Form 45-106F1 Report of Exempt Distribution

BCSC EDER Reference Number 9411689

ITEM 1 - REPORT TYPE				
☐ New report				
✓ Amended report If ame	nded, provide filing date	of report that is being a	mended 2021 04 07	(YYYY-MM-DD)
ITEM 2 - PARTY CERTIFYING TH	e Report			
Indicate the party certifying the report (sei Instrument 81-106 Investment Fund Conti		_	investment fund, refer to sect	ion 1.1 of National
☐ Investment fund issuer	,	, ,		
✓ Issuer (other than an inves	stment fund)			
Underwriter	,			
ITEM 3 - ISSUER NAME AND OT	HER IDENTIFIERS			
Provide the following information about to	he issuer, or if the issuer is an in	vestment fund, about the fund	1.	
Full legal name	GameOn Entertainmer	t Technologies Inc.		
Previous full legal name				
If the issuer's name changed in th	e last 12 months, provide most	recent previous legal name.		
Website	www.v2g.io/	(if applie	able)	
If the issuer has a legal entity identifier. pr	ovide below. Refer to Part B of t	he Instructions for the definit	on of "legal entity identifier".	
Legal entity identifier				
If two or more issuers distributed a single	security, provide the full legal no	ame(s) of the co-issuer(s) othe	r than the issuer named above	2.
Full legal name(s) of co-issuer(s)		(if applic	able)	
ITEM 4 - UNDERWRITER INFORM	MATION			
If an underwriter is completing the report,		gal name and firm NRD num	ber.	
Full legal name	<u> </u>]
Firm NRD number		(if applicable)		_
If the underwriter does not have a firm NF	PD number, provide the head off	ice contact information of the	underwriter.	
Street address				
Municipality		Province/Sta	е	
Country		Postal code/Zip cod	е	
Telephone number		Websi	e	(if applicable)

ITEM 5 - ISSUER INFORMATION
If the issuer is an investment fund, do not complete Item 5. Proceed to Item 6.
a) Primary industry
Provide the issuer's North American Industry Classification Standard (NAICS) code (6 digits only) that in your reasonable judgment most closely corresponds to the issuer's primary business activity.
NAICS industry code 5 1 9 1 9 0
If the issuer is in the mining industry , indicate the stage of operations. This does not apply to issuers that provide services to issuers operating in the mining industry. Select the category that best describes the issuer's stage of operations.
Exploration Development Production
Is the issuer's primary business to invest all or substantially all of its assets in any of the following? If yes, select all that apply.
☐ Mortgages ☐ Real estate ☐ Commercial/business debt ☐ Consumer debt ☐ Private companies
☐ Cryptoassets
b) Number of employees
Number of employees: ✓ 0 - 49
c) SEDAR profile number
Does the issuer have a SEDAR profile?
No
If the issuer does not have SEDAR profile complete item 5(d) - (h).
d) Head office address
Street address Province/State
Municipality Postal code/Zip code
Country Telephone number
e) Date of formation and financial year-end
Date of formation Financial year-end MM DD MM DD
f) Reporting issuer status
Is the issuer a reporting issuer in any jurisdication of Canada? No Yes
If yes, select the jurisdictions of Canada in which the issuer is a reporting issuer.
AII AB BC MB NB NL NT
NS NU ON PE QC SK YT
g) Public listing status
If the issuer has a CUSIP number, provide below (first 6 digits only)
CUSIP number
If the issuer is publicly listed, provide the name of the exchange on which the issuer's equity securities primarily trade. Provide only the name of an exchange and not a trading facility such as, for example, an automated trading system.
Exchange name
h) Size of issuer's assets

Select the size of the issuer's assets based on its most recently available annual financial statements (Canadian \$). If the issuer has not prepared annual financial statements for its first financial year, provide the size of the issuer's assets at the distribution end date.

