Form 45-106F1 Report of Exempt Distribution

BCSC EDER Reference Number 9257614

ITEM 1 - REPORT TYPE							
New report							
Amended report If an	nended, provide filing date	of report that is being am	nended 2020 10 05	(YYYY-MM-DD)			
ITEM 2 - PARTY CERTIFYING T	HE REPORT						
Indicate the party certifying the report (Instrument 81-106 Investment Fund Co			vestment fund, refer to section	on 1.1 of National			
Investment fund issuer							
✓ Issuer (other than an investment fund)							
ITEM 3 - ISSUER NAME AND (
Provide the following information abou							
Full legal nar	gal name Global Cannabis Applications Corp.						
Previous full legal nar	vious full legal name						
If the issuer's name changed in	n the last 12 months, provide most	recent previous legal name.					
Webs	ite www.cannappscorp.co	om (if applicat	ole)				
If the issuer has a legal entity identifier,	provide below. Refer to Part B of	the Instructions for the definition	o of "legal entity identifier".				
Legal entity identifi	er 549300DFCN73ZO9R	1423					
If two or more issuers distributed a sing	le security, provide the full legal r	name(s) of the co-issuer(s) other t	han the issuer named above.	1			
Full legal name(s) of co-issuer	(S)	(if applicab	ole)				
ITEM 4 - UNDERWRITER INFO	RMATION						
If an underwriter is completing the repo	ort, provide the underwriter's full l	egal name and firm NRD numbe	r	1			
Full legal name							
Firm NRD number		(if applicable)					
If the underwriter does not have a firm	NRD number, provide the head of	ffice contact information of the u	nderwriter.				
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 in your reasonable judgment most closely corresponds to the issuer's primary business activity.
NAICS industry code 5 4 1 9 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
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 Ves If yes, provide SEDAR profile number 0 0 0 3 6 3 0 9
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.
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
S100M to under \$500M	S500M to under \$1B	S1B or over

ib close is an investment fund, provide the following information: iiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiii
Full legal name
Firm NRD number
If the investment fund manager does not have a firm NRD number, provide the head office contact information of the investment fund manager. Street address Municipality Country Postal code/Zjp code Telephone number Website (if applicable) D Type of investment fund Type of investment fund fund that most accurately identifies the issuer (select only one). Money market Country Postal code/Zjp code Indicate whether one or both of the following apply to the investment fund. Invests primarily in other investment fund issuers Country Indicate whether one or both of the following apply to the investment fund. Invests primarily in other investment fund issuers Indicate whether one or both of the following apply to the investment fund. Invests primarily in other investment of Transferable Securities funds (UCITs Funds) are investment funds regulated by the European Union (EU) directives that allow collective investment fund Date of formation and financial year-end of the investment fund YYYY MM DD MM DD
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CUSIP number
If the investment fund is publicly listed, provide the name of the exchange on which the investment fund's 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
f) Net asset value (NAV) of the investment fund
Select the NAV range of the investment fund as of the date of the most recent NAV calculation (Canadian \$).
\$0 to under \$5M \$5M to under \$25M \$25M to under \$100M \$100M to under \$500M \$500M to under \$1B \$1B or over Date of NAV calculation:

ITEM 7 - INFORMATION ABOUT THE DISTRIBUTION

connection with the distribution, Schedule 1 of the report.	liction of Canada only	/. Do not include	risdiction of Canada, in e in Item 7 securities iss ne information provided	ued as payr	ment of c	ommissions or fil	nder's fees in
a) Currency							
Select the currency or currencies	in which the distribut	tion was made. A	All dollar amounts prov	ided in the	report m	ust be in Canadio	an dollars.
✓ Canadian dollar	US dollar	Euro	Other (descr	be)			
b) Distribution date(s)							
State the distribution start and e as both the start and end dates. distribution period covered by the Start da	If the report is being for the report.	filed for securitie.		nuous basis	s, include	the start and en	
	ate 2020 09			late 202		09 25 MM DD	
c) Detailed purchaser info				11			
Complete Schedule 1 of the		urchaser and	attach the schedul	e to the c	omnlet	ed report.	
-	· · ·						
d) Types of securities dist Provide the following informatio security code. If providing the CU	n for all distributions						ow to indicate the
			_			Canadian \$	
Security CUSIP number (if applicable)	Description of s	security	Number of securities	low	le or rest ice	Highest price	Total amount
UBS 37956B con	ts, each consistir nmon share and o are purchase war	one commor	40,053,795. n	00 0).0220	0.0220	881,184.00
e) Details of rights and co	nvertible/exchange	eable securitie	es l				
If any rights (e.g. warrants, optio were distributed, provide the co	ons) were distributed, p	provide the exerc	cise price and expiry do				xchangeable securities
If any rights (e.g. warrants, optio	ns) were distributed, p nversion ratio and des Exercise pr (Canadian	provide the exerc scribe any other rice 1 \$)	cise price and expiry do		geable se	ecurity.	xchangeable securities tems (if applicable)
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Ontario	NI 45-106 2.14 [Securities for debt]	1	28,250.00
Switzerland	NI 45-106 2.14 [Securities for debt]	1	400,934.00
	Total dollar amount of se	curities distributed	881,184.00
	Total number of unique purchasers ^{2b}	10	

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

^{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.

