otherwise state the country.</li> </ul>														
				Province or country			Exemptio	n relied on			Number of purchasers	Total amour	nt (Canadian \$)	
				Alberta			06 2.9(2.1) [Of , ON, QC, NB,		emorandu	um]	11		341,050	.00
		В	ritis	sh Columb	ia	NI 45-10 (BC, NL)	06 2.9(1) [Offe )	ring mei	morandum	ן]	134		3,348,008	.00
				Ontario			06 2.9(2.1) [Of , ON, QC, NB,		emorandu	um]	14		133,676	.00

Québec	NI 45-106 2.9(2.1) [Offering memorandum] (AB, SK, ON, QC, NB, NS)	23	216,900.00			
	4,039,634.00					
is calculating the total number of unique nurshares to which the insuer distributed excursions, sound each nurshares only and regardless of whether						

<sup>2</sup>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.<sup>3</sup> 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	

<sup>3</sup>"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. <b>Complete additional copies of this page if more than one person was, or will be, compensated.</b>									
Indicate whether any compensation was paid, or will be paid, in connection with the distribution.									
No       ✓ Yes       If yes, indicate number of persons compensated.       4									
a) Name of person compensated and registration status									
Indicate whether the person compensated is a registrant. 🗌 No 🗹 Yes									
If the person compensated is an individual, provide the name of the individual.									
Full legal name of individual									
Family name First given name Secondary given names									
If the person compensated is not an individual, provide the following information.									
Full legal name of non-individual Raymond James Ltd.									
Firm NRD number 8 2 4 0 (if applicable)									
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal.									
b) Business contact information									
If a firm NRD number is not provided in Item 8 (a), provide the business contact information of the person being compensated.									
Street address									
Municipality Province/State									
Country Postal code/Zip code									
Email address   Telephone number									
c) Relationship to issuer or investment fund manager									
Indicate the person's relationship with the issuer or investment fund manager (select all that apply). Refer to the meaning of "connected" in Part B(2) of the Instructions and the meaning of "control" in section 1.4 of NI 45-106 for the purposes of completing this section.									
Connect with the issuer or investment fund manager Insider of the issuer (other than an investment fund)									
Director or officer of the investment fund or investment fund manager Employee of the issuer or investment fund 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 103.26 Security codes Security code 1 Security code 2 Security code 3									
Value of all securities distributed as compensation <sup>4</sup>									
Describe terms of warrants, options or other rights									
Other compensation <sup>5</sup> Describe									
Total compensation paid     103.26									
Check box if the person will or may receive any deferred compensation (describe the terms below)									
Raymond James Ltd. will receive an annual trailer fee paid monthly in the amount of 1/2% on Class A Preferred Non- Voting Shares, 1% on Class B Series 'B' Preferred Non-Voting Shares and 0% on Class B Series 'C' Preferred Non- Voting Shares.									
<sup>4</sup> Provide the aggregate value of all securities distributed as compensation, <u>excluding</u> options, warrants or other rights exercisable to acquire additional securities of the issuer. Indicate the security codes for all securities distributed as compensation, <u>including</u> options, warrants or other rights exercisable to acquire additional securities of the issuer.									

<sup>5</sup>Do not include deferred compensation.

a) Name of person compensated and registration status									
Indicate whether the person compensated is a registrant. 🗌 No 📝 Yes									
If the person compensated is an individual, provide the name of the individual.									
Full legal name of individual									
Fa	nily name	First given name	e Se	condary given names					
If the person compensated is not an individual, p	If the person compensated is not an individual, provide the following information.								
Full legal name of non-individual PI Financial									
Firm NRD number 5 2 9 0 (if applicable)									
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal. $\Box$ No $\checkmark$ Yes									
b) Business contact information									
If a firm NRD number is not provided in Item 8 (a	), provide the business o	contact information of	the person being	compensated.					
Street address									
Municipality			Province/State						
Country		Posta	l code/Zip code						
Email address	]								
		Tere	ephone number						
c) Relationship to issuer or investment fur		<u> </u>		·					
Indicate the person's relationship with the issuer of B(2) of the Instructions and the meaning of "contr					cted" in Part				
Connect with the issuer or investment fur	nd manager	Inside	er of the issuer (o	ther than an inves	tment fund)				
Director or officer of the investment fund	or investment fund ma	nager 🦳 Empl	oyee of the issue	r or investment fur	nd manager				
None of the above			-		-				
d) Compensation details									
Provide details of all compensation paid, or to be p	paid, to the person iden	tified in Item 8(a) in co	onnection with the	distribution. Provi	de all amounts in				
Canadian dollars. Include cash commissions, secu	ities-based compensati	on, gifts, discounts or	other compensatio	on. Do not report p	ayments for				
services incidental to the distribution, such as cleri on, internal allocation arrangements with the dire					ls about, or report				
Cash commissions paid	00.63								
Value of all securities	s s	ecurity codes	Security code 1	Security code 2	Security code 3				
distributed as									
compensation <sup>4</sup>					1				
Describe terms of warrants, op									
Other compensation <sup>5</sup>	Describe								
Total compensation paid 1	00.63								
Check box if the person will or may rec	eive any deferred com	pensation (describe th	ne terms below)						
PI Financial will receive an annual trailer fee paid monthly in the amount of 1/2% on Class A Preferred Non-Voting Shares, 1% on Class B Series 'B' Preferred Non-Voting Shares and 0% on Class B Series 'C' Preferred Non-Voting Shares.									
<sup>4</sup> Provide the aggregate value of all securities dis									
additional securities of the issuer. Indicate the se rights exercisable to acquire additional securities	ecurity codes for all sec								
<sup>5</sup> Do not include deferred compensation.									