☐ \$0 to under \$5M	☐ \$5M to under \$25M	☐ \$25M to under \$100M
\$100M to under \$500M	☐ \$500M to under \$1B	\$1B or over

ITEM 6 - INVESTMENT	FUND ISSUER INFORMATION
If the issuer is an inves	tment fund, provide the following information.
a) Investment fund ma	anager information
Full legal name	
Firm NRD number	(if applicable)
If the investment fund mand	ager does not have a firm NRD number, provide the head office contact information of the investment fund manager.
Street address	
Municipality	Province/State
Country	Postal code/Zip code
Telephone number	Website (if applicable)
b) Type of investment	fund
Type of investment fund tha	nt most accurately identifies the issuer (select only one) .
Money market	☐ Equity ☐ Fixed income ☐ Balanced
Alternative strateg	gies Cryptoasset Other (describe)
Indicate whether one or bot	h of the following apply to the investment fund .
Invests primarily in	n other investment fund issuers
☐ Is a UCITs Fund¹	
¹ Undertaking for the Collec (EU) directives that allow c	tive Investment of Transferable Securities funds (UCITs Funds) are investment funds regulated by the European Union collective investment schemes to operate throughout the EU on a passport basis on authorization from one member state.
c) Date of formation a	and financial year-end of the investment fund
Date of forma	tion Financial year-end MM DD MM DD
d) Reporting issuer st	atus of the investment fund
Is the investment fund a rep	orting issuer in any jurisdication of Canada? No Yes
If yes, select the jurisdictions	s of Canada in which the investment fund is a reporting issuer.
☐ AII ☐	AB BC MB NB NL NT
□ NS □	NU ON PE QC SK YT
e) Public listing status	s of the investment fund
If the investment fund has a	CUSIP number, provide below (first 6 digits only)
	CUSIP number
	blicly listed, provide the name of the exchange on which the investment fund's securities primarily trade. Provide only the not a trading facility such as, for example, an automated trading system.
Exchange on an exchange and h	
-	AV) of the investment fund
	investment fund as of the date of the most recent NAV calculation (Canadian \$).
\$0 to under \$5M	s5M to under \$25M s25M to under \$100M
\$100M to under \$500	DM \$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 in connection with the distribution, which must be disclosed in Item 8. The information provided in Item 7 must reconcile with the information provided in Schedule 1 of the report.

a)	Currency									
Sele	ct the currency or currencies i	n which the di	stribution	was mad	e. All dollar amounts provided	in the repor	t must be	in Canad	dian dollars.	
√	Canadian dollar	JS dollar] Euro	Other (describe)					
b)	Distribution date(s)									
as b		the report is l		٠.	f for securities distributed on or ities distributed on a continuou	,				date
	Start dat	e 2021	03	11	End date	2021	03	11		
		YYYY	MM	DD	·	YYYY	MM	DD	_	

c) Detailed purchaser information

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

d) Types of securities distributed

Provide the following information for all distributions reported on a per security basis. Refer to Part A(12) of the Instructions for how to indicate the security code. If providing the CUSIP number, indicate the full 9-digit CUSIP number assigned to the security being distributed.

					Canadian \$	
Security code	CUSIP number (if applicable)	Description of security	Number of securities	Single or lowest price	Highest price	Total amount
S U B		Subscription Receipts – each Subscription Receipt will automatically convert into one Unit upon satisfaction of escrow conditions.	16,505,536.00	0.3500	0.3500	5,776,937.60

e) Details of rights and convertible/exchangeable securities

If any rights (e.g. warrants, options) were distributed, provide the exercise price and expiry date for each right. If any convertible/exchangeable securities were distributed, provide the conversion ratio and describe any other terms for each convertible/exchangeable security.

ex		tible / jeable code		nderlyi curity c			se price adian \$)	Expiry date (YYYY- MM-DD)	Conversion ratio	Describe other items (if applicable)
						Lowest	Highest			
S	U	В	U	В	S	0.3500		2023-03-11		Each Subscription Receipt will automatically convert into one Unit upon satisfaction of escrow conditions.

f) Summary of the distribution by jurisdiction and exemption

State the total dollar amount of securities distributed and the number of purchasers for each jurisdiction of Canada and foreign jurisdiction where a purchaser resides and for each exemption relied on in Canada for that distribution. However, if an issuer located outside of Canada completes a distribution in a jurisdiction of Canada, include distributions to purchasers resident in that jurisdiction of Canada only.