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.³ 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)

ITEM 8 - COMPENSATION	NFORMATION				
Provide information for each perso the distribution. Complete additi					any compensation in connection with i ted.
Indicate whether any compensation	on was paid, or will be paid,	in connectio	on with the distributio	n.	
✓ No 🗌 Yes	If yes, indicate numbe	er of perso	ns compensated.		
a) Name of person compen-	sated and registration st	atus			
Indicate whether the person compe	nsated is a registrant.		No [Yes	
If the person compensated is an inc	lividual, provide the name c	of the individ	lual.		
Full legal name of individu	al				
	Family name	e	First give	en name	Secondary given names
If the person compensated is not a	n individual, provide the foll	owing inforr	nation.		
Full legal name of	non-individual				
Firm	NRD number			(if app	blicable)
Indicate whether the person compe	ensated facilitated the distrik	ution throu	ah a fundina portal or		portal. No Yes
b) Business contact informa					
If a firm NRD number is not provid		husiness co	ntact information of t	he person heina coi	mnensated
Street address					
				Province/State	
Municipality			_		
Country			Posta	al code/Zip code	
Email address			Те	lephone number	
c) Relationship to issuer or	nvestment fund manage	er			
Indicate the person's relationship w the Instructions and the meaning c					aning of "connected" in Part B(2) of
Connect with the issuer of	or investment fund manage	r	Insic	der of the issuer (ot	her than an investment fund)
Director or officer of the i	nvestment fund or investme	ent fund ma	nager 🗌 Emp	loyee of the issuer	or investment fund manager
None of the above					
d) Compensation details					
	missions, securities-based co as clerical, printing, legal or o	ompensation accounting :	n, gifts, discounts or ot services. An issuer is n	ther compensation. ot required to ask f	stribution. Provide all amounts in Do not report payments for services or details about, or report on, internal
Cash commissions paid				Security code 1	Security code 2 Security code 3
Value of all securities distributed as compensation ⁴		S	ecurity codes		
Describe term	ns of warrants, options or ot	ther rights			
Other compensation ⁵		Describe			
Total compensation paid					
Check box if the perso	n will or may receive any de	eferred com	pensation (describe t	he terms below)	
⁴ Provide the aggregate value of a					
additional securities of the issuer. rights exercisable to acquire addit ⁵ Do not include deferred compens	ional securities of the issue		rities distributed as co	ompensation, <u>inclu</u>	<u>ding</u> options, warrants or other

ITEM 9 - DIRECTORS, EXECU	TIVE OFFICERS	AND PROMOT	ERS OF THE ISS	UER				
If the issuer is an investment fund, do not complete Item 9. Procced to Item 10.								
Indicate whether the issuer is any of the following (select the one that applies - if more than one applies, select only one).								
Reporting issuer in any juris	diction of Canada							
Foreign public issuer								
Wholly owned subsidiary of a reporting issuer in any jurisdiction of Canada ⁶								
Provide nan	ne of reporting issue	r]
Wholly owned subsidiary of	a foreign public issu	ier ⁶						
Provide name of	foreign public issue	r]
Issuer distributing only eligi	ole foreign securities	and the distributio	n is to permitted clie	ents only ⁷				
If the issuer is at least one of the	above, do not comp	olete Item 9(a) – (d	c). Proceed to Item	10.				
⁶ An issuer is a wholly owned subsid securities that are required by law to respectively. ⁷ Check this box if it applies to the cu clients. Refer to the definitions of "e	be owned by its dir urrent distribution eve	ectors, are benefic en if the issuer mad	ially owned by the re de previous distributi	porting issuer or t ions of other types	the foreign	public is	suer,	
If the issuer is none of the			. ,					
a) Directors, executive officer					<u> </u>			
Provide the following information for territory; otherwise state the country.						tate the	province	or
Organization or company name	Family name	First given name	Secondary given names	Business loc non-individe resident jurisdictio individu	ual or ail n of		onship to ct all that	
				Province or	country	D	0	Р
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	Drganization or company name Family name First given name Secondary given names Residential gurisdiction of individual Relationship to promoter (select one or both if applicable)							oter icable)
				Province or country	D		С	
c) Residential address of eac		.,	, ,					
Complete Schedule 2 of this form completed report. Schedule 2 also					(a) and (b)	and at	tach to tl	1e

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	Global Cannabis Applications Corp.						
Full legal name	Helmel						
	Family name First given name			Secondary given names			
Title	CFO	CFO					
Telephone number	6045378198 Email address redonda@gmail.co				om		
Signature	"Alexander Helmel" Date			10	26		
			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		Er	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.