# Form 45-106F1 Report of Exempt Distribution

BCSC EDER Reference Number 9104819

ITEM 1 - REPORT TYPE									
✓ New report									
Amended report If amended, provide filing date of report that is being amended (YYYY-MM-DD)									
ITEM 2 - PARTY CERTIFYING THE	REPORT								
Indicate the party certifying the report (seld Instrument 81-106 Investment Fund Conti				vestment fund, refer to sect	ion 1.1 of National				
☐ Investment fund issuer	idous Disclosure and the comp	amon policy to TVI	01 100.						
✓ Issuer (other than an investment of the state of th	tment fund)								
Underwriter	anoni rana,								
ITEM 3 - ISSUER NAME AND OT									
Provide the following information about th			out the fund.						
Full legal name	Plymouth Rock Techno	ologies Inc.							
Previous full legal name									
If the issuer's name changed in the	e last 12 months, provide most	recent previous leg	gal name.						
Website	plyrotech.com		(if applicable)						
If the issuer has a legal entity identifier, pr	ovide below. Refer to Part B of t	he Instructions for	the definition (	of "legal entity identifier".					
Legal entity identifier									
If two or more issuers distributed a single s	ecurity, provide the full legal no	ame(s) of the co-is	suer(s) other th	an the issuer named above	2.				
Full legal name(s) of co-issuer(s)			(if applicable	e)					
ITEM A HARDENWRITER INFORM	447,011								
ITEM 4 - UNDERWRITER INFORM									
If an underwriter is completing the report,	provide the underwriter's full le	gal name and firn	n NRD number.		٦				
Full legal name									
Firm NRD number		(if a <sub>l</sub>	oplicable)						
If the underwriter does not have a firm NR	D number, provide the head off	ice contact inform	ation of the un	derwriter.					
Street address									
Municipality		Pro	vince/State						
Country		Postal co	de/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 5 1 1
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
c) SEDAR profile number
Does the issuer have a SEDAR profile?
No  ✓ Yes If yes, provide SEDAR profile number  0 0 0 3 2 7 1 8
If the issuer does not have SEDAR profile complete item 5(d) - (h).
d) Head office address
Street address Province/State
Municipality Postal code/Zip code
Country Telephone number
e) Date of formation and financial year-end
Date of formation Financial year-end MM DD 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 ☐ NT
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.

a)	Currency									
Sele	Select the currency or currencies in which the distribution was made. All dollar amounts provided in the report must be in Canadian dollars.									
$\checkmark$	Canadian dollar	JS dollar		] Euro	Other (describe)					
b)	Distribution date(s)									
as b	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 dat	2020	04	24	End date	2020	04	24		
		YYYY	MM	DD	·	YYYY	MM	DD	-	

## c) Detailed purchaser information

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

### d) Types of securities distributed

Provide the following information for all distributions reported on a per security basis. Refer to Part A(12) of the Instructions for how to indicate the security code. If providing the CUSIP number, indicate the full 9-digit CUSIP number assigned to the security being distributed.

						Canadian \$		
Security CUSIP number (if applicable)		CUSIP number (if applicable)	Description of security	Number of securities	Single or lowest price	Highest price	Total amount	
U	В	S	730020	Units, each Unit comprised of one common share in the capital of the Issuer (a Unit Share) and one whole transferrable common share purchase Warrant.	3,128,334.00	0.1500	0.1500	469,250.10

#### 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						Exercise price (Canadian \$)		Conversion ratio	Describe other items (if applicable)	
						Lowest	Highest			
W	N	Т	С	М	S	0.2000	0.2000	2022-04-24	1:1	Each whole Warrant will entitle the holder thereof, on exercise, to purchase one common share in the capital of the Issuer (a Warrant Share) at an exercise price of CDN\$0.20 per Warrant Share until the close of business 24 months from its date of issue.

### f) Summary of the distribution by jurisdiction and exemption

State the total dollar amount of securities distributed and the number of purchasers for each jurisdiction of Canada and foreign jurisdiction where a purchaser resides and for each exemption relied on in Canada for that distribution. However, if an issuer located outside of Canada completes a distribution in a jurisdiction of Canada, include distributions to purchasers resident in that jurisdiction of Canada only.

