Form 45-106F1 Report of Exempt Distribution

BCSC EDER Reference Number 9382196

ITEM 1 - REPORT TYPE											
✓ New report											
Amended report	If amer	ded, pro	vide fi	iling dat	e of ı	report	that is	being ame	ended) (YYYY-MM-DD)
ITEM 2 - PARTY CERTIFY	ING THE	REPOR	Г								
Indicate the party certifying the Instrument 81-106 Investment									estment fund	, refer to sect	ion 1.1 of National
Investment fund is	ssuer										
✓ Issuer (other than	an inves	ment fui	nd)								
ITEM 3 - ISSUER NAME	AND OTI	HER IDEI	NTIFIE	RS							
Provide the following informati						ment fu	nd, abou	it the fund.]
Full le	gal name	Gama E	Explor	ations Ir	IC.						
Previous full le	gal name	Crocan	Capit	al Corp.							
If the issuer's name cho	anged in the	last 12 ma	onths, pi	rovide mos	st rece	ent previ	ious legal	l name.			
	Website							(if applicabl	e)		
If the issuer has a legal entity id	dentifier <u>,</u> pro	vide below	. Refer t	o Part B o	f the I	nstructio	ons for th	he definition o	of "legal entit	y identifier".	
Legal entity	identifier										
If two or more issuers distribute	ed a single se	curity, pro	vide the	full legal	name	(s) of th	e co-issu	er(s) other th	an the issuer	named above	2
Full legal name(s) of co	-issuer(s)							(if applicable	e)		
ITEM 4 - UNDERWRITER	INFORM	ATION									
If an underwriter is completing	the report, p	provide the	underw	riter's full	legal	name a	nd firm N	NRD number.			
Full legal name											
Firm NRD number	Firm NRD number (if applicable)					-					
If the underwriter does not have	e a firm NRL) number, j	orovide	the head o	office	contact	informati	ion of the un	derwriter.		
Street address]
Municipality							Provi	ince/State]
Country					Ī	Pos	tal code	e/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 2 1 2 2 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 🗌 50 - 99 🗌 100 - 499 🗌 500 or more
c) SEDAR profile number
Does the issuer have a SEDAR profile?
✓ No Yes If yes, provide SEDAR profile number
If the issuer does not have SEDAR profile complete item 5(d) - (h).
d) Head office address
Street address c/o #1200 - 750 West Pender Street Province/State British Columbia
Municipality Vancouver Postal code/Zip code V6C 2T8
Country Canada Telephone number
e) Date of formation and financial year-end
Date of formation 2018 08 31 Financial year-end 01 31 YYYY 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	S5M to under \$25M	□ \$25M to under \$100M
S100M to under \$500M	S500M to under \$1B	\$1B or over

If the issue is an investment fund, provide the following information: a) Investment fund manager information Full legal name						
Full legal name						
Firm NRD number (if applicable) 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 Province/State						
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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 \$).						
L L \$\the under \$\mathbf{S}M \qquad L \qquad \mathbf{S}M \text{ to under \$\mathbf{S}M \qquad \text{ to under \$\mathbf{S}M \qquad \text{to under \$\mathbf{S}M						
\$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

