# Form 45-106F1 Report of Exempt Distribution

BCSC EDER Reference Number 9373855

ITEM 1 - REPORT TYPE						
☐ New report						
Amended report If amended, provide filing date of report that is being amended 2021 02 15 (YYYY-MM-DD)						
ITEM 2 - PARTY CERTIFYING TH	E REPORT					
Indicate the party certifying the report (sel Instrument 81-106 Investment Fund Conti				estment fund, refer to secti	on 1.1 of National	
Investment fund issuer	ndous Disclosure and the comp	union policy to Ni o	17-100.			
✓ Issuer (other than an inves	stment fund)					
Underwriter	arion rana)					
ITEM 3 - ISSUER NAME AND OT	HER IDENTIFIERS					
Provide the following information about th			ut the fund.			
Full legal name	Global Cannabis Applic	cations Corp.				
Previous full legal name						
If the issuer's name changed in th	e last 12 months, provide most	recent previous lega	ıl name.			
Website	www.cannappscorp.co	m	(if applicable	e)		
If the issuer has a legal entity identifier. pr	ovide below. Refer to Part B of t	he Instructions for t	he definition o	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-issu	uer(s) other th	an the issuer named above	·.	
Full legal name(s) of co-issuer(s)			(if applicable	e)		
ITEM 4 - UNDERWRITER INFORM	MATION					
If an underwriter is completing the report,	provide the underwriter's full le	gal name and firm I	NRD number.		٦	
Full legal name						
Firm NRD number (if applicable)						
If the underwriter does not have a firm NRD number, provide the head office contact information of the underwriter.						
Street address						
Municipality		Prov	ince/State			
Country		Postal code	e/Zip code		j	
Telephone number			Website		(if applicable)	

Primary industry	Item 5 - Issuer Information					
Provide the issuer's North American Industry Classification Standard (NAICS) code (6 digits only) that in your reasonable judgment most closely carreagonds to the issuer is primary business activity.  NAICS industry code  5	If the issuer is an investment fund, do not complete Item 5. Proceed to Item 6.					
## If the issuer of employees    NalCs industry code	a) Primary industry					
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   Development						
mining industry. Select the category that best describes the issuer's stage of operations.    Exploration   Development   Production	NAICS industry code 5 4 1 9 9 0					
Step	mining industry. Select the category that best describes the issuer's stage of operations.					
Mortgages						
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 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  Municipality  Country  Telephone number  e) Date of formation and financial year-end  Date of formation	b) Number of employees					
Does the issuer have a SEDAR profile?  No Yes 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  Municipality  Country  Postal code/Zip code  Telephone number  e) Date of formation and financial year-end  Date of formation 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.  All AB BC MB NB 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  Exchange and not a trading facility such as, for example, an automated trading system.  Exchange name	Number of employees: ✓ 0 - 49 ☐ 50 - 99 ☐ 100 - 499 ☐ 500 or more					
If the issuer does not have SEDAR profile complete item 5(d) - (h).  d) Head office address  Street address  Municipality  Country  Date of formation and financial year-end  Date of formation 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.  All AB BC MB NB NB NL NT  NS NU ON PE QC SK YT  If the issuer 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	c) SEDAR profile number					
If the issuer does not have SEDAR profile complete item 5(d) - (h).  d) Head office address  Street address  Municipality  Country  Telephone number  e) Date of formation and financial year-end  Date of formation  Tyryy  MM  DD  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.  All  AB  BC  MB  NB  NI  NI  NS  NU  ON  PE  QC  SK  YT   J Hubic listing status  If the issuer is publicly listed, 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	Does the issuer have a SEDAR profile?					
d) Head office address  Street address  Municipality Country Postal code/Zip code Telephone number  e) Date of formation and financial year-end  Date of formation Financial year-end  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.  All AB BC MB NB 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 As for example, an automated trading system.  Exchange name	No  ✓ Yes If yes, provide SEDAR profile number  0 0 0 3 6 3 0 9					
Street address Province/State Municipality Postal code/Zip code Telephone number  e) Date of formation and financial year-end  Date of formation 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.  All AB BC MB NB 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 Description 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						
Municipality  Country  Telephone number  Date of formation and financial year-end  Date of formation  YYYY MM DD  Financial year-end  MM DD  Financial year-end  MM DD  Telephone number  Financial year-end  MM DD  Financial year-end  MM DD  Telephone number  MM DD  Telephone number  Financial year-end  MM DD  Telephone number  Financial year-end  MM DD  Telephone number  Financial year-end  MM DD  Telephone number  MM DD  Telephone number  Financial year-end  MM DD  T	d) Head office address					
Country    Telephone number	Street address Province/State					
e) Date of formation and financial year-end  Date of formation	Municipality Postal code/Zip code					
Date of formation	Country Telephone number					
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.  All AB BC MB NB NL NT NS NU ON PE QC SK YT  g) Public listing status  If the issuer has a CUSIP number GUSIP number CUSIP number Gustafus 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	e) Date of formation and financial year-end					
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.  All 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 Such ange 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						
If yes, select the jurisdictions of Canada in which the issuer is a reporting issuer.  All 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 Distributed 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	f) Reporting issuer status					
All 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	Is the issuer a reporting issuer in any jurisdication of Canada? No Yes					
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	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 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	AII AB BC MB NB NL NT					
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	NS NU ON PE QC SK YT					
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	g) Public listing status					
exchange and not a trading facility such as, for example, an automated trading system.  Exchange name						
h) Size of issuer's assets	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					
<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 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 of the investment fund					
If the investment fund has a CUSIP number, provide below (first 6 digits only)					
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					
-	AV) of the investment fund				
	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 \$500	DM \$500M to under \$1B \$1B or over Date of NAV calculation:  YYYY MM DD				

