Form 45-106F1 Report of Exempt Distribution

BCSC EDER Reference Number 9208947

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 CERTIFY	NG THE	REPOR	Г									
Indicate the party certifying the r Instrument 81-106 Investment Fu	•	-	-			-			estment fund	d, refer to	sectio	n 1.1 of National
Investment fund iss			ssare ar		punto	in policy						
✓ Issuer (other than a		ment fui	nd)									
			10)									
ITEM 3 - ISSUER NAME A	ND OTH	HER IDE	NTIFIE	RS								
Provide the following information	n about the	e issuer, or	if the is	suer is an i	nvesti	ment fu	nd, abou	ut the fund.				
Full lega	Full legal name Sonora Gold & Silver Corp.											
Previous full legal name N/A												
If the issuer's name chan	ged in the	last 12 mo	onths, pr	rovide mos	t rece	nt previ	ous lega	ıl name.				
١	Nebsite	www.sc	norag	oldcorp.	com			(if applicabl	e)			
If the issuer has a legal entity ide	ntifier <u>,</u> pro	vide below	. Refer t	o Part B of	the li	nstructio	ons for t	he definition o	of "legal enti	ty identif	ïer".	
Legal entity id	lentifier	NA										
If two or more issuers distributed	a single se	curity, pro	vide the	full legal i	name	(s) of th	e co-issi	uer(s) other th	an the issuer	named a	above.	
Full legal name(s) of co-is	ssuer(s)	N/A						(if applicable)				
ITEM 4 - UNDERWRITER I	NFORM	ATION										
If an underwriter is completing th	ne report, p	rovide the	underw	riter's full l	legal i	name a	nd firm l	NRD number.				
Full legal name												
Firm NRD number (if applicable)												
If the underwriter does not have a	If the underwriter does not have a firm NRD number, provide the head office contact information of the underwriter.											
Street address												
Municipality							Prov	vince/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 3 9 8
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 0 0 0 8 1 7 4
If the issuer does not have SEDAR profile complete item 5(d) - (h).
d) Head office address
Street address Province/State
Municipality Postal code/Zip code
Country Telephone number
e) Date of formation and financial year-end
Date of formation
f) Reporting issuer status
Is the issuer a reporting issuer in any jurisdication of Canada? No Yes
If yes, select the jurisdictions of Canada in which the issuer is a reporting issuer.
🗌 NS 🗌 NU 🗌 ON 🗌 PE 🗌 QC 🔲 SK 🗌 YT
g) Public listing status
If the issuer has a CUSIP number, provide below (first 6 digits only)
CUSIP number
If the issuer is publicly listed, provide the name of the exchange on which the issuer's equity securities primarily trade. Provide only the name of an exchange and not a trading facility such as, for example, an automated trading system.
Exchange name
h) Size of issuer's assets
Select the size of the issuer's assets based on its most recently available annual financial statements (Canadian \$). If the issuer has not prepared annual financial statements for its first financial year, provide the size of the issuer's assets at the distribution end date.

\$0 to under \$5M	\$5M to under \$25M	□ \$25M to under \$100M
S100M to under \$500M	S500M to under \$1B	S1B or over

If the issue is an investment fund, provide the following information: a) Investment fund manager information Full legal name Furn NRD number If the investment fund manager does not have a firm NRD number, provide the head office contact information of the investment fund manager. Street address Municipality Province/State Guntry Postal code/Zip code Telephone number D Type of investment fund Tree of investment fund that most accurately identifies the issuer (select only one). Alternative strategies Cryptoasset Other (describe) Indicate whether one or both of the following apply to the investment fund. Investment fund that most accurately identifies the issuer (select only one). Alternative strategies Cryptoasset Other (describe) Indicate whether one or both of the following apply to the investment fund. Investment fund that most accurately identifies the issuer (select only one). Indicate whether one or both of the following apply to the investment fund. Investment fund issuers Is a UCIT's Fund' 'understaining for the Collective Investment fund issuers Is a UCIT's Fund' 'understaining for the Collective Investment of Transferable Securities funds (UCIT's Funds) are investment funds regulated by the European Union (C) Date of formation and financial year-end of the investment fund Suppresent fund a reporting issuer in any jurisdication of Canada? No Yes It he investment fund a reporting issuer in any jurisdication of Canada? No Yes It he investment fund hars a CUSP number, provide below (first 6 digits only) CUSP number On O Public listing status of the investment fund is a reporting issuer. All All All </th
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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
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 County Postal code/Zip code County Telephone number Postal code/Zip code Do Type of investment fund Type of investment fund Type of investment fund that most accurately identifies the issuer (select only one). Do Type of investment fund that most accurately identifies the issuer (select only one). Do Money market De Quity De County De C
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CUSIP number
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