This table requires a separate line item for: (i) each jurisdiction where a purchaser resides, (ii) each exemption relied on in the jurisdiction where a purchaser resides, if a purchaser resides in a jurisdiction of Canada, and (iii) each exemption relied on in Canada, if a purchaser resides in a foreign jurisdiction.

For jurisdictions within Canada, state the province or territory, otherwise state the country.

Province or country	Exemption relied on	Number of unique ²⁸ purchasers	Total amount (Canadian \$)
British Columbia	NI 45-106 2.3 [Accredited investor]	87	3,456,101.60
British Columbia	NI 45-106 2.5 [Family, friends and business associates]	7	109,129.30
Alberta	NI 45-106 2.3 [Accredited investor]	23	584,070.55
Alberta	NI 45-106 2.5 [Family, friends and business associates]	3	23,974.65

Ontario	NI 45-106 2.3 [Accredited investor]	21	706,538.70
Ontario	NI 45-106 2.5 [Family, friends and business associates]	4	40,474.70
Québec	NI 45-106 2.3 [Accredited investor]	2	30,249.80
Manitoba	NI 45-106 2.3 [Accredited investor]	3	77,000.00
Yukon	NI 45-106 2.3 [Accredited investor]	2	200,039.00
United States	NI 45-106 2.3 [Accredited investor]	10	221,274.55
Netherlands	NI 45-106 2.3 [Accredited investor]	1	14,999.95
New Zealand	NI 45-106 2.3 [Accredited investor]	1	9,975.00
Liechtenstein	NI 45-106 2.3 [Accredited investor]	1	16,100.00
Germany	NI 45-106 2.3 [Accredited investor]	1	35,000.00
Switzerland	NI 45-106 2.3 [Accredited investor]	1	99,750.00
New Brunswick	NI 45-106 2.3 [Accredited investor]	1	106,750.00
China	NI 45-106 2.3 [Accredited investor]	1	9,975.00
Australia	NI 45-106 2.3 [Accredited investor]	2	25,559.80
Manitoba	NI 45-106 2.5 [Family, friends and business associates]	1	9,975.00
	Total dollar amount of se	curities distributed	5,776,937.60
	Total number of unique purchasers ^{2b}	172	

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

g) Net proceeds to the investment fund by jurisdiction

If the issuer is an investment fund, provide the net proceeds to the investment fund for each jurisdiction of Canada and foreign jurisdiction where a purchaser resides. If an issuer located outside of Canada completes a distribution in a jurisdiction of Canada, include net proceeds for that jurisdiction of Canada only. For jurisdictions within Canada, state the province or territory, otherwise state the country.

Province or country	Net proceeds (Canadian \$)
Total net proceeds to the investment fund	

³"Net proceeds" means the gross proceeds realized in the jurisdiction from the distributions for which the report is being filed, less the gross redemptions that occurred during the distribution period covered by the report.

h) Offering materials - This section applies only in Saskatchewan, Ontario, Québec, New Brunswick and Nova Scotia.

If a distribution has occurred in Saskatchewan, Ontario, Québec, New Brunswick or Nova Scotia, complete the table below by listing the offering materials that are required under the prospectus exemption relied on to be filed with or delivered to the securities regulatory authority or regulator in those jurisdictions.

In Ontario, if the offering materials listed in the table are required to be filed with or delivered to the Ontario Securities Commission (OSC), attach an electronic version of the offering materials that have not been previously filed with or delivered to the OSC.

