# 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	de 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 National Instrument 81-106 Investment Fund Continuous I	or guidance regarding whether an issuer is an investment fund, refer to section 1.1 of Disclosure and the companion policy to NI 81-106
Investment fund issuer	
<ul> <li>✓ Issuer (other than an investment fund)</li> </ul>	))
	, ,
ITEM 3 - ISSUER NAME AND OTHER IDENTI	
Provide the following information about the issuer, or if the	
Full legal name Jaxon Mini	
Previous full legal name	
If the issuer's name changed in the last 12 mon	
Website	(if applicable)
	efer 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 unde	derwriter'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, provi	vide 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 <b>Statistics Canada's NAICS industry search tool</b> .
NAICS industry code212220
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.          Image: The production       Image: The 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.           Image: Im
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       2       4       9       8       0         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
□ \$100M to under \$500M □ \$500M to under \$1B □ \$1B or over

ITEM 6 - INVESTMENT	Fund Issuer Information
If the issuer is an investi	ment fund, provide the following information.
a) Investment fund ma	inager information
Full legal name	
Firm NRD number	(if applicable)
If the investment fund man	ager 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
	CUSIP number, provide below (first 6 digits only)
.,	CUSIP number
If the investment fund is pub	licly listed, provide the names of all exchanges on which its securities are listed. Include only the names of exchanges for
	for and received a listing, which excludes, for example, automated trading systems.
Exchange name	
f) Net asset value (NA	V) of the investment fund
-	nvestment 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

ITEM 7 - INFORMATION A	BOUT THE DISTRIBUTIO	ЛС					
If an issuer located outside of Canc purchasers resident in that jurisdict should be disclosed in Item 8. The i	tion of Canada only. Do not inc	clude in Ite	em 7 securitie	es issued as	s payment of co	mmissions or find	der's fees, which
a) Currency	, ,				1	,	1
Select the currency or currencies in	which the distribution was ma	ide. All do	llar amounts	provided i	n the report mu	st be in Canadiar	n dollars.
✓ Canadian dollar	US dollar 🛛 Eur	0	Other	(describe	)		
b) Distribution date(s)							
State the distribution start and en as both the start and end dates. If distribution period covered by the	the report is being filed for sec	-			,	•	
Start d	ate 2017 08 10 YYYY MM DD			End date	<sup>e</sup> 2017 YYYY	08 10 MM DD	
c) Detailed purchaser inform	nation						
Complete Schedule 1 of this f	form for each purchaser a	nd attac	h the sche	dule to ti	he completed	l report.	
d) Types of securities distri	buted						
Provide the following information Instructions for how to indicate t distributed. The information inclu <u>Asked Questions.</u>	he security code. If providing th	ne CUSIP r	number, indic	ate the ful	l 9-digit CUSIP	number assigned	to the security being
						Canadian \$	
Security code CUSIP number (if applicable)	Description of security		Numbe securi		Single or lowest price	Highest price	Total amount
U B S Ur	nits		1,993	3,332.00	0.3000	0.3000	597,999.60
e) Details of rights and con	vertible/exchangeable secu	urities					
If any rights (e.g. warrants, option were distributed, provide the con							xchangeable securities
Security Underlying	Exercise price		iry date	Convers	_	county.	
code security code	(Canadian \$) Lowest Highest		- MM-DD)	ratio	Desc	ribe other items (if a	applicable)
W N T C M S	0.3800 0.3800	2019	9-08-10				
f) Summary of the distributi	on by jurisdiction and exen	nption					
State the total dollar amount of s purchaser resides and for each ex distribution in a jurisdiction of Co This table requires a separate line purchaser resides, if a purchaser jurisdiction. For jurisdictions within Canada, s	remption relied on in Canada f anada, include distributions to p e item for: (i) each jurisdiction v resides in a jurisdiction of Canc	or that dis purchasers where a pu ada, and (i	tribution. Ho s resident in t urchaser resid ii) each exem	wever, if an that jurisdia des, (ii) eac aption relie	n issuer located ction of Canada h exemption rel	outside of Canad only. ied on in the juris	la completes a sdiction where a
Province or country	Exemption	n relied on			Number of purchasers	Total amou	nt (Canadian \$)
British Columbia	NI 45-106 2.3 [Accred	ited inve	estor]		15	;	273,999.60
British Columbia	NI 45-106 2.5 [Family, associates]	friends	and busin	iess	1		120,000.00
Alberta	NI 45-106 2.3 [Accred	ited inve	estor]		1		9,000.00
Ontario	NI 45-106 2.3 [Accred	ited inve	estor]		1		30,000.00
Québec	NI 45-106 2.3 [Accred	ited inve	estor]		1		30,000.00
United Kingdom	NI 45-106 2.3 [Accred	ited inve	estor]		2		60,000.00
Austria	NI 45-106 2.3 [Accred	ited inve	estor]		1		60,000.00
Switzerland	NI 45-106 2.3 [Accred	ited inve	estor]		1		15,000.00
		Total do	lar amount	of securit	ies distributed		597,999.60
	Total num	ber of ur	ique purcha	asers <sup>2</sup>	24		