## **ITEM 7 - INFORMATION ABOUT THE DISTRIBUTION**

US dollar

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.

) Currency
lect the currency or currencies in which the distribution was made. All dollar amounts provided in the report must be in Canadian dollars

# b) Distribution date(s)

✓ Canadian dollar

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.

Other (describe)

Start date 2021 02 03

YYYYY MM DD

End date	2021	02	03
	YYYY	MM	DD

#### c) Detailed purchaser information

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

Euro

### 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	
ι	ЈВ	8	37956B	Units, each consisting of one common share and one common share purchase warrant.	4,648,561.00	0.1050	0.1050	488,099.94

#### 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 / exchangeable security code		exchangeable Underlying Exercise price (Canadian \$)				Expiry date (YYYY- MM-DD)	Conversion ratio	Describe other items (if applicable)		
						Lowest	Highest			
W	N	Т	С	М	S	0.1700	0.1700	2024-02-03	1:1	4,648,561 warrants each convertible into a common share of the Issuer at an exercise price of \$0.17 until February 3, 2024.

## 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>2<u>a</u></sup> purchasers	Total amount (Canadian \$)
British Columbia	NI 45-106 2.14 [Securities for debt]	3	104,998.96
Ontario	NI 45-106 2.5 [Family, friends and business associates]	1	21,000.00
Ontario	NI 45-106 2.14 [Securities for debt]	1	24,999.98
United States	NI 45-106 2.14 [Securities for debt]	1	12,800.03

	488,098.93				
Israel	NI 45-106 2.3 [Accredited investor]	2	173,250.00		
Israel	NI 45-106 2.5 [Family, friends and business associates]	1	25,005.02		
United States	NI 45-106 2.3 [Accredited investor]	1	49,999.95		
Australia	Australia NI 45-106 2.3 [Accredited investor] 1				
Australia	Australia NI 45-106 2.5 [Family, friends and business associates]				

