# Form 45-106F1 Report of Exempt Distribution

BCSC EDER Reference Number 9130385

ITEM 1 - REPORT TYPE									
✓ New report									
Amended report If amended, provide filing date of report that is being amended (YYYY-MM-DD)									
TEM 2 - PARTY CERTIFYING THE REPORT									
Indicate the party certifying the report (select only one). For guidance regarding whether an issuer is an investment fund, refer to section 1.1 of National Instrument 81-106 Investment Fund Continuous Disclosure and the companion policy to NI 81-106.									
Investment fund issuer									
✓ Issuer (other than an investment fund)									
Underwriter	o ra.ra,								
ITEM 3 - ISSUER NAME AND OTH									
Provide the following information about the issuer, or if the issuer is an investment fund, about the fund.									
_	ImmunoPrecise Antibo	dies Ltd.							
Previous full legal name									
If the issuer's name changed in the	last 12 months, provide most	recent previous legal nam	e.						
Website		(if ap	plicabl	e)					
If the issuer has a legal entity identifier, prov	vide below. Refer to Part B of t	he Instructions for the def	inition (	of "legal entity identifier".					
Legal entity identifier									
If two or more issuers distributed a single se	curity, provide the full legal no	ame(s) of the co-issuer(s) o	other th	an the issuer named above.					
Full legal name(s) of co-issuer(s)		(if ap	plicable	e)					
ITEM A. HADEDWEITER INCOME	ATION								
ITEM 4 - UNDERWRITER INFORM									
If an underwriter is completing the report, p	rovide the underwriter's full le	gal name and firm NRD n	umber.						
Full legal name									
Firm NRD number		(if applicabl	e)						
If the underwriter does not have a firm NRD	number, provide the head off	ice contact information of	the un	derwriter.					
Street address									
Municipality		Province/S	State						
Country		Postal code/Zip code							
Telephone number		We	Website (if a						

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 3 2 5 4 1 2								
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:   ✓ 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  0 0 0 0 5 5 4 2								
If the issuer does not have SEDAR profile complete item 5(d) - (h).								
d) Head office address								
Street address Province/State								
Municipality Postal code/Zip code								
Country Telephone number								
e) Date of formation and financial year-end								
Date of formation Financial year-end MM DD MM DD								
f) Reporting issuer status								
Is the issuer a reporting issuer in any jurisdication of Canada? No Yes								
If yes, select the jurisdictions of Canada in which the issuer is a reporting issuer.								
AII BC MB NB NL NT								
□ NS    □ NU    □ ON    □ PE    □ QC    □ SK    □ YT								
g) Public listing status								
If the issuer has a CUSIP number, provide below (first 6 digits only)								
CUSIP number								
If the issuer is publicly listed, provide the name of the exchange on which the issuer's equity securities primarily trade. Provide only the name of an								
exchange and not a trading facility such as, for example, an automated trading system.  Exchange name								
h) Size of issuer's assets								

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

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

ITEM 6 - INVESTMENT FUND ISSUER INFORMATION							
If the issuer is an investment 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	it most accurately identifies the issuer (select only one) .						
Money market	☐ Equity ☐ Fixed income ☐ Balanced						
Alternative strate	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							
	tive Investment of Transferable Securities funds (UCITs Funds) are investment funds regulated by the European Union of ollective investment schemes to operate throughout the EU on a passport basis on authorization from one member state.						
c) Date of formation a	nd financial year-end of the investment fund						
Date of forma	tion Financial year-end 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 T						
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 oot a trading facility such as, for example, an automated trading system.						
Exchange on							
-	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 S500M to under \$1B S1B 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. Currency a) Select the currency or currencies in which the distribution was made. All dollar amounts provided in the report must be in Canadian dollars. US dollar ✓ Canadian dollar Euro Other (describe) 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 End date 2020 05 15 2020 05 25 YYYY MM DD YYYY MM DD Detailed purchaser information Complete Schedule 1 of this form for each purchaser and attach the schedule to the completed report. 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 \$ Single or

# Details of rights and convertible/exchangeable securities

Description of security

CUSIP number

(if applicable)

875907

Security

code

V

D

С

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.

Number of

securities

2,627,000.00

Highest price

lowest

price

1.0000

Total amount

2,627,000.00

Convertible / exchangeable security code		,		Underlying security code		Exercise price (Canadian \$)		Expiry date (YYYY- MM-DD)	Conversion ratio	Describe other items (if applicable)		
								Lowest	Highest			
	О	٧	С	)	С	М	S	0.8500				

# 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

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 \$)
Alberta	NI 45-106 2.3 [Accredited investor]	3	110,000.00
British Columbia	NI 45-106 2.3 [Accredited investor]	17	1,344,000.00
Ontario	NI 45-106 2.3 [Accredited investor]	15	500,000.00
Québec	NI 45-106 2.3 [Accredited investor]	9	305,000.00
United Kingdom	NI 45-106 2.3 [Accredited investor]	1	68,000.00
United States	NI 45-106 2.3 [Accredited investor]	2	225,000.00

Ontario	NI 45-106 2.5 [Family, friends and business associates]	1	75,000.00
	2,627,000.00		
	Total number of unique purchasers <sup>2</sup> b	48	

<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.