Description	Date of document or other material (YYYY-MM-DD)	Previously filed with or delivered to regulator? (Y/N)	Date previously filed or delivered (YYYY-MM-DD)

^{2b} In calculating the total number of unique purchasers to which the issuer distributed securities, count each purchaser only once, regardless of whether the issuer distributed multiple types of securities to, and relied on multiple exemptions for, that purchaser.

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. 7

a) Name of person comp	pensated and registration	on status					
Indicate whether the person co	mpensated is a registrant.		✓ No	Yes			
If the person compensated is a	n individual, provide the no	ame of the indivi	dual.				
Full legal name of indi	vidual						
	Family	/ name	Firs	st given name	Secondary given names		
If the person compensated is n	·						
Full legal name	of non-individual MiA	nna Consultin	g and Design				
F	irm NRD number			(if a	pplicable)		
Indicate whether the person co	mpensated facilitated the o	distribution throu	ugh a funding por	tal or an internet-base	ed portal. Ves		
b) Business contact info	rmation						
If a firm NRD number is not pr	ovided in Item 8 (a), provid	le the business co	ontact information	n of the person being o	compensated.		
Street address	14166 28A Ave						
Municipality	Surrey			Province/Stat	e British Columbia		
Country	Canada		F	Postal code/Zip cod	e V4P 2H8		
Email address				Telephone number	er		
c) Relationship to issuer	or investment fund ma	nager					
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 inv	estment fund ma	anager \square	Employee of the issu	er or investment fund manager		
✓ None of the above			ў Ц	, ,	G		
d) Compensation details							
Provide details of all compensa Canadian dollars. Include cash	tion paid, or to be paid, to commissions, securities-ba uch as clerical, printing, leg	sed compensation al or accounting	on, gifts, discounts services. An issue	or other compensatio r is not required to asl	distribution. Provide all amounts in n. Do not report payments for services a for details about, or report on, internal		
Cash commissions p	aid			Security code 1	Security code 2 Security code 3		
Value of all securiti	30 000 0		Security codes	W N T			
Describe terms of warrants, options or other rights Each GameOn Warrant will be exercisable to acquire one additional GameOn Share for a period of 24 months at a price of \$0.52 subject to acceleration in the event the GameOn Shares trade at \$0.78 or greater for a period of 10 consecutive trading days.							
Other compensation	on ⁵	Describe					
Total compensation pa	aid	Ī					
Check box if the pe	Check box if the person will or may receive any deferred compensation (describe the terms below)						
⁴ Provide the aggregate value additional securities of the iss rights exercisable to acquire a ⁵ Do not include deferred comp	uer. Indicate the security of additional securities of the	codes for all sect			r rights exercisable to acquire c <u>luding</u> options, warrants or other		

a) Name of person comp	pensated and regi	stration status					
Indicate whether the person co	mpensated is a regis	trant.	✓ No	☐ Yes			
If the person compensated is a	n individual, provide	the name of the indivi	dual.				
Full legal name of indiv	vidual						
		Family name	Firs	t given name	Secondary g	iven names	
If the person compensated is no	•	_	mation.				
Full legal name	Full legal name of non-individual Jayconomics Inc.						
F	irm NRD number			(if app	olicable)		
Indicate whether the person co	mpensated facilitate	d the distribution throu	ıgh a funding por	tal or an internet-based	portal.	No Yes	
b) Business contact info	rmation						
If a firm NRD number is not pro	ovided in Item 8 (a),	provide the business co	ontact information	n of the person being co	mpensated.		
Street address	506-521 Old Car	more Rd					
Municipality	Canmore			Province/State	Alberta		
Country	Canada		F	Postal code/Zip code	T1W 0M4		
Email address				Telephone number			
c) Relationship to issuer	or investment fur	nd 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 Reployee 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 pa	aid			Security code 1	Security code 2	Security code 3	
Value of all securitie distributed as compensation	0.1	285.00	Security codes	W N T			
Describe terms of warrants, options or other rights Each GameOn Warrant will be exercisable to acquire one additional GameOn Share for a period of 24 months at a price of \$0.52 subject to acceleration in the event the GameOn Shares trade at \$0.78 or greater for a period of 10 consecutive trading days							
Other compensation	on ⁵	Describe					
Total compensation pa	aid						
Check box if the person will or may receive any deferred compensation (describe the terms below)							
⁴ Provide the aggregate value additional securities of the issinghts exercisable to acquire a ⁵ Do not include deferred comp	uer. Indicate the sec additional securities	curity codes for all sect					