<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	pensated and regis	stration status					
Indicate whether the person co	mpensated is a regist	trant.	✓ No	Yes			
If the person compensated is an individual, provide the name of the individual.							
Full legal name of indi	vidual						
		Family name	Fire	st given name	Secondary given names		
If the person compensated is not an individual, provide the following information.							
Full legal name of non-individual Genie Innovative Solutions Ptd. Ltd.							
Firm NRD number (if applicable)							
Indicate whether the person co	mpensated facilitated	d the distribution throu	gh a funding por	tal or an internet-based	portal.  Ves		
b) Business contact info	rmation						
If a firm NRD number is not pr	ovided in Item 8 (a), <sub>i</sub>	provide the business co	entact informatio	n of the person being cor	mpensated.		
Street address	2 Nolan Court						
Municipality	Ashwood			Province/State	Victoria		
Country	Australia		ī	Postal code/Zip code	3147		
Email address				Telephone number	610429939231		
c) Relationship to issuer	or investment fun	d 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 meani	-		or the purposes o				
Connect with the issu	uer or investment fur	nd manager		Insider of the issuer (ot	her than an investment fund)		
Director or officer of	the investment fund	or investment fund ma	nager	Employee of the issuer	or investment fund manager		
✓ None of the above							
d) Compensation details							
Canadian dollars. Include cash	commissions, securiti Ich as clerical, printin	es-based compensatio g, legal or accounting	n, gifts, discounts services. An issue	or other compensation. r is not required to ask fo	stribution. Provide all amounts in Do not report payments for services or details about, or report on, internal		
Cash commissions p			aratriadat compe	-			
Value of all securiti	5.0	00.00	Security codes	U B S	Security code 2 Security code 3		
Describe terms of warrants, options or other rights  47,619 finders units, each unit consisting of 1 common share and one common share purchase warrant each convertible into a common share of the Issuer at an exercise price of \$0.17 per share until Feb 3, 2024							
Other compensation	on <sup>5</sup>	Describe					
Total compensation pa	aid 5,0	00.00					
Check box if the person will or may receive any deferred compensation (describe the terms below)							
<sup>4</sup> Provide the aggregate value additional securities of the iss rights exercisable to acquire a <sup>5</sup> Do not include deferred comp	uer. Indicate the sec additional securities o	urity codes for all secu			ights exercisable to acquire ding options, warrants or other		

a) Name of person comp	pensated and regis	stration status					
Indicate whether the person co	mpensated is a regist	trant.	✓ No	Yes			
If the person compensated is an individual, provide the name of the individual.							
Full legal name of indi	vidual						
		Family name	Firs	t given name	Secondary given names		
If the person compensated is not an individual, provide the following information.							
Full legal name of non-individual CHS Discretionary Trust							
Firm NRD number (if applicable)							
Indicate whether the person co	Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal.						
b) Business contact info	rmation						
If a firm NRD number is not pr	ovided in Item 8 (a), <sub>I</sub>	provide the business co	ontact informatior	n of the person being co	mpensated.		
Street address	3/17 Bellevue Par	rk Road					
Municipality	Bellevue Hill			Province/State	NSW		
Country	Australia		F	Postal code/Zip code	2023		
Email address				Telephone number	610416656084		
c) Relationship to issuer	or investment fun	d 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 meani	-		· · · <u>—</u>				
Connect with the issu	uer or investment für	nd manager	Ш	Insider of the issuer (o	ther than an investment fund)		
Director or officer of	the investment fund	or investment fund ma	anager	Employee of the issue	r or investment fund manager		
✓ None of the above							
d) Compensation details							
Canadian dollars. Include cash	commissions, securiti Ich as clerical, printin	es-based compensatio g, legal or accounting	n, gifts, discounts services. An issue	or other compensation. r is not required to ask f	istribution. Provide all amounts in Do not report payments for services for details about, or report on, internal		
Cash commissions p					Constituted 2 Constituted 2		
Value of all securition distributed as compensation	1 1 16	51.50	Security codes	U B S	Security code 2 Security code 3		
Describe terms of warrants, options or other rights  44,300 finders units, each unit consisting of 1 common share and one common share purchase warrant each convertible into a common share of the Issuer at an exercise price of \$0.17 per share until Feb 3, 2024							
Other compensation	on <sup>5</sup>	Describe					
Total compensation pa	4,6	51.50					
Check box if the pe	erson will or may rec	eive any deferred con	npensation (desci	ribe the terms below)			
<sup>4</sup> Provide the aggregate value additional securities of the iss rights exercisable to acquire a <sup>5</sup> Do not include deferred comp	uer. Indicate the sec additional securities o	urity codes for all sect			rights exercisable to acquire Iding options, warrants or other		