This table requires a separate line item for: (i) each jurisdiction where a purchaser resides, (ii) each exemption relied on in the jurisdiction where a purchaser resides, if a purchaser resides in a jurisdiction of Canada, and (iii) each exemption relied on in Canada, if a purchaser resides in a foreign jurisdiction.

For jurisdictions within Canada, state the province or territory, otherwise state the country.

Province or country	Exemption relied on	Number of unique <sup>28</sup> purchasers	Total amount (Canadian \$)	
British Columbia	NI 45-106 2.3 [Accredited investor]	8	255,000.00	

British Columbia	NI 45-106 2.5 [Family, friends and business associates]	1	3,000.00
Ontario	NI 45-106 2.3 [Accredited investor]	3	63,750.00
Greece	Distributions to purchasers outside of local jurisdiction (BC, AB, NB)	1	147,500.10
	469,250.10		
	Total number of unique purchasers <sup>2</sup> b	13	

<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	No ✓ Yes If yes, indicate number of persons compensated.									
a) Name of person comper	nsated and registra	ation status								
Indicate whether the person comp	pensated is a registrai	nt.	□ No •	✓ Yes						
If the person compensated is an in	ndividual, provide the	name of the indivi	dual.							
Full legal name of individ	lual									
	Fai	mily name	First give	n name	l.	Secondary (	given names			
If the person compensated is not a	an individual, provide	the following infor	mation.							
Full legal name of	f non-individual L	eede Jones Gab	le Inc.							
Firr	m NRD number	5 7 7	0		(if app	licable)				
Indicate whether the person comp	Densated facilitated th	ļ	ugh a funding portal or	an inter	 net-based <sub> </sub>	portal. 🗸	] No 🔲	Yes		
b) Business contact inform										
If a firm NRD number is not provi	ided in Item 8 (a), pro	vide the business co	ontact information of th	he persor	n being con	npensated.				
Street address										
Municipality				Provin	ice/State					
Country			Posta	al code/2	Zip code			_		
Email address			Tel	lephone	number					
c) Relationship to issuer or	r investment fund r	nanager								
Indicate the person's relationship the Instructions and the meaning							ed" in Part B(	'2) of		
Connect with the issuer	or investment fund i	manager	Insid	ler of the	issuer (otl	ner than an invest	ment fund)			
Director or officer of the	e investment fund or i	nvestment fund ma	anager	loyee of	the issuer	or investment fun	d manager			
None of the above										
d) Compensation details										
Provide details of all compensation Canadian dollars. Include cash cor incidental to the distribution, such allocation arrangements with the	mmissions, securities- as clerical, printing, i	based compensation legal or accounting	n, gifts, discounts or ot services. An issuer is no	ther comp ot require	pensation. I ed to ask fo	Do not report payı	ments for ser	vices		
Cash commissions paid	12,600	.00		Securi	ity code 1	Security code 2	Security cod	le 3		
Value of all securities distributed as compensation <sup>4</sup>			Security codes							
Describe ter	ms of warrants, optic	ons or other rights								
Other compensation <sup>5</sup>		Describe						$\dashv$		
Total compensation paid	12,600	.00								
Check box if the pers	on will or may receiv	l e any deferred con	npensation (describe the	he terms	s below)					
<sup>4</sup> Provide the aggregate value of a	all securities distribu	ted as compensation	on, <u>excluding</u> options,	warrants	s or other ri	ights exercisable t	o acquire			
additional securities of the issuer rights exercisable to acquire add			urities distributed as co	ompensa	ation, <u>includ</u>	<u>ding</u> options, warr	ants or other			

<sup>&</sup>lt;sup>5</sup>Do not include deferred compensation.

