Form 45-106F1 Report of Exempt Distribution

IT IS AN OFFENCE TO MAKE A MISREPRESENTATION IN THIS REPORT

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 fund)						
Underwriter						
In the Control Nation of the Control Institutions						
ITEM 3 - ISSUER NAME AND OTHER IDENTIFIERS						
Provide the following information about the issuer, or if the issuer is an investment fund, about the fund.						
Full legal name Lineage Grow Company Ltd.						
Previous full legal name						
If the issuer's name changed in the last 12 months, provide most recent previous legal name.						
Website http://lineagegrow.com/ (if applicable)						
If the issuer has a legal entity identifier. provide below. Refer to Part B of the Instructions for the definition of "legal entity identifier".						
Legal entity identifier						
Item 4 - Underwriter Information						
If an underwriter is completing the report, provide the underwriter's full legal name and firm National Registration Database (NRD) number.						
Full legal name						
Firm NRD number (if applicable)						
If the underwriter does not have a firm NRD number, provide the head office contact information of the underwriter.						
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 corresponds to the issuer's primary business activity. For more information on finding the NAICS industry code go to Statistics Canada's NAICS industry search tool .
NAICS industry code 1 1 1 9 9 9
If the issuer is in the mining industry , indicate the stage of operations. This does not apply to issuers that provide services to issuers operating in the mining industry. Select the category that best describes the issuer's stage of operations.
Is the issuer's primary business to invest all or substantially all of its assets in any of the following? If yes, select all that apply. Mortgages Real estate Commerial/business debt Consumer debt Private companies
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 1 3 2 1 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 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.
\$\bigcup \\$0 to under \\$5M \bigcup \\$5M to under \\$25M \bigcup \\$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 man	nager information					
Full legal name						
Firm NRD number	(if applicable)					
If the investment fund mana	ger 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 for	und					
Type of investment fund that r	most accurately identifies the issuer (select only one) .					
Money market	Equity Fixed income					
Balanced	Alternative strategies Other (describe)					
Indicate whether one or both o	of the following apply to the investment fund .					
☐ Invests primarily in o	other investment fund issuers					
☐ Is a UCITs Fund¹						
	Investment of Transferable Securities funds (UCITs Funds) are investment funds regulated by the European Union (EU) investment schemes to operate throughout the EU on a passport basis on authorization from one member state.					
	d financial year-end of the investment fund					
•						
Date of formatio	n Financial year-end MM DD					
d) Reporting issuer stat	us of the investment fund					
Is the investment fund a repor	ting issuer in any jurisdication of Canada? No Yes					
· · · <u></u> · · · · <u></u> ·	Canada in which the investment fund is a reporting issuer.					
☐ All ☐	AB BC MB NB NL NT					
	NU ON PE QC SK T					
e) Public listing status c	of the investment fund					
	CUSIP number, provide below (first 6 digits only)					
(CUSIP number					
	cly listed, provide the names of all exchanges on which its securities are listed. Include only the names of exchanges for or and received a listing, which excludes, for example, automated trading systems.					
Exchange names						
f) Net asset value (NAV	') of the investment fund					
Select the NAV range of the in	vestment 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 \$500M	\$500M to under \$1B \$1B 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, 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. Currency 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 US dollar ☐ Euro Other (describe) Distribution date(s) 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 End date 2018 2018 01 24 01 24 חח MM DD YYYYDetailed purchaser information Complete Schedule 1 of this form for each purchaser and attach the schedule to the completed report. Types of securities distributed Provide the following information for all distributions that take place in a jurisdiction of Canada on a per security basis. Refer to Part A 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. The information included in item 7d must reconcile to item 7f. For examples on how to report convertible securities, see our Frequently Asked Questions. Canadian \$ Single or Security CUSIP number Number of Description of security Highest price Total amount lowest code (if applicable) securities price 1 Unit is comprised of 1 CMS 4,740,000.00 0.2500 1,185,000.00 U BS and 1/2 WNT 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. Exercise price Security Underlying Expiry date Conversion (Canadian \$) security code (YYYY- MM-DD) Describe other items (if applicable) code ratio Lowest Highest Ν C M S 0.3250 2020-01-24

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 purchasers	Total amount (Canadian \$)
Ontario	NI 45-106 2.3 [Accredited investor]	30	747,500.00
British Columbia	NI 45-106 2.3 [Accredited investor]	7	140,000.00
Alberta	NI 45-106 2.3 [Accredited investor]	2	50,000.00
Québec	NI 45-106 2.3 [Accredited investor]	16	222,500.00
United Arab Emirates	NI 45-106 2.3 [Accredited investor]	1	25,000.00
	Total dollar amount of sec	urities distributed	1,185,000.00
	Total number of unique purchasers ²	56	