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, pr	ovide the name of the indivi	dual.						
Full legal name of individual								
	Family name	First giver	n name	Secondary giv	ven names			
If the person compensated is not an individua	l, provide the following infor	mation.						
Full legal name of non-indivi	Full legal name of non-individual Senta Capital Inc.							
Firm NRD number (if applicable)								
Indicate whether the person compensated fac	ilitated the distribution throu	ıgh a funding portal or	an internet-based p	oortal.	No 🗌 Yes			
b) Business contact information								
If a firm NRD number is not provided in Item	8 (a), provide the business co	ontact information of th	ne person being com	pensated.				
Street address 500-666 Bur	rard St							
Municipality Vancouver			Province/State	British Columb	ia			
Country Canada		Posta	I code/Zip code	V6C 3P6				
Email address		Tele	ephone number					
c) Relationship to issuer or investmer	nt fund manager	J						
Indicate the person's relationship with the issu				ning of "connected	" in Part B(2) of			
the Instructions and the meaning of "control"			•					
Connect with the issuer or investment	ent fund manager	Inside	er of the issuer (oth	ier than an investm	ient fund)			
Director or officer of the investment	fund or investment fund ma	anager Empl	oyee of the issuer	or investment fund	manager			
None of the above								
d) Compensation details								
Provide details of all compensation paid, or to								
Canadian dollars. Include cash commissions, s incidental to the distribution, such as clerical, p								
allocation arrangements with the directors, off					•			
Cash commissions paid			Security code 1	Security code 2	Security code 3			
Value of all securities	2,400.00	Security codes	C M S					
distributed as compensation ⁴								
	nts, options or other rights							
Other compensation ⁵	Describe							
Total compensation paid								
Check box if the person will or ma	ay receive any deferred con	npensation (describe th	ne terms below)					
⁴ Provide the aggregate value of all securities	distributed as compensation	on, <u>exclu</u> dina options. v	warrants or other ric	ghts exercisable to	acquire			
additional securities of the issuer. Indicate the rights exercisable to acquire additional security.	e security codes for all sect							
⁵ Do not include deferred compensation.								

a) Name of person com	pensated and registration statu	ıs						
Indicate whether the person co	ompensated is a registrant.		✓ No		Yes			
If the person compensated is a	n individual, provide the name of th	ne individ	lual.					
Full legal name of indi	vidual							
	Family name		Firs	t given r	name		Secondary g	iven names
If the person compensated is n	ot an individual, provide the followi	ing inforn	nation.					
Full legal name	e of non-individual 2296281 Al	lberta In	ıc.					
F	Firm NRD number				(it	appli	cable)	
Indicate whether the person co	ompensated facilitated the distribution	on throug	gh a funding port	tal or a	n internet-bo	ised p	ortal. 🗸	No Yes
b) Business contact info	rmation							
If a firm NRD number is not pr	ovided in Item 8 (a), provide the bu	siness coi	ntact information	of the	person being	g com	pensated.	
Street address	180 Lake Acadia PI SE							
Municipality	Calgary			F	Province/St	ate	Alberta	
Country	Canada		P	ostal	code/Zip co	ode	T2J 3B8	
Email address				Telep	ohone num	ber		
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 mai	nager \square	Emplo	vee of the is	suer c	or investment fun	d manager
✓ None of the above					,			3
<u> </u>	,							
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 p	aid				Security cod	e 1	Security code 2	Security code 3
Value of all securiti	3 067 00	s	ecurity codes		WN	Т		
·	Describe terms of warrants, options or other rights Each GameOn Warrant will be exercisable to acquire one additional GameOn Share for a period of 24 months at a price of \$0.52 subject to acceleration in the event the GameOn Shares trade at \$0.78 or greater for a period of 10 consecutive trading days							
Other compensation	on ⁵ De	escribe						
Total compensation pa	aid	'						
Check box if the person will or may receive any deferred compensation (describe the terms below)								
additional securities of the iss	of all securities distributed as comp suer. Indicate the security codes for additional securities of the issuer. pensation.							