a) Name of person compe	nsated and registrat	ion status									
Indicate whether the person comp	pensated is a registrant		☐ No		$\checkmark$	Yes					
If the person compensated is an individual, provide the name of the individual.											
Full legal name of individ	lual										
	Fami	ly name	I	First	given na	ame	I	Seco	ndary g	iven name	S
If the person compensated is not an individual, provide the following information.											
Full legal name of non-individual PI Financial Corp.											
Firm NRD number 5 2 9 0 (if applicable)											
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal.  V No Yes											
b) Business contact inform	ation										
If a firm NRD number is not provi	ided in Item 8 (a), provi	de the busines	s contact info	ormation (	of the p	oerson b	eing cor	mpensated.			
Street address											
Municipality					Pı	rovince	e/State				
Country				Po	ostal c	ode/Zip	o code				
Email address					Telepl	hone n	umber				
c) Relationship to issuer or	r investment fund ma	anager									
Indicate the person's relationship with the issuer or investment fund manager (select all that apply). Refer to the meaning of "connected" in Part B(2) of the Instructions and the meaning of "control" in section 1.4 of NI 45-106 for the purposes of completing this section.											
Connect with the issuer			. , ,		•	-		her than an	invest	ment fund	1)
Director or officer of the	e investment fund or in	vestment fund	manager		mploye	ee of the	e issuer	or investme	ent fun	d manage	er
None of the above				_							
d) Compensation details											
Provide details of all compensation	n paid, or to be paid, to	the person ide	entified in Ite	m 8(a) in	connec	tion wit	th the di	stribution. P	rovide	all amour	nts in
Canadian dollars. Include cash coi incidental to the distribution, such	mmissions, securities-b	ased compense	ation, gifts, di	scounts o	r other	сотрег	nsation.	Do not repo	rt payr	nents for s	services
allocation arrangements with the								or aetatis ab	out, or	героп оп,	ınternat
Cash commissions paid	262.5	50				Security	code 1	Security co	ode 2	Security of	code 3
Value of all securities		=	Security c	odos					102		
distributed as compensation <sup>4</sup>				oues							
Describe terms of warrants, options or other rights											
Other compensation <sup>5</sup>		Describ	oe								
Total compensation paid	262.5	60									
Check box if the person will or may receive any deferred compensation (describe the terms below)											
<sup>4</sup> Provide the aggregate value of											
additional securities of the issue rights exercisable to acquire add <sup>5</sup> Do not include deferred compet	litional securities of the		securities dis	ributed a	s comp	pensatio	on, <u>inclui</u>	<u>aing</u> options	s, warra	ants or oth	ner
Do not include deletred comper	isation.										

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 indi	vidual									
		Family name	First	given name	Secondary	given names				
If the person compensated is not an individual, provide the following information.										
Full legal name	of non-individual	Regents Park Sec	urities Ltd.							
Firm NRD number (if applicable)										
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal.  V No Yes										
b) Business contact info	rmation									
If a firm NRD number is not pr	ovided in Item 8 (a), p	provide the business co	ntact information	of the person being con	npensated.					
Street address	77 New Cavendis	h Street								
Municipality	London			Province/State	England					
Country	United Kingdom		Po	ostal code/Zip code	W1W 6XB					
Email address	matt.hcoker@rps	ec.co.uk		Telephone number	44203515560	00				
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	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 fur	id manager	Llı	nsider of the issuer (otl	her than an inves	ment fund)				
Director or officer of	the investment fund	or investment fund ma	inager 🔲 E	Employee of the issuer	or investment fur	id manager				
✓ None of the above										
d) Compensation details	3									
Provide details of all compensa										
Canadian dollars. Include cash incidental to the distribution, su										
allocation arrangements with the					n actails about, or	report on, anternat				
Cash commissions p	aid 10,3	25.00		Security code 1	Security code 2	Security code 3				
Value of all securiti	I		Security codes							
distributed as compensation			,		<u> </u>					
Describe	terms of warrants, or	otions or other rights								
Other compensation	on <sup>5</sup>	Describe								
Total compensation pa	aid 10,3	25.00								
Check box if the person will or may receive any deferred compensation (describe the terms below)										
<sup>4</sup> Provide the aggregate value	of all securities distri	buted as compensation	n. excludina ontio	ns. warrants or other ri	iahts exercisable	to acquire				
additional securities of the iss rights exercisable to acquire a	uer. Indicate the sec	urity codes for all secu								
5Do not include deferred comp										

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 b	ox 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.							province			
Organization or company name  Family name  First given name  Secondary given names  Secondary given names  Business location of non-individual or residentail jurisdiction of individual  Relationship to issuer (select all that apply)										
				Province or	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 eac	h 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	Plymouth Rock Technologies Inc.							
Full legal name	Katsuris	Vivian						
	Family name	First given name	•	Seconda	ary given n	ames		
Title	Corporate Secretary							
Telephone number	Telephone number 6047292500			vkatsuris@gmail.com				
Signature	Vivian Katsuris	Date	2020	04	29			
			YYYY	MM	DD			

ITEM 11- CONTACT PERSON									
	ness contact information for this report, if different than t			regulator ma	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	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.