a) Name of person comp	pensated and regis	stration status							
Indicate whether the person co	mpensated is a regist	rant.	[·	✓ No			Yes		
If the person compensated is an individual, provide the name of the individual.									
Full legal name of indiv	vidual Mohr			Leor					
		Family name		•	First g	jiven na	ame	•	Secondary given names
If the person compensated is n	If the person compensated is not an individual, provide the following information.								
Full legal name of non-individual									
Firm NRD number (if applicable)									
Indicate whether the person co	mpensated facilitated	the distribution	throug	h a fundin	g portal	or an	interne	t-based p	ortal.    No  Yes
b) Business contact info	rmation								
If a firm NRD number is not pr	ovided in Item 8 (a), ¡	provide the busin	ness con	tact inforn	nation o	of the p	erson b	eing com	pensated.
Street address	6 Boyer Street								
Municipality	Tel Aviv					Pı	rovince	e/State	
Country	Israel				Ро	stal c	ode/Zip	o code	6912706
Email address					7	Γeleph	none n	umber	972544274154
c) Relationship to issuer	or investment fun	d 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	uer or investment fun	nd manager			☐ In	sider o	of the is	suer (oth	er than an investment fund)
Director or officer of	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 pa	aid						Security	code 1	Security code 2 Security code 3
Value of all securition distributed as compensation	ี 12 ผ	60.00	Se	curity cod	les		U B		South South 2 Cooking South South
Describe terms of warrants, options or other rights  132,000 finders units, each unit consisting of 1 common share and one common share purchase warrant each convertible into a common share of the Issuer at an exercise price of \$0.17 per share until Feb 3, 2024									
Other compensation	on⁵	Desc	cribe						
Total compensation pa	13,80	60.00							
Check box if the pe	erson will or may rec	eive any deferre	d comp	ensation (	(describ	e the t	erms b	elow)	
<sup>4</sup> Provide the aggregate value additional securities of the iss rights exercisable to acquire a <sup>5</sup> Do not include deferred comp	uer. Indicate the secondditional securities o	urity codes for a							

тем 9 - Directors, Execu	TIVE OFFICERS	AND PROMOT	ERS OF THE ISS	SUER					
If the issuer is an investment fund, do not complete Item 9. Procced to Item 10.									
Indicate whether the issuer is any o	f the following (select	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 any jurisdiction of Canada <sup>6</sup>									
Provide name of reporting issuer									
Wholly owned subsidiary of	a foreign public issu	uer <sup>6</sup>						_	
Provide name of	foreign public issue	r						7	
Issuer distributing only eligil	ble foreign securities	and the distribution	n is to permitted clie	ents 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.									
If the issuer is none of the above, check this box and complete Item 9(a) - (c).									
a) Directors executive officer	s and promoters of	of the issuer							
a) Directors, executive officers and promoters of the issuer  Provide the following information for each director, executive officer and promoter of the issuer. For locations within Canada, state the province or									
territory; otherwise state the country. For "Relationship to issuer", "D" – Director, "O" – Executive Officer, "P" – Promoter.									
Organization or company name	Organization or company name  Family name  First given name  Secondary given names  Secondary given names  Secondary given names  Business location of non-individual or residentail jurisdiction of individual  (select all that apply)								
				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	Family name	First given name	Secondary given names	Residential jurisdiction of individual			to promo		
				Province or country	D		C	)	
c) Residential address of each individual									
Complete Schedule 2 of this form completed report. Schedule 2 also					(a) and (b)	and at	tach to t	he	

# 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	Secondary given names						
Title	CFO							
Telephone number	6045378198	Email address re	edonda@gmail.com					
Signature	"Alexander Helmel"	2021 03 10						
			YYYY MM DD					

ITEM 11- CONTACT PERSON									
	•	r the individual that the secu the individual certifying the	9 )	regulator m	ay 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		Er	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.