TEM 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. Complete additional copies of this page if more than one person was, or will be, compensated.												
Indicate whether any compensatio	n was paid, or พ	ill be paid,	in connecti	on with th	e distribui	tion.						
No ✓ Yes	If yes, indica	ate numbe	r of perso	ns comp	ensated		3	3				
a) Name of person compens	ated and regi	stration sta	atus									
Indicate whether the person compe	nsated is a regis	rant.		☐ No		$\checkmark$	Yes					
If the person compensated is an ind	If the person compensated is an individual, provide the name of the individual.											
Full legal name of individual												
		Family name	)		First g	iven na	ame		Sec	condary giv	en name	s
If the person compensated is not an	•											
Full legal name of r	on-individual	Canacco	rd Genuit	y Corp.								
Firm	NRD number	9	0 0					(if appl	icable)			
Indicate whether the person compe	nsated facilitated	the distrib	ution throu	gh a fundi	ng portal	or an	interne	t-based p	ortal.	$\checkmark$	No [	Yes
b) Business contact informat	ion											
If a firm NRD number is not provide	ed in Item 8 (a),	provide the	business co	ntact info	mation o	f the p	erson b	eing com	pensated			
Street address												
Municipality						Pr	ovince	e/State				
Country				Postal code/Zip code								
Email address					٦	Геlерŀ	none n	umber				
c) Relationship to issuer or in	nvestment fun	d manage	r									
Indicate the person's relationship we the Instructions and the meaning of									ning of "o	connected	l" in Part	B(2) of
Connect with the issuer o	r investment fur	ıd manager			In:	sider c	of the is	suer (oth	er than a	n investn	nent fund	i)
Director or officer of the in	vestment fund	or investme	ent fund ma	ınager	☐ Er	nploye	ee of the	e issuer o	or investn	nent fund	manage	er
✓ None of the above												
d) Compensation details												
Provide details of all compensation processes Canadian dollars. Include cash communication incidental to the distribution, such a allocation arrangements with the distribution.	nissions, securiti s clerical, printin	es-based co g, legal or a	mpensatio accounting	n, gifts, dis services. A	counts or n issuer is	other not re	compei equired	nsation. E to ask fo	Do not rep	ort paym	ents for	services
Cash commissions paid	40,5	00.00				3	Security	code 1	Security	code 2	Security	code 3
Value of all securities distributed as compensation <sup>4</sup>			5	Security co	des							
Describe terms	s of warrants, o	otions or oth	ner rights									
Other compensation <sup>5</sup>			Describe									
Total compensation paid	40,5	00.00										
Check box if the person	will or may rec	eive any de	ferred com	pensation	(describe	e the t	erms b	elow)				
additional securities of the issuer.	<sup>4</sup> Provide the aggregate value of all securities distributed as compensation, <u>excluding</u> options, warrants or other rights exercisable to acquire additional securities of the issuer. Indicate the security codes for all securities distributed as compensation, <u>including</u> options, warrants or other rights exercisable to acquire additional securities of the issuer.											

Indicate whether the person compensated is a registrant. No  If the person compensated is an individual, provide the name of the individual.  Full legal name of individual  Family name  First given no  If the person compensated is not an individual, provide the following information.  Full legal name of non-individual  Echelon Wealth Partners  Firm NRD number  3 2 4 2 0  Indicate whether the person compensated facilitated the distribution through a funding portal or an  b) Business contact information	(if app	olicable)	given names								
Full legal name of individual  Family name  First given name  If the person compensated is not an individual, provide the following information.  Full legal name of non-individual  Echelon Wealth Partners  Firm NRD number  3 2 4 2 0  Indicate whether the person compensated facilitated the distribution through a funding portal or an	(if app	olicable)	given names								
Family name  First given not an individual, provide the following information.  Full legal name of non-individual  Firm NRD number  3 2 4 2 0  Indicate whether the person compensated facilitated the distribution through a funding portal or an analysis.	(if app	olicable)	given names								
If the person compensated is not an individual, provide the following information.  Full legal name of non-individual Echelon Wealth Partners  Firm NRD number 3 2 4 2 0  Indicate whether the person compensated facilitated the distribution through a funding portal or an	(if app	olicable)	given names								
Full legal name of non-individual Echelon Wealth Partners  Firm NRD number 3 2 4 2 0  Indicate whether the person compensated facilitated the distribution through a funding portal or an											
Firm NRD number 3 2 4 2 0  Indicate whether the person compensated facilitated the distribution through a funding portal or an											
Indicate whether the person compensated facilitated the distribution through a funding portal or an											
	internet-based	portal.									
b) Business contact information		Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal.									
If a firm NRD number is not provided in Item 8 (a), provide the business contact information of the p	person being co	mpensated.									
Street address											
Municipality Pi	rovince/State										
Country Postal co	ode/Zip code										
Email address Telepl	hone number										
c) Relationship to issuer or investment fund manager											
Indicate the person's relationship with the issuer or investment fund manager (select all that apply). the Instructions and the meaning of "control" in section 1.4 of NI 45-106 for the purposes of complete			ed" in Part B(2) of								
	•	ther than an invest	ment fund)								
☐ Director or officer of the investment fund or investment fund manager ☐ Employe	ee of the issuer	r or investment fun	d 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 connect											
Canadian dollars. Include cash commissions, securities-based compensation, gifts, discounts or other incidental to the distribution, such as clerical, printing, legal or accounting services. An issuer is not											
allocation arrangements with the directors, officers or employees of a non-individual compensated b	y the issuer.		,								
Cash commissions paid 2,500.00	Security code 1	Security code 2	Security code 3								
Value of all securities distributed as compensation <sup>4</sup> Security codes											
Describe terms of warrants, options or other rights											
Other compensation <sup>5</sup> Describe											
Total compensation paid 2,500.00											
Check box if the person will or may receive any deferred compensation (describe the t	terms below)										
<sup>4</sup> Provide the aggregate value of all securities distributed as compensation, evoluting options, we	rrants or other r	rights exercisable	o acquire								
additional securities of the issuer. Indicate the security codes for all securities distributed as comprights exercisable to acquire additional securities of the issuer.  5 Do not include deferred compensation.											
rights exercisable to acquire additional securities of the issuer.											