²In 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)
1.	Presentation Materials	2017-10-31	Υ	2018-02-01

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. 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 Foundation Markets Inc.	
Firm NRD number 2 2 8 3 0 (if applicable)	
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal.	Yes
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	<u> </u>
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 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 rep on, internal allocation arrangements with the directors, officers or employees of a non-individual compensated by the issuer.	
Cash commissions paid 34,350.00 Security codes Security code 1 Security code 2 Security code	3
Value of all securities distributed as compensation ⁴	
Describe terms of warrants, options or other rights 111,800 finders options issued at \$0.325 expiring January 24,	
Other compensation ⁵ Describe	\dashv
Total compensation paid 34,350.00	
Check box if the person will or may receive any deferred compensation (describe the terms below)	
	\neg
⁴ 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. 5 Do not include deferred compensation.	r

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.	o 🗌 Yes						
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	t fund)						
Director or officer of the investment fund or investment fund manager Employee of the issuer or investment fund manager	anager						
✓ 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 al Canadian dollars. Include cash commissions, securities-based compensation, gifts, discounts or other compensation. Do not report payme services incidental to the distribution, such as clerical, printing, legal or accounting services. An issuer is not required to ask for details about on, internal allocation arrangements with the directors, officers or employees of a non-individual compensated by the issuer.	ents for						
Cash commissions paid 25,500.00 Security codes Security code 1 Security code 2 Security code 2 Security code 2 Security code 3 Security code 2 Security code 3	curity code 3						
Value of all securities W N T							
distributed as compensation ⁴							
Describe terms of warrants, options or other rights 102,000 finders options issued at \$0.325 expiring Janu 2020	ary 24,						
Other compensation ⁵ Describe							
Total compensation paid 25,500.00							
Check box if the person will or may receive any deferred compensation (describe the terms below)							
⁴ Provide the aggregate value of all securities distributed as compensation, <u>excluding</u> options, warrants or other rights exercisable to a additional securities of the issuer. Indicate the security codes for all securities distributed as compensation, <u>including</u> options, warrant rights exercisable to acquire additional securities of the issuer. ⁵ Do not include deferred compensation.							

 a) Name of person comper 	nsated and registration status						
Indicate whether the person c	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	e Secondary give	n names			
If the person compensated is not an individual, provide the following information.							
Full legal name of	f non-individual BSM Capital Corp	oration					
Firm	n NRD number 2 7 3	6 0	(if applicable)				
Indicate whether the person co	ompensated facilitated the distribution to	hrough a funding portal	or an internet-based portal.	✓ No ☐ Yes			
b) Business contact inform	ation						
If a firm NRD number is not pro	ovided in Item 8 (a), provide the business	contact information of	the person being compensat	ed.			
Street address							
Municipality			Province/State				
Country		Posta	l code/Zip code				
Email address		Tele	ephone number				
c) Relationship to issuer or	r investment fund manager						
	ip with the issuer or investment fund ma meaning of "control" in section 1.4 of N			f "connected" in Part			
	or investment fund manager		er of the issuer (other than a	an investment fund)			
<u> </u>	investment fund or investment fund m		loyee of the issuer or investr	ŕ			
None of the above	The state of the s	anagoi <u> </u>	ayee or the locaer or invoca	noncrana managor			
d) Compensation details							
Provide details of all compensati Canadian dollars. Include cash c services incidental to the distribu	ion paid, or to be paid, to the person ide commissions, securities-based compensa ution, such as clerical, printing, legal or c nents with the directors, officers or emplo	tion, gifts, discounts or d accounting services. An d	other compensation. Do not i issuer is not required to ask f	report payments for for details about, or report			
Cash commissions paid	19,200.00	Security codes	Security code 1 Security	code 2 Security code 3			
Value of all securities		Coounty codes	WNT				
distributed as compensation ⁴							
Describe terr	ms of warrants, options or other rights	102,400 finders op 2020	tions issued at \$0.325 ex	piring January 24,			
Other compensation ⁵	Describe						
Total compensation paid	19,200.00						
Check box if the person	on will or may receive any deferred cor	npensation (describe th	ne terms below)				
⁴ 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. ⁵ Do not include deferred compensation.							