<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 - COMPENSATIC	N INFORMATION	N			
Provide information for each p with the distribution. <b>Comple</b>					iny compensation in connection ensated.
Indicate whether any compens	ation was paid, or will	be paid, in connection	on with the distrib	ution.	
🗌 No 🗹 Yes	If yes, indicate	e number of perso	ons compensate	ed. 4	
a) Name of person com	pensated and regist	ration status			
Indicate whether the perso	n compensated is a reg	gistrant.	No No	✓ Yes	
If the person compensated is	an individual, provide	the name of the indi	vidual.		
Full legal name of indiv	/idual				
	Fami	ly name	First giver	n name Seco	ndary given names
If the person compensated i	s not an individual, pro	ovide the following in	formation.		
Full legal name	of non-individual	Haywood Securitie	es Inc.		
F	irm NRD number	1 6 3	0	(if appl	icable)
Indicate whether the person	■ compensated facilitate	ed the distribution th	rough a funding <u>r</u>	portal or an internet-base	ed portal. 🔽 No 🗌 Yes
b) Business contact info	-		5, 5,		
If a firm NRD number is not	provided in Item 8 (a),	provide the business	contact informati	on of the person being co	ompensated.
Street address					
Municipality				Province/State	
Country			P	ostal code/Zip code	
Email address				Telephone number	
c) Relationship to issuer	or investment fund	manager		•	
	ship with the issuer or	investment fund ma			eaning of "connected" in Part
	ler or investment fund				er than an investment fund)
Director or officer of t	he investment fund or	investment fund ma	anager	Employee of the issuer of	or investment fund manager
None of the above					-
d) Compensation details	;				
Canadian dollars. Include cas	h commissions, securit ibution, such as clerica	ies-based compensat II, printing, legal or a	ion, gifts, discoun ccounting services	ts or other compensation. 5. An issuer is not required	d to ask for details about, or report
Cash commissions pa	aid 10,84	9.99	Security codes	Security code 1	Security code 2 Security code 3
Value of all securitie distributed a compensatio	as			W N T	
Describe	terms of warrants, opti	ions or other rights	36,166 broker	warrants	
Other compensatio	n⁵	Describe			
Total compensation pa	aid 10,849	9.99			
Check box if the pe	erson will or may recei	ve any deferred com	pensation (descr	ibe the terms below)	
additional securities of the is	suer. Indicate the sec	urity codes for all se			rights exercisable to acquire <u>uding</u> options, warrants or other
rights exercisable to acquire	additional securities of	of the issuer.			

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 PI Financial Corp.	
Firm NRD number 5 2 9 0 (if applicable	e)
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based por	rtal. 🗹 No 🗌 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 compe	nsated.
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 meanin B(2) of the Instructions and the meaning of "control" in section 1.4 of NI 45-106 for the purposes of completing this sector	
Connect with the issuer or investment fund manager Insider of the issuer (other the	an an investment fund)
Director or officer of the investment fund or investment fund manager Employee of the issuer or inv	estment 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 distrib Canadian dollars. Include cash commissions, securities-based compensation, gifts, discounts or other compensation. Do r services incidental to the distribution, such as clerical, printing, legal or accounting services. An issuer is not required to a on, internal allocation arrangements with the directors, officers or employees of a non-individual compensated by the iss	not report payments for Isk for details about, or report
Cash commissions paid 4,200.00 Security codes Security code 1 Security code 1	urity code 2 Security code 3
Value of all securities distributed as compensation <sup>4</sup>	
Describe terms of warrants, options or other rights 14,000 broker warrants	
Other compensation <sup>5</sup> Describe	
Total compensation paid 4,200.00	
Check box if the person will or may receive any deferred compensation (describe the terms below)	
<sup>4</sup> Provide the aggregate value of all securities distributed as compensation, <u>excluding</u> options, warrants or other rights additional securities of the issuer. Indicate the security codes for all securities distributed as compensation, <u>including</u> rights exercisable to acquire additional securities of the issuer.	