a) Name of person com	pensated and registration status								
Indicate whether the perso	n compensated is a registrant. 🗌 No 🗹 Yes								
If the person compensated is an individual, provide the name of the individual.									
Full legal name of indiv	<i>r</i> idual								
	Family name First given name Secondary given names								
If the person compensated i	If the person compensated is not an individual, provide the following information.								
Full legal name of non-individual Industrielle Alliance Valeurs Mobilieres									
Firm NRD number 1 5 4 0 0 (if applicable)									
Indicate whether the person	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	provided in Item 8 (a), provide the business contact information of the person being compensated.								
Street address									
Municipality	Province/State								
Country	Postal code/Zip code								
Email address	Telephone number								
c) Relationship to issuer	or investment fund manager								
	ship 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	he meaning of "control" in section 1.4 of NI 45-106 for the purposes of completing this section.								
Connect with the issu	er or investment fund manager Insider of the issuer (other than an investment fund)								
Director or officer of t	he investment fund or investment fund manager Employee of the issuer or investment fund manager								
None of the above									
d) Compensation details									
Canadian dollars. Include cas services incidental to the distr	ation paid, or to be paid, to the person identified in Item 8(a) in connection with the distribution. Provide all amounts in h commissions, securities-based compensation, gifts, discounts or other compensation. Do not report payments for ibution, such as clerical, printing, legal or accounting services. An issuer is not required to ask for details about, or report ements with the directors, officers or employees of a non-individual compensated by the issuer.								
Cash commissions pa	aid     3.70       Security codes     Security code 1       Security code 2     Security code 3								
Value of all securitie									
distributed a compensatio									
Describe	erms of warrants, options or other rights								
Other compensatio	n <sup>5</sup> Describe								
Total compensation pa	id 3.70								
Check box if the pe	erson will or may receive any deferred compensation (describe the terms below)								
Industrielle Alliance Valeurs Mobilieres will receive an annual trailer fee paid monthly in the amount of 1/2% on Class A Preferred Non-Voting Shares, 1% on Class B Series 'B' Preferred Non-Voting Shares and 0% on Class B Series 'C' Preferred Non-Voting									
additional securities of the is	e of all securities distributed as compensation, <u>excluding</u> options, warrants or other rights exercisable to acquire suer. Indicate the security codes for all securities distributed as compensation, <u>including</u> options, warrants or other additional securities of the issuer. mpensation.								