a) Name of person comp	ensated and regi	stration status				
Indicate whether the person cor	mpensated is a regis	trant.	☐ No	✓ Yes		
If the person compensated is ar	individual, provide	the name of the indiv	idual.			
Full legal name of indiv	ridual					
		Family name	Firs	st given name	Secondary given names	
If the person compensated is no	ot an individual, prov	vide the following info	rmation.			
Full legal name	of non-individual	Haywood Securiti	es Inc.			
F	irm NRD number	1 6 3	0	(if ap	plicable)	
Indicate whether the person co	mpensated facilitate	d the distribution thro	ugh a funding por	tal or an internet-based	d portal. ✓ No ☐ Yes	
b) Business contact infor	mation					
If a firm NRD number is not pro	ovided in Item 8 (a),	provide the business c	ontact information	n of the person being co	ompensated.	
Street address						
Municipality				Province/State)	
Country			-	Postal code/Zip code		
Email address				Telephone number	r	
c) Relationship to issuer	or investment fur	nd 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 issu	er or investment fu	nd manager		Insider of the issuer (c	other than an investment fund)	
Director or officer of t	he investment fund	or investment fund m	anager	Employee of the issue	er or investment fund manager	
✓ None of the above						
d) Compensation details						
Canadian dollars. Include cash o	commissions, securit ch as clerical, printir	ies-based compensationg, legal or accounting	on, gifts, discounts services. An issue	or other compensation r is not required to ask	distribution. Provide all amounts in . Do not report payments for services for details about, or report on, internal	
Cash commissions pa	aid 60,2	245.98		Security code 1	Security code 2 Security code 3	
Value of all securitie	172 1	31.00	Security codes	W N T		
Describe terms of warrants, options or other rights Each GameOn Warrant will be exercisable to acquire one additional GameOn Share for a period of 24 months at a price of \$0.52 subject to acceleration in the event the GameOn Shares trade at \$0.78 or greater for a period of 10 consecutive trading						
Other compensatio	n ⁵	Describe	days			
Total compensation pa	id					
Check box if the pe	rson will or may red	eive any deferred cor	mpensation (desc	ribe the terms below)		
⁴ Provide the aggregate value of additional securities of the issurights exercisable to acquire as ⁵ Do not include deferred comp	uer. Indicate the sec additional securities	curity codes for all sec			rights exercisable to acquire uding options, warrants or other	

