# Form 45-106F1 Report of Exempt Distribution

BCSC EDER Reference Number 9518429

ITEM 1 - REPORT TYPE						
☐ New report						
·	nded, provide filing date	of report that is being a	mended 2021 06 11	(YYYY-MM-DD)		
			2021 00 11			
ITEM 2 - PARTY CERTIFYING TH	e Report					
Indicate the party certifying the report (se Instrument 81-106 Investment Fund Cont			investment fund, refer to sect	ion 1.1 of National		
☐ Investment fund issuer						
✓ Issuer (other than an inve	stment fund)					
Underwriter						
ITEM 3 - ISSUER NAME AND O	THER IDENTIFIERS					
Provide the following information about t	he issuer, or if the issuer is an in	vestment fund, about the fund	f.			
Full legal name	Antrim Balanced Mortg	age Fund Ltd.				
Previous full legal name						
If the issuer's name changed in th	ne last 12 months, provide most	recent previous legal name.				
Website	able)					
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						
If two or more issuers distributed a single	security, provide the full legal no	nme(s) of the co-issuer(s) othe	r than the issuer named abov	e.		
Full legal name(s) of co-issuer(s)		(if applic	able)			
ITEM 4 - UNDERWRITER INFORI	MATION					
If an underwriter is completing the report,		gal name and firm NRD num	har			
Full legal name	provide the underwriter 3 parte	gut name ana jam iwaz nam		7		
Firm NRD number						
If the underwriter does not have a firm NI	underwriter does not have a firm NRD number, provide the head office contact information of the underwriter.					
Street address	. Jam. 1112 Hamber, provide the nead office contact afformation of the anatomics.					
Municipality		Province/Sta	е	1		
Country		Postal code/Zip cod	e	_		
Telephone number	Telephone number Website (if applical			(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 2 2 9 9
If the issuer is in the <b>mining industry</b> , indicate the stage of operations. This does not apply to issuers that provide services to issuers operating in the mining industry. Select the category that best describes the issuer's stage of operations.
Exploration Development Production
Is the issuer's primary business to invest all or substantially all of its assets in any of the following? If yes, select all that apply.
✓ Mortgages ☐ Real estate ☐ Commercial/business debt ☐ Consumer debt ☐ Private companies
☐ Cryptoassets
b) Number of employees
Number of employees:
c) SEDAR profile number
Does the issuer have a SEDAR profile?
No  ✓ Yes If yes, provide SEDAR profile number 0 0 0 3 8 5 6 8
If the issuer does not have SEDAR profile complete item 5(d) - (h).
d) Head office address
Street address Province/State
Municipality Postal code/Zip code
Country Telephone number
e) Date of formation and financial year-end
Date of formation Financial year-end 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
11) 6120 01 100001 0 000010

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							
<sup>1</sup> 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 formation 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.

١.	_	
a)	) Currency	•
u	, Cullelley	

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)

### b) 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 2021 06 03

End date 2021 06 10

#### 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 \$	
	ecuri code	,	CUSIP number (if applicable)	Description of security	Number of securities Single or lowest Highest price To		Total amount	
Р	R	S		Class A Preferred Non-Voting Shares	3,355,067.00	1.0000		3,355,067.00
Р	R	S		Class B Series 'B' Preferred Non-Voting Shares.	406,476.00	1.0000		406,476.00
Р	R	S		Class B Series 'C' Preferred Non- Voting Shares	11,096,828.00	1.0000		11,096,828.00

### 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.

Convertible exchangeab security coo	le	derlyii urity c		ise price adian \$)	Expiry date (YYYY- MM-DD)	Conversion ratio	Describe other items (if applicable)
			Lowest	Highest			

## 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 <sup>28</sup> purchasers	Total amount (Canadian \$)
British Columbia	NI 45-106 2.3 [Accredited investor]	9	3,071,818.00
British Columbia	NI 45-106 2.9(1) [Offering memorandum] (BC, NL)	28	8,156,343.00
Ontario	NI 45-106 2.3 [Accredited investor]	3	1,216,910.00
Ontario	NI 45-106 2.9(2.1) [Offering memorandum] (AB, SK, ON, QC, NB, NS)	4	249,600.00

Manitoba	Manitoba NI 45-106 2.3 [Accredited investor]			
Québec	NI 45-106 2.3 [Accredited investor]	1	76,500.00	
	Total dollar amount of se	curities distributed	14,858,371.00	
	Total number of unique purchasers <sup>2b</sup>	46		

<sup>&</sup>lt;sup>2a</sup> 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	

<sup>&</sup>lt;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)

<sup>&</sup>lt;sup>2b</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.