If an issuer located outside purchasers resident in that connection with the distribu Schedule 1 of the report.	jurisdi	ction of Canado	a only. Do not include	e in Item 7 securities issue	ed as payment of c	ommissions or fi	inder's fees in
a) Currency							
Select the currency or curre	ncies i	n which the dis	tribution was made.	All dollar amounts provid	led in the report m	ust be in Canadi	an dollars.
✓ Canadian dollar	\square	US dollar	Euro	Other (describ	e)		
	\				,		
b) Distribution date(s State the distribution start of as both the start and end d distribution period covered	and en lates. If	f the report is be					
St	art dat	^{te} 2021	02 22	End da	^{te} 2021 (02 22	
		YYYY	MM DD		YYYY	MM DD	
c) Detailed purchase	r infor	mation					
Complete Schedule 1 d	of this	s form for ea	ch purchaser and	attach the schedule	to the complet	ed report.	
d) Types of securities	s distr	ibuted					
Provide the following inform			tions reported on a p	er security basis. Refer to	Part A(12) of the I	nstructions for h	ow to indicate the
security code. If providing t							
						Canadian \$	
				Number of	Single or		
Security CUSIP number code (if applicable)		Descriptio	on of security	Number of	lowest	Highest price	Total amount
				securities	price	0 1	
	Corr	nmon shares	-	37,000.0	price		3,700.00
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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	INFORMATION				
Provide information for each person the distribution. Complete additi				-	ny compensation in connection with ed.
Indicate whether any compensati	on was paid, or will be po	aid, in connecti	on with the distribu	ition.	
✓ No 🗌 Yes	If yes, indicate num	nber of perso	ns compensated	1.	
a) Name of person compen	sated and registration	status			
Indicate whether the person comp	ensated is a registrant.		🗌 No	Yes	
If the person compensated is an in	dividual, provide the nam	ne of the individ	lual.		
Full legal name of individu	lal				
	Family n	ame	First g	given name	Secondary given names
If the person compensated is not a	n individual, provide the †	following infor	nation.		
Full legal name of	non-individual				
Firm	NRD number			(if appli	cable)
Indicate whether the person comp		tribution throu	gh a funding porta	l or an internet-based p	ortal. 🗌 No 🗌 Yes
b) Business contact informa					
If a firm NRD number is not provid	led in Item 8 (a), provide t	the business co	ntact information o	of the person being com	pensated.
Street address					
Municipality				Province/State	
Country			Po	stal code/Zip code	
Email address			-	Telephone number	
c) Relationship to issuer or	investment fund mana	ager			
Indicate the person's relationship w the Instructions and the meaning o					ning of "connected" in Part B(2) of
	or investment fund mana		· · ·		er than an investment fund)
Director or officer of the	investment fund or inves	tment fund ma	nager 🗌 E	mployee of the issuer of	or investment fund manager
None of the above					
d) Compensation details					
allocation arrangements with the a	nmissions, securities-based as clerical, printing, legal	d compensation or accounting	n, gifts, discounts o services. An issuer i	r other compensation. D 's not required to ask for	
Cash commissions paid				Security code 1	Security code 2 Security code 3
Value of all securities distributed as compensation ⁴		S	ecurity codes		
Describe tern	ns of warrants, options of	r other rights			
Other compensation ⁵		Describe			
Total compensation paid					
Check box if the perso	on will or may receive any	y deferred com	pensation (describ	be the terms below)	
⁴ Provide the aggregate value of a additional securities of the issuer. rights exercisable to acquire addi ⁵ Do not include deferred compen-	Indicate the security cod tional securities of the iss	des for all secu			

ITEM 9 - DIRECTORS, EXECU	UTIVE OFFICERS	AND PROMOT	ERS OF THE ISS	SUER				
If the issuer is an investment fun	d, do not complete	Item 9. Procced to	Item 10.					
Indicate whether the issuer is any c	of the following (sele	ct the one that appli	es - if more than one	applies, select onl	y one).			
Reporting issuer in any juri	sdiction of Canada							
Foreign public issuer								
Wholly owned subsidiary o	f a reporting issuer i	in any jurisdiction of	Canada ⁶					
Provide nar	me of reporting issu	er]
Wholly owned subsidiary o	f a foreign public iss	suer ⁶						
Provide name o	f foreign public issu	er]
Issuer distributing only eligi	ible foreign securitie	s and the distributio	n is to permitted clie	ents only ⁷				
If the issuer is at least one of the	-			-				
⁶ An issuer is a wholly owned subsic securities that are required by law t respectively. ⁷ Check this box if it applies to the c clients. Refer to the definitions of "e ✓ If the issuer is none of the	to be owned by its d urrent distribution e eligible foreign secul	irectors, are benefic ven if the issuer mac rity" and "permitted o	ially owned by the re de previous distribut client" in Part B(1) or	eporting issuer or i ions of other types	the foreign	public is	suer,	
a) Directors, executive office	rs and promoters	of the issuer						
Provide the following information fo territory; otherwise state the country						state the	province	or
Organization or company name	Family name	First given name	Secondary given names	Business loc non-individ resident jurisdictic individu	ual or ail n of		onship to ct all that	
				Province or	country	D	0	Р
	Larmour	Allan		British Columb	ia	✓	~	
	Brewster	Norman		Ontario		✓		
	Riley	Jason		British Columb	ia	✓		
	Sandhar	Jatinder		British Columb	ia		✓	
b) Promoter information								
If the promoter listed above is not an within Canada, state the province or								
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	ch individual							
Complete Schedule 2 of this form	providing the full	residential address	for each individua	ıl listed in Item 9	(a) and (b) and att	tach to th	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	Gama Explorations Inc.						
Full legal name	Larmour Allan						
	Family name	First given name		Seconda	iry given na	ames	
Title	CEO						
Telephone number	6049615353	Email address	aclarmo	our@gmail.	.com		
Signature	"Allan Larmour"	Date	2021	02	24		
			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	Fong	Sandy		Title	Paralegal
	Family name	First given name	Secondary given names		
Name of company	Morton Law LLP				
Telephone number	6043319547	Em	ail address sf@mortor	nlaw.ca	

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.