a) Name of person com	pensated and regis	stration s	tatus											
Indicate whether the perso	n compensated is a re	egistrant.		No No		$\checkmark$	Yes							
If the person compensated is	an individual, provide	e the nam	e of the ind	ividual.										
Full legal name of indiv	/idual													
	Fan	nily name		F	irst given	name			Secon	dary giv	en name	6		
If the person compensated i	s not an individual, p	rovide the	following in	nformatior	1.									
Full legal name	of non-individual	Canacco	ord Genui	ty Corp.										
F	irm NRD number	9	0 0					(	if applic	able)				
Indicate whether the persor	compensated facilita	ted the di	stribution th	hrough a f	unding p	ortal c	or an ii	nterne	et-based	l porta	l. 🔽	No	,	Yes
b) Business contact info	rmation													
If a firm NRD number is not	provided in Item 8 (a)	, provide t	he business	contact ir	formatio	on of t	he per	son be	eing cor	npenso	ited.			
Street address														
Municipality				]		F	Provir	nce/S	State					
Country				]	Р	ostal	code/	Zip c	code					
Email address				-		Telep	ohone	e nurr	nber					
c) Relationship to issuer	or investment fund	d manag	er											
Indicate the person's relation B(2) of the Instructions and t	ship with the issuer o	r investme	ent fund ma									cted" i	in Part	
Connect with the issu	uer or investment fun	d manage	r			Inside	of the	e issu	er (othe	r than	an inves	tment	fund)	
Director or officer of	the investment fund o	or investm	ent fund ma	anager		Emplo	yee of	the is	ssuer o	r inves	tment fu	nd ma	nager	
None of the above														
d) Compensation details	3													
Provide details of all compens Canadian dollars. Include cas services incidental to the distr on, internal allocation arrang	h commissions, secur ibution, such as cleric	ities-based al, printin	l compensa g, legal or c	tion, gifts, accounting	discount services	ts or ot . An is	her co suer is	mpen not r	nsation. equired	Do not to ask	report p for detai	aymer	nts for	
Cash commissions pa	aid 2,10	00.00		Security c	odes	Γ	Secu	rity coo	de 1	Securit	y code 2	Sec	urity co	de 3
Value of all securiti distributed compensatio	as						W	N	Т					
•	terms of warrants, op	tions or o	ther rights	7,000 b	oroker w	varran	its							
Other compensation	n <sup>5</sup>		Describe	,										
Total compensation pa	aid													
Check box if the pe	erson will or may rece	eive any d	eferred con	npensatio	n (descri	ibe the	e terms	s belo	w)					
	,	,			,				,					
<sup>₄</sup> Provide the aggregate valu	e of all securities dis	tributed a	Companes	ation evel	udina on	tione	warra	nts or	other n	inhte A	yerciesh	le to a	cavire	
additional securities of the is rights exercisable to acquire	ssuer. Indicate the se	curity coa	les for all se											

a) Name of person compensated and registration status	
Indicate whether the person compensated is a registrant. V 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 C2 Mining International Corp.	
Firm NRD number (if applicable)	
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal. 🛛 🗹 No 🔲 Ye	es
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 890-580 Hornby St	]
Municipality Vancouver Province/State British Columbia	]
Country Canada Postal code/Zip code V6C 3B6	٦
Email address Telephone number	T
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 900.00 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 3,000 broker warrants	1
Other compensation <sup>5</sup> Describe	Í
Total compensation paid 900.00	-1
Check box if the person will or may receive any deferred compensation (describe the terms below)	]
<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 rights exercisable to acquire of the issuer.	

Ітем 9	- DIRECTORS, EXECUTIV	/E OFFICERS A	ND PROMO	TERS OF THE I	SSUER				
If the	issuer is an investment fund, a	lo not complete Ite	em 9. Procced to	o Item 10.					
Indicat	te whether the issuer is any of the	e following (select a	ll that apply).						
$\checkmark$	Reporting issuer in any jurisdic	tion of Canada							
	Foreign public issuer								
	Wholly owned subsidiary of a r	eporting issuer in a	iny jurisdiction of	f Canada <sup>6</sup>					
	Provide name o	of reporting issuer							
	Wholly owned subsidiary of a fe	oreign public issuer	r <sup>6</sup>						
	Provide name of for	eign public issuer							
	Issuer distributing eligible foreig	on securities only to	permitted clien	ts <sup>7</sup>					
If the	issuer is at least one of the ab	ove, do not compl	ete Item 9(a) –	(c). Proceed to Ite	m 10.				
securitie <sup>7</sup> Check	uer is a wholly owned subsidiary ies that are required by law to be this box if it applies to the curre Refer to the definitions of "eligib If the issuer is none of the abo	e owned by its direc nt distribution even ole foreign security'	ctors, are benefic if the issuer ma and "permitted	cially owned by the de previous distrib client" in Part B(1)	reporting issuer utions of other ty	or the foreig pes of secu	n publ	ic issue	er, respectively.
a) D	Virectors, executive officers a	nd promoters of	the issuer						
	de the following information for ory; otherwise state the country. I						da, sta	te the p	province or
ο	rganization or company name	Family name	First given name	Secondary give names	Business lo non-indivio residen jurisdicti indivio	dual or ntail ion of		ationsh issuer ect all apply)	that
					Province o	r country	D	0	Р
b) P	romoter information		·						
	promoter listed above is not an n Canada, state the province or t		-				-		
0	rganization or company name	Family name	First given name	Secondary given names	Residential jurisdiction of individual	Relatio (select one			
					Province or country	D		C	)
c) R	esidential address of each ir	ndividual							
Compl	lete Schedule 2 of this form pro	oviding the full res	sidential addre	ss for each individ	lual listed in Ite	m 9(a) and	(b) an	d atta	:h 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	Cubitt	Jason			
	Family name	First given name		Secondary giv	en names
Title	President				
Name of issuer/underwriter/ investment fund manager	Jaxon Mining Inc.				
Telephone number		Email address			
Signature	Jason Cubitt	Date	2017	11	09
		-	YYYY	MM	DD

## **ITEM 11- CONTACT PERSON**

Provide the following business contact information for the individual that the securities regulatory authority or regulator may contact with any questions regarding the contents of this report, if different than the individual certifying the report in Item 10.

Same as individual certifying the report

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