ITEM 8 - COMPENSATION INFORMATION
Provide information for each person (as defined in NI 45-106) to whom the issuer directly provides, or will provide, any compensation in connection with the distribution. <b>Complete additional copies of this page if more than one person was, or will be, compensated.</b>
Indicate whether any compensation was paid, or will be paid, in connection with the distribution.
No ✓ Yes If yes, indicate number of persons compensated. 3

a) Name of person comp	ensated and regi	stration status							
Indicate whether the person co	Indicate whether the person compensated is a registrant.    No   Yes								
If the person compensated is an individual, provide the name of the individual.									
Full legal name of indiv	vidual								
		Family name		First give	en name		Secondary (	jiven names	
If the person compensated is no	If the person compensated is not an individual, provide the following information.								
Full legal name	Full legal name of non-individual PI Financial Corp.								
F	irm NRD number	5 2 9	0			(if app	licable)		
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal.  No Ves									
b) Business contact information									
If a firm NRD number is not pro	ovided in Item 8 (a),	provide the business o	ontact info	rmation of t	the person b	eing con	npensated.		
Street address									
Municipality					Province	/State			
Country			Ī	Post	al code/Zip	o code			ĺ
Email address			Ī	Te	lephone n	umber			أ
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)									
<u> </u>		-				,		,	
Director or officer of t	ne investment fund	or investment tuna m	anager		pioyee of the	e issuer	or investment fun	a 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		35.62			Security	code 1	Security code 2	Security code 3	l
Value of all securitie distributed as compensation			Security co	odes					
Describe t	erms of warrants, o	ptions or other rights							
Other compensation	n <sup>5</sup>	Describe							
Total compensation pa	iid	35.62							
Check box if the person will or may receive any deferred compensation (describe the terms below)									
PI Financial Corp. will receive an annual trailer fee paid monthly in the amount of 1/2% on Class A Preferred Non-Voting Shares, 1% on Class B Series 'B' Preferred Non-Voting Shares and 0% on Class B Series 'C' Preferred Non-Voting Shares.									
<sup>4</sup> Provide the aggregate value of additional securities of the issu- rights exercisable to acquire a <sup>5</sup> Do not include deferred comp	uer. Indicate the sec dditional securities	curity codes for all sec	ion, <u>excludi</u> curities disti	ing options, ributed as c	warrants o	r other ri <sub>i</sub> on, <u>includ</u>	ghts exercisable t <u>ding</u> options, warr	o acquire ants or other	

a) Name of person compe	nsated and regis	tration s	status								
Indicate whether the person com	pensated is a regist	rant.		N	0	<b>√</b>	Yes				
If the person compensated is an i	If the person compensated is an individual, provide the name of the individual.										
Full legal name of individ	dual										
		Family nar	me		Firs	t given n	iame		Secondary	given names	
If the person compensated is not an individual, provide the following information.											
Full legal name o	f non-individual	Raymo	nd Jame	es Ltd.							
Fire	Firm NRD number 8 2 4 0 (if applicable)										
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal.  □ No ✓ Yes											
b) Business contact inform	b) Business contact information										
If a firm NRD number is not prov	ided in Item 8 (a), p	rovide th	e busines	s contact ir	formation	of the	person b	eing con	npensated.		
Street address											
Municipality						P	rovince	/State			
Country					F	Postal o	code/Zip	code			
Email address						Telep	hone n	umber			
c) Relationship to issuer o	r investment fund	d manag	ger								
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		-		managar				,	or investment fu		
<u> </u>	e investment tuna t	n investi	nem min	manayer	Ш	Lilipioy	ree or trie	sissuei	or investment to	iu managei	
✓ None of the above											
d) Compensation details											
Provide details of all compensation Canadian dollars. Include cash co- incidental to the distribution, such allocation arrangements with the	mmissions, securition as clerical, printing directors, officers o	es-based g, legal o r employ	compensor r account	ation, gifts, ing services	discounts . An issue	or othe r is not i	r comper required	nsation. I to ask fo	Do not report pay	ments for se	ervices
Cash commissions paid		25.49					Security	code 1	Security code 2	Security co	ode 3
Value of all securities distributed as compensation				Security	codes						
Describe ter	rms of warrants, op	tions or	other righ	ts							
Other compensation <sup>5</sup>	5		Describ	ре							
Total compensation paid	1 2	25.49									
Check box if the person will or may receive any deferred compensation (describe the terms below)											
Raymond James Li Voting Shares, 1% Voting Shares.	td. will receive ar on Class B Serie	annual es 'B' Pr	l trailer fo eferred I	ee paid m Non-Votin	onthly in g Shares	the an	nount of 0% on C	1/2% ( lass B	on Class A Pre Series 'C' Pref	ferred Nor erred Non-	)-
<sup>4</sup> Provide the aggregate value of additional securities of the issue rights exercisable to acquire add <sup>5</sup> Do not include deferred compe	r. Indicate the secu ditional securities o	ırity code	es for all s								er