 a) Name of person compe 	nsated and registration status						
Indicate whether the person	ompensated 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 Seconda	ry given names					
If the person compensated is not an individual, provide the following information.							
Full legal name of	non-individual EMD Financial Inc.						
Fir	NRD number 3 6 4 8 0 (if applical	ole)					
Indicate whether the person o	mpensated facilitated the distribution through a funding portal or an internet-based p	ortal. 🔽 No 🗌 Yes					
b) Business contact inform	ation						
If a firm NRD number is not pr	vided in Item 8 (a), provide the business contact information of the person being comp	pensated.					
Street address							
Municipality	Province/State						
Country	Postal code/Zip code						
Email address	Telephone number						
c) Relationship to issuer of	investment fund manager						
	p with the issuer or investment fund manager (select all that apply). Refer to the mean meaning of "control" in section 1.4 of NI 45-106 for the purposes of completing this se						
	or investment fund manager						
<u> </u>	investment fund or investment fund manager Employee of the issuer or in	,					
None of the above		Wooding in raina managor					
d) Compensation details							
Provide details of all compensa Canadian dollars. Include cash services incidental to the distrib	on paid, or to be paid, to the person identified in Item 8(a) in connection with the distrommissions, securities-based compensation, gifts, discounts or other compensation. Do tion, such as clerical, printing, legal or accounting services. An issuer is not required to ents with the directors, officers or employees of a non-individual compensated by the	o not report payments for o ask for details about, or report					
Cash commissions paid	15,750,000.00 Security codes Security code 1 Se	ecurity code 2 Security code 3					
Value of all securities	W N T						
distributed as compensation							
Describe te	ns of warrants, options or other rights 63,000 finders options issued at \$0.32 2020	5 expiring January 24,					
Other compensation	Describe						
Total compensation paid	15,750.00						
Check box if the pers	on will or may receive any deferred compensation (describe the terms below)						
⁴ 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. ⁵ Do not include deferred compensation.							

ГЕМ	9 - DIRECTORS, EXECUTI	VE OFFICERS A	AND PROMO	TERS OF THE IS	SSUER					
If t	he issuer is an investment fund, o	do not complete I	tem 9. Procced t	o Item 10.						
Ind	icate whether the issuer is any of th	e following (select	all that apply).							
Reporting issuer in any jurisdiction of Canada										
	Foreign public issuer									
	Wholly owned subsidiary of a r	eporting issuer in	any jurisdiction o	f Canada ⁶						
	Provide name o	of reporting issuer								
	Wholly owned subsidiary of a f	oreign public issu	er ⁶							
	Provide name of for	eign public issuer								
	Issuer distributing eligible forei	gn securities only	to permitted clien	ıts ⁷						
⁶ An . secu	he issuer is at least one of the absissuer is a wholly owned subsidiary unities that are required by law to be each this box if it applies to the currents. Refer to the definitions of "eligible of the issuer is none of the ab	y of a reporting iss e owned by its dire ent distribution eve ble foreign securit	suer or a foreign p ectors, are benefic on if the issuer ma y" and "permitted	oublic issuer if all of cially owned by the de previous distrib client" in Part B(1)	the issuer's outs reporting issuer utions of other ty	or the foreig	n publi	c issue	er, respec	ctively.
a)	Directors, executive officers a		-	., .,						
	ovide the following information for rritory; otherwise state the country.	each director, exec	cutive officer and p				da, sta	e the p	province o	or
	Organization or company name	Family name	First given name	Secondary give names	Business lo non-individ resider jurisdicti individ	dual or ntail ion of		itionshi issuer ect all apply)	that	
					Province o	r country	D	0	Р	
b)	Promoter information									
	the promoter listed above is not an ithin Canada, state the province or t									
Organization or company name Family name Family name Family name Residential purisdiction of name name Residential jurisdiction of individual Relationship to promoter (select one or both if applicable)										
					Province or country	D		C)	
c)	Residential address of each in	ndividual								

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	Full legal name Drutz David				
	Family name	First given name		First given name Secondary given na	
Title	Chief Executive Officer				
Name of issuer/underwriter/ investment fund manager	Il incode Crow Company Ltd				
Telephone number	er 4164794142 Email address ddrutz@lineag				m
Signature	/s/ David Drutz	vid Drutz Date 2		02	01
		•	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	Matanovic	Anna		Title Law Clerk
	Family name	First given name	Secondary given names	

Name of company Fogler, Rubinoff LLP

Telephone number 4163653701 Email address amatanovic@foglers.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.