purchasers resident in that jurisdi	nada completes a distribution in a juris iction of Canada only. Do not include ir which must be disclosed in Item 8. The	n Item 7 securities issu	ied as payment of c	ommissions or fi	nder's fees in				
a) Currency									
Select the currency or currencies in which the distribution was made. All dollar amounts provided in the report must be in Canadian dollars.									
✓ Canadian dollar US dollar Euro Other (describe)									
b) Distribution date(s)									
as both the start and end dates. If distribution period covered by the		distributed on a contir	nuous basis, include						
Start da	^{ite} 2020 08 07	End da	^{ate} 2020	08 07					
	YYYY MM DD		YYYY	MM DD					
c) Detailed purchaser infor									
Complete Schedule 1 of this	s form for each purchaser and a	ttach the schedule	e to the complet	ed report.					
d) Types of securities distr	ributed								
	n for all distributions reported on a per ISIP number, indicate the full 9-digit CL				ow to indicate the				
				Canadian \$					
Security CUSIP number (if applicable)	Description of security	Number of securities	Single or lowest price	Highest price	Total amount				
C M S 835651100 Com	C M S 835651100 Common Shares 15,000,000.00 0.0300 0.0300 450,000.00								
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.								
exchangeable Underlying security code security code	Exercise price (Canadian \$) Lowest Highest	Expiry date (YYYY- MM-DD)	Conversion ratio	Describe other i	tems (if applicable)				
f) Summary of the distribut	tion 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 purchasers	Total ar	mount (Canadian \$)				
British Columbia	NI 45-106 2.3 [Accredited inv	estor]		22	139,902.50				
British Columbia	NI 45-106 2.5 [Family, friends associates]	NI 45-106 2.5 [Family, friends and business associates]			7,642.50				
Ontario	NI 45-106 2.3 [Accredited inv	2		60,000.00					
Nova Scotia	NI 45-106 2.3 [Accredited inv	estor]		1	300.00				
Australia	NI 45-106 2.3 [Accredited inv	estor]		1	10,000.00				
Bahamas	NI 45-106 2.3 [Accredited inv	estor]		2	14,655.00				
Cayman Islands	NI 45-106 2.3 [Accredited inv	estor]		3	109,000.00				
Germany	NI 45-106 2.3 [Accredited inv	estor]		1	15,000.00				

Mexico	NI 45-106 2.3 [Accredited investor]	1	1,500.00
Singapore	NI 45-106 2.3 [Accredited investor]	1	10,000.00
Switzerland	NI 45-106 2.3 [Accredited investor]	2	55,000.00
United States	NI 45-106 2.3 [Accredited investor]	1	27,000.00
	Total dollar amount of se	curities distributed	450,000.00
	Total number of unique purchasers ^{2b}	40	

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

^{2b} In calculating the total number of unique purchasers to which the issuer distributed securities, count each purchaser only once, regardless of whether the issuer distributed multiple types of securities to, and relied on multiple exemptions for, that purchaser.

g) Net proceeds to the investment fund by jurisdiction

If the issuer is an investment fund, provide the net proceeds to the investment fund for each jurisdiction of Canada and foreign jurisdiction where a purchaser resides.³ If an issuer located outside of Canada completes a distribution in a jurisdiction of Canada, include net proceeds for that jurisdiction of Canada only. For jurisdictions within Canada, state the province or territory, otherwise state the country.

Province or country	Net proceeds (Canadian \$)
Total net proceeds to the investment fund	

³"Net proceeds" means the gross proceeds realized in the jurisdiction from the distributions for which the report is being filed, less the gross redemptions that occurred during the distribution period covered by the report.

h) Offering materials - This section applies only in Saskatchewan, Ontario, Québec, New Brunswick and Nova Scotia.

If a distribution has occurred in Saskatchewan, Ontario, Québec, New Brunswick or Nova Scotia, complete the table below by listing the offering materials that are required under the prospectus exemption relied on to be filed with or delivered to the securities regulatory authority or regulator in those jurisdictions.