a) Name of person comp	ensated and regi	stration status								
Indicate whether the person co	mpensated is a regis	trant.	☐ No	$\checkmark$	Yes					
If the person compensated is an individual, provide the name of the individual.										
Full legal name of indiv	vidual									
		Family name		First given n	ame	Secondary	given names			
If the person compensated is no	If the person compensated is not an individual, provide the following information.									
Full legal name of non-individual Canaccord Genuity Corp.										
F	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.  No Ves										
b) Business contact information										
If a firm NRD number is not pro	ovided in Item 8 (a),	provide the business	contact inform	nation of the p	person being o	compensated.				
Street address										
Municipality				Р	rovince/Stat	е				
Country				Postal o	ode/Zip cod	е				
Email address				Telep	hone numbe	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 issuer or investment fund manager  Insider of the issuer (other than an investment fund)										
Director or officer of t	Director or officer of the investment fund or investment fund manager									
None of the above			.a.iago.		00 0. 110 100 1	0. 000	.a manage.			
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	aiu	0.76			Security code 1	Security code 2	Security code 3			
Value of all securitie distributed as compensation			Security cod	es						
Describe	terms of warrants, o	ptions or other rights								
Other compensation	n <sup>5</sup>	Describe								
Total compensation pa	nid	0.76								
✓ Check box if the person will or may receive any deferred compensation (describe the terms below)										
	es, 1% on Class E	ve an annual traile 3 Series 'B' Preferre								
<sup>4</sup> Provide the aggregate value additional securities of the issinghts exercisable to acquire a <sup>5</sup> Do not include deferred comp	uer. Indicate the sed dditional securities	curity codes for all sec								

TEM 9 - DIRECTORS, EXECU				UER						
If the issuer is an investment fun	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 applie	es - if more than one	applies, select only	one).					
Reporting issuer in any jurisdiction of Canada										
Foreign public issuer										
Wholly owned subsidiary of	f a reporting issuer ir	n any jurisdiction of	Canada <sup>6</sup>							
Provide nar	me of reporting issue	r								
Wholly owned subsidiary of	f a foreign public issu	uer <sup>6</sup>								
Provide name o	f foreign public issue	r								
Issuer distributing only eligi	ble foreign securities	and the distributio	n is to permitted clie	nts only <sup>7</sup>						
If the issuer is at least one of the	above, do not comp	olete Item 9(a) – (d	c). Proceed to Item	10.						
<sup>6</sup> An issuer is a wholly owned subsidiary of a reporting issuer or a foreign public issuer if all of the issuer's outstanding voting securities, other than securities that are required by law to be owned by its directors, are beneficially owned by the reporting issuer or the foreign public issuer, respectively. <sup>7</sup> Check this box if it applies to the current distribution even if the issuer made previous distributions of other types of securities to non-permitted clients. Refer to the definitions of "eligible foreign security" and "permitted client" in Part B(1) of the Instructions.  [V] If the issuer is none of the above, check this box and complete Item 9(a) - (c).										
a) Directors, executive officer	rs and promoters of	of the issuer								
Provide the following information fo territory; otherwise state the country.						tate the p	rovince	or		
Organization or company name	Organization or company name  Family name  First given name  Secondary given names  Secondary given names  Business location of non-individual or residentail jurisdiction of individual  Relationship to issuer (select all that apply)									
				Province or o	country	D	0	Р		
	Granleese	William		British Columbia	a	✓	✓			
	Granleese	William	R.	British Columbia	a	✓				
	Worsnup	Christopher	Gavin	British Columbia	a	✓				
b) Promoter information				·						
If the promoter listed above is not ar within Canada, state the province or										
			Secondary given	Residential jurisdiction of		itionship				

## Residential address of each individual

Organization or company name

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.

names

First given name

Family name

individual

Province or

country

D

0

## **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	Antrim Balanced Mortgage Fund Ltd.									
Full legal name	Granleese		R.							
	Family name	First given name		Seconda	ary given names					
Title	Portfolio Manager									
Telephone number	6045302301	Email address	will@a	antriminvest	ments.com					
Signature	"William Granleese"	Date	202	1 06	15					
			YYYY	Y MM	DD					

ITEM 11- CONTACT F	PERSON				
, ,	·	r the individual that the secu the individual certifying the	rities regulatory authority or report in Item 10.	regulator may	contact with any questions
Same as individua	al certifying the report				
Full legal name				Title	
	Family name	First given name	Secondary given names		
Name of company					
Telephone number		En	nail 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.