a) Name of person comp	ensated and regi	stration status						
Indicate whether the person con	Indicate whether the person compensated is a registrant. No Ves							
If the person compensated is an	individual, provide	the name of the indiv	idual.					
Full legal name of indiv	dual							
		Family name	Firs	t given name	Secondary	given names		
If the person compensated is no	-	_						
Full legal name	of non-individual	Canaccord Genui	ty Corp.					
Fi	rm NRD number	9 0 0		(if a	oplicable)			
Indicate whether the person con	npensated facilitate	d the distribution thro	ugh a funding por	tal or an internet-base	d portal. ✓	No Yes		
b) Business contact inform	mation							
If a firm NRD number is not pro	vided in Item 8 (a),	provide the business c	ontact informatior	n of the person being o	ompensated.			
Street address								
Municipality				Province/Stat	е			
Country] F	Postal code/Zip cod	e			
Email address			Ī	Telephone number	er			
c) Relationship to issuer	or investment fur	nd 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 issue	er or investment fu	nd manager	Ш	Insider of the issuer (other than an inves	ment fund)		
Director or officer of the	ne investment fund	or investment fund m	anager	Employee of the issu	er or investment fur	d manager		
✓ None of the above								
d) Compensation details								
Provide details of all compensation Canadian dollars. Include cash control incidental to the distribution, such allocation arrangements with the	ommissions, securit h as clerical, printir	ies-based compensationg, legal or accounting	on, gifts, discounts services. An issue	or other compensation r is not required to ask	n. Do not report pay	ments for services		
Cash commissions pa	id 54,1	59.00		Security code 1	Security code 2	Security code 3		
Value of all securitie	S 154.7	740.00	Security codes	WNT				
distributed as compensation	'	40.00	,					
Describe to	erms of warrants, o	ptions or other rights	additional Gar \$0.52 subject	n Warrant will be ex meOn Share for a p to acceleration in th or greater for a pe	eriod of 24 month ne event the Gam	ns at a price of eOn Shares		
Other compensation	n ⁵	Describe						
Total compensation pa	d							
Check box if the per	son will or may rec	eive any deferred cor	mpensation (desc	ribe the terms below)				
⁴ Provide the aggregate value of additional securities of the issurights exercisable to acquire ac ⁵ Do not include deferred compa	er. Indicate the sec Iditional securities	curity codes for all sec						

a) Name of person comp	ensated and regi	stration status						
Indicate whether the person con	Indicate whether the person compensated is a registrant. No Yes							
If the person compensated is an	individual, provide	the name of the indiv	ridual.					
Full legal name of indivi	idual							
		Family name	!	First given i	name	Secondary (given names	
If the person compensated is no	•	_						
Full legal name	Full legal name of non-individual Acumen Capital Partners							
Fi	rm NRD number	6 0 7	0		(if ap	plicable)		
Indicate whether the person con	npensated facilitate	d the distribution thro	ough a funding p	portal or a	n internet-based	portal.	No Yes	
b) Business contact inform	mation							
If a firm NRD number is not pro	vided in Item 8 (a),	provide the business o	contact informa	tion of the	person being co	mpensated.		
Street address								
Municipality				F	Province/State			
Country				Postal	code/Zip code			
Email address			Ī	Telep	phone number			
c) Relationship to issuer	or investment fur	nd 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 issue	er or investment tu	nd manager	<u>L</u>	_ insider	of the issuer (o	ther than an invest	ment runa)	
Director or officer of the	ne investment fund	or investment fund m	nanager	Emplo	yee of the issue	r or investment fun	d manager	
✓ None of the above								
d) Compensation details								
Provide details of all compensati Canadian dollars. Include cash co incidental to the distribution, suc allocation arrangements with the	ommissions, securit h as clerical, printii	ies-based compensati ng, legal or accounting	on, gifts, discou g services. An iss	nts or othe suer is not	er compensation. required to ask p	Do not report pay	ments for services	
Cash commissions pa	id 7,0	98.00			Security code 1	Security code 2	Security code 3	
Value of all securitie	s 20.1	280 00	Security codes		W N T			
distributed as compensation	1		,					
Describe to	erms of warrants, c	ptions or other rights	additional 0 \$0.52 subje	SameOn ect to acc	Share for a pe eleration in the	ercisable to acqueriod of 24 monthe event the Gamod of 10 consect	ns at a price of eOn Shares	
Other compensation	n ⁵	Describe						
Total compensation pai	id							
Check box if the person will or may receive any deferred compensation (describe the terms below)								
⁴ Provide the aggregate value of additional securities of the issurights exercisable to acquire action of the include deferred compared to acquire action of the include acquired to acquired to acquire action of the include acquired to acquire action of the include acquired to acquired to acquire action of the include acquired to acquired t	er. Indicate the sed Iditional securities	curity codes for all sec						