a) Name of person compensate	ed and registration s	tatus							
Indicate whether the person compensated is a registrant.  No  Yes									
If the person compensated is an individ	dual, provide the name	of the individ	ual.						
Full legal name of individual									
	Family nan	ne	Firs	t given na	ame		Secondar	given name	S
If the person compensated is not an in	dividual, provide the fol	llowing inform	nation.						
Full legal name of nor	n-individual Raymor	nd James Lt	d.						
Firm NF	RD number 8	2 4	0			(if app	licable)		
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal.									
b) Business contact information	า								
If a firm NRD number is not provided i	in Item 8 (a), provide the	e business cor	ntact information	n of the p	erson be	eing con	npensated.		
Street address									
Municipality				Pı	rovince	/State			
Country			F	Postal c	ode/Zip	code			
Email address				Telepl	hone nu	ımber			
c) Relationship to issuer or inve	estment fund manag	er							
Indicate the person's relationship with the Instructions and the meaning of "c								ted" in Part	B(2) of
Connect with the issuer or in				-	-		ner than an inve	stment func	i)
Director or officer of the inve			nager $\square$				or investment fu		
_	sunent iuna oi investii	ient iunu mai	iagei	Lilipioye	ee or the	sissuei	or investment it	nu manage	; i
✓ None of the above									
d) Compensation details									
Provide details of all compensation pai Canadian dollars. Include cash commis incidental to the distribution, such as cl allocation arrangements with the direc	sions, securities-based o lerical, printing, legal or	compensation accounting s	, gifts, discounts ervices. An issue	or other r is not re	compen equired t	sation. I to ask fo	Do not report pa	yments for s	services
Cash commissions paid	1,750.00				Security of	ode 1	Security code 2	Security of	code 3
Value of all securities		•				Joue	Security code 2	Jecunty (	Joue 5
distributed as compensation <sup>4</sup>		Se	ecurity codes						
Describe terms o	f warrants, options or c	other rights							
Other compensation <sup>5</sup>		Describe							
Total compensation paid	1,750.00								
Check box if the person w	ill or may receive any c	deferred comp	pensation (desc	ribe the t	terms be	low)			
<sup>4</sup> Provide the aggregate value of all se									_
additional securities of the issuer. Ind rights exercisable to acquire additions <sup>5</sup> Do not include deferred compensation	al securities of the issue		ities distributed	as comp	pensation	n, <u>includ</u>	<u>ding</u> options, wa	rrants or otl	her

тем 9 - Directors, Execu	TIVE OFFICERS	AND PROMOT	ERS OF THE ISS	SUER					
If the issuer is an investment fund	d, do not complete l	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	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 issuer <sup>6</sup>									
Provide name of foreign public issuer								7	
Issuer distributing only eligil	Issuer distributing only eligible foreign securities and the distribution is to permitted clients 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	e 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	Family name	First given name	Secondary given names	non-individ resident jurisdictio	Business location of non-individual or residentail jurisdiction of individual		Relationship to issuer (select all that apply)		
				Province or	Province or country		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			p to promoter poth if applicable)		
				Province or country	D		0		
c) Residential address of each individual									
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.									

# **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	Immunoprecise Antibodies Ltd.						
Full legal name	Bath Jennifer						
	Family name	First given name	'	Seconda	ary given names		
Title	CEO						
Telephone number	7789661252	Email address	jennifer@	nnifer@immunoprecise.com			
Signature	Jennifer Bath	Date	2020	05	25		
			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	Hethey	Charles		Title	Attorney		
	Family name	First given name	Secondary given name	es			
Name of company	O'Neill Law LLP						
Telephone number	6046875792	Em	ail address cch@st	ockslaw.com			

# 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.