a) Name of person com	pensated and registration status								
Indicate whether the person compensated is a registrant. No Yes									
If the person compensated is an individual, provide the name of the individual.									
Full legal name of indiv	<i>r</i> idual								
	Family name         First given name         Secondary given names								
If the person compensated i	If the person compensated is not an individual, provide the following information.								
Full legal name of non-individual Echelon Wealth Partners Inc.									
Firm NRD number 3 4 2 4 0 (if applicable)									
Indicate whether the person	compensated facilitated the distribution through a funding portal or an internet-based portal. No 🗸 Yes								
b) Business contact info	rmation								
If a firm NRD number is not	provided in Item 8 (a), provide the business contact information of the person being compensated.								
Street address									
Municipality	Province/State								
Country	Postal code/Zip code								
Email address	Telephone number								
c) Relationship to issuer	r or investment fund manager								
	ship 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 t	he meaning of "control" in section 1.4 of NI 45-106 for the purposes of completing this section.								
Connect with the issu	er or investment fund manager Insider of the issuer (other than an investment fund)								
Director or officer of	he investment fund or investment fund manager Employee of the issuer or investment fund manager								
✓ None of the above									
d) Compensation details									
Canadian dollars. Include cas services incidental to the distr	sation paid, or to be paid, to the person identified in Item 8(a) in connection with the distribution. Provide all amounts in h commissions, securities-based compensation, gifts, discounts or other compensation. Do not report payments for ibution, such as clerical, printing, legal or accounting services. An issuer is not required to ask for details about, or report ements with the directors, officers or employees of a non-individual compensated by the issuer.								
Cash commissions pa	aid 15.89 Security codes Security code 1 Security code 2 Security code 3								
Value of all securiti									
distributed a compensatio									
Describe	terms of warrants, options or other rights								
Other compensation	n <sup>5</sup> Describe								
Total compensation pa	id 15.89								
Check box if the pe	Check box if the person will or may receive any deferred compensation (describe the terms below)								
Echelon Wealth Partners Inc. will receive an annual trailer fee paid monthly in the amount of 1/2% on Class A Preferred Non-Voting Shares, 1% on Class B Series 'B' Preferred Non-Voting Shares and 0% on Class B Series 'C' Preferred Non-Voting Shares.									
additional securities of the is rights exercisable to acquire	<sup>4</sup> Provide the aggregate value of all securities distributed as compensation, <u>excluding</u> options, warrants or other rights exercisable to acquire additional securities of the issuer. Indicate the security codes for all securities distributed as compensation, <u>including</u> options, warrants or other rights exercisable to acquire additional securities of the issuer. <sup>5</sup> Do not include deferred compensation.								

ITEM 9 - DIRECTORS, EXECUTIVE OFFICERS AND PROMOTERS OF THE ISSUER										
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 all that apply).										
Reporting issuer in any jurisdiction of Canada										
Foreign public issuer										
Wholly owned subsidiary of a reporting issuer in any jurisdiction of Canada <sup>6</sup>										
Provide name of reporting issuer										
Wholly owned subsidiary of a foreign public issuer <sup>6</sup>										
Provide name of fo	oreign public issuer									
Issuer distributing eligible fore	ign securities only t	o permitted clier	nts <sup>7</sup>							
If the issuer is at least one of the a	bove, do not comp	lete Item 9(a) –	(c). Proceed to Ite	m 10.						
<sup>6</sup> 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. <sup>7</sup> 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.										
<ul> <li>a) Directors, executive officers</li> </ul>		-	nem 3(u) - (c).							
Provide the following information for territory; otherwise state the country.				tive Officer, "P" -	- Promoter.	da, sta	te the p	province or		
Organization or company name	Family name	First given name	Secondary give names	Business lo non-indivi reside jurisdict indivio	dual or ntail ion of		ationsh issuer ect all apply)	that		
				Province o	or country	D	0	Р		
	Granleese	William		British Colun	nbia	✓	✓			
	Granleese	William	R.	British Colun	nbia	$\checkmark$				
	Dyck	Victor		British Colun	nbia	✓				
	Worsnup	Christopher	Gavin	British Colun	nbia	✓				
b) Promoter information										
If the promoter listed above is not ar within Canada, state the province or										
Organization or company name	Organization or company name Family name Family name Residential name Secondary given names Residential jurisdiction of individual Relationship to promoter (select one or both if applicable)									
			Province or country D O							
c) Residential address of each										
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 or director 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 not be delegated to an agent or other individual preparing the report on behalf of the issuer or underwriter. If the individual completing and filing the report is different from the individual certifying the report, provide their name and contact details 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.

## IT IS AN OFFENCE TO MAKE A MISREPRESENTATION IN THIS REPORT

By completing the information below, I certify to the securities regulatory authority or regulator that:

- I have read and understand this report; and
- all of the information provided in this report is true.

Full legal name	Granleese	William		R.		
	Family name	First given name	-	Secondary give	en names	
Title	Portfolio Manager					
Name of issuer/underwriter/ investment fund manager	Antrim Balanced Mortgage Fund Ltd.					
Telephone number	6045302301	1 Email address will@antriminvestments.com				
Signature	William R. Granleese	Date	2018	07	27	
		_	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.

 $\checkmark$  Same as individual certifying the report

Full legal name				Title
	Family name	First given name	Secondary given names	
Name of company				
Telephone number		E	mail 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.