тем 9 - Directors, Execu	TIVE OFFICERS	AND PROMOT	ERS OF THE ISS	UER				
If the issuer is an investment fund	d, do not complete	Item 9. Procced to	Item 10.					
Indicate whether the issuer is any o	f the following (selec	t the one that appli	es - if more than one	applies, select onl	y one).			
Reporting issuer in any juris	sdiction of Canada							
Foreign public issuer								
Wholly owned subsidiary of	a reporting issuer in	n any jurisdiction of	Canada ⁶					
Provide nar	ne of reporting issue	or						7
Wholly owned subsidiary of	a foreign public issu	uer ⁶						_
Provide name of	f foreign public issue	er						7
Issuer distributing only eligi	ble foreign securities	and the distribution	on is to permitted clie	nts only ⁷				_
If the issuer is at least one of the	above, do not comp	olete Item 9(a) – (c). Proceed to Item	10.				
⁶ An issuer is a wholly owned subsice securities that are required by law to respectively. ⁷ Check this box if it applies to the collection. Refer to the definitions of "e	o be owned by its dir urrent distribution ev	rectors, are benefic en if the issuer ma	ially owned by the re de previous distributi	eporting issuer or to ions of other types	the foreign	public is	suer,	
✓ If the issuer is none of the	-		.,	the mondenons.				
a) Directors, executive officer	•				<i>C</i> 1			
Provide the following information for territory; otherwise state the country.						tate tne _l	orovince	or
Organization or company name	Family name	First given name	Secondary given names	Business location of non-individual or residentail jurisdiction of individual		non-individual or residentail jurisdiction of Relations!		
				Province or	country	D	0	Р
	Tejani	Shafin	Diamond	British Columb	ia		✓	
	Rempel	Sheri		British Columb	ia	✓		
b) Promoter information								
If the promoter listed above is not an individual, provide the following information for each director and executive officer of the promoter. For locations within Canada, state the province or territory; otherwise state the country. For "Relationship to promoter", "D" – Director, "O" – Executive Officer.								
Organization or company name	Family name	First given name	Secondary given names	Residential jurisdiction of individual		ationship one or bo		
				Province or country	D		C	
c) Residential address of eac	h individual							
Complete Schedule 2 of this form	providing the full r	esidential address	for each individua	l listed in Item 9	(a) and (b)	and att	ach to t	he

completed report. Schedule 2 also requires information to be provided about control persons.

ITEM 10 - CERTIFICATION

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

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

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

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

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

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

Name of issuer/underwriter/investment fund manager/agent	GameOn Entertainment Technologies Inc.							
Full legal name	Rempel							
	Family name	First given name	Secondary given names					
Title	CFO							
Telephone number	6042839166	Email address she	ri@victorysquare.com					
Signature	Sheri Rempel Date		021 06 18					
		Y	YYY MM DD					

TEM 11- CONTACT PERSON								
Provide the following business contact information for the individual that the securities regulatory authority or regulator may contact with any questions regarding the contents of this report, if different than the individual certifying the report in Item 10.								
Same as individual certifying the report								
Lagerbom	Lisa		Title	Paralegal/LAA				
Family name	First given name	Secondary given names	•					
MLT Aikins LLP								
6046085766	Em	ail address llagerbom@	mltaikins	com				
	iness contact information for this report, if different than to al certifying the report Lagerbom Family name MLT Aikins LLP	iness contact information for the individual that the secur this report, if different than the individual certifying the real certifying the report Lagerbom Lisa Family name First given name MLT Aikins LLP	iness contact information for the individual that the securities regulatory authority or othis report, if different than the individual certifying the report in Item 10. all certifying the report Lisa Family name First given name Secondary given names MLT Aikins LLP	iness contact information for the individual that the securities regulatory authority or regulator not this report, if different than the individual certifying the report in Item 10. all certifying the report Lisa Family name First given name Secondary given names MLT Aikins LLP				

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.