In Ontario, if the offering materials listed in the table are required to be filed with or delivered to the Ontario Securities Commission (OSC), attach an electronic version of the offering materials that have not been previously filed with or delivered to the OSC.

Description	Date of document or other material (YYYY-MM-DD)	Previously filed with or delivered to regulator? (Y/N)	Date previously filed or delivered (YYYY-MM-DD)

ITEM 8 - COMPENSATION I	NFORMATION						
Provide information for each person the distribution. Complete addition							nsation in connection with
Indicate whether any compensatic	on was paid, or will be po	aid, in connecti	on with the dist	ribution			
🗌 No 🗹 Yes	If yes, indicate nun	nber of perso	ns compensa	ated.	1		
a) Name of person compens	sated and registration	status					
Indicate whether the person compe	nsated is a registrant.		No No	\checkmark] Yes		
If the person compensated is an ind	lividual, provide the nam	e of the individ	lual.				
Full legal name of individu	al						
	Family n	ame	F	irst given	name	Sec	ondary given names
If the person compensated is not an		-					
Full legal name of r	non-individual Hayw	ood Securitie	es Inc.				
Firm	NRD number 1	6 3	0		(if a	oplicable)	
Indicate whether the person compe	nsated facilitated the dis	tribution throu	gh a funding p	ortal or o	an internet-base	d portal.	✓ No 🗌 Yes
b) Business contact informa	tion						
If a firm NRD number is not provide	ed in Item 8 (a), provide a	the business co	ntact informati	ion of th	e person being c	ompensated.	
Street address							
Municipality					Province/State	е	
Country				Postal	code/Zip code	e	
Email address				Tele	phone numbe	r	
c) Relationship to issuer or i	nvestment fund mana	ager					
Indicate the person's relationship w the Instructions and the meaning o							onnected" in Part B(2) of
Connect with the issuer of	or investment fund mana	iger		Inside	er of the issuer (other than ar	n investment fund)
Director or officer of the in	nvestment fund or inves	tment fund ma	nager	Emplo	oyee of the issue	er or investm	ent fund manager
✓ None of the above							
d) Compensation details							
Provide details of all compensation Canadian dollars. Include cash com incidental to the distribution, such a allocation arrangements with the di	missions, securities-based s clerical, printing, legal rectors, officers or emplo	d compensation or accounting	n, gifts, discoun services. An issi	ts or oth Jer is no	er compensation t required to ask	n. Do not rep	ort payments for services
Cash commissions paid	7,000.00				Security code 1	Security of	code 2 Security code 3
Value of all securities distributed as compensation ⁴		S	ecurity codes				
Describe term	s of warrants, options o	r other rights					
Other compensation ⁵		Describe					
Total compensation paid	7,000.00						
Check box if the persor	n will or may receive any	/ deferred com	pensation (des	scribe th	e terms below)		
⁴ Provide the aggregate value of all							
additional securities of the issuer. rights exercisable to acquire additi			rities distribute	ed as col	mpensation, <u>inc</u>	l <u>uding</u> option	s, warrants or other
⁵ Do not include deferred compens							

ITEM 9 - DIRECTORS, EXECU	TIVE OFFICERS	AND PROMOT	ERS OF THE ISS	UER						
If the issuer is an investment fund	l, do not complete l	tem 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	diction of Canada									
Foreign public issuer										
Wholly owned subsidiary of	a reporting issuer in	any jurisdiction of	Canada ⁶							
Provide nan	ne of reporting issue	r								
Wholly owned subsidiary of	a foreign public issu	ier ⁶						-		
Provide name of	Provide name of foreign public issuer									
Issuer distributing only eligi	ole foreign securities	and the distributio	n is to permitted clie	nts only7				-		
If the issuer is at least one of the	above, do not comp	olete Item 9(a) – (d). Proceed to Item	10.						
securities that are required by law to respectively. ⁷ Check this box if it applies to the cu	⁶ 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,									
If the issuer is none of the										
a) Directors, executive officer	s and promoters o	of the issuer								
Provide the following information for territory; otherwise state the country.	each director, execu	tive officer and pro				tate the	province	or		
Organization or company name	Family name	First given name	Secondary given names	Business loc non-individu resident jurisdictio individu	ation of ual or :ail n of	Relationship to issuer (select all that apply)				
				Province or	country	D	0	Р		
b) Promoter information										
If the promoter listed above is not an within Canada, state the province or										
Organization or company name	Family name					o to promoter oth if applicable)				
				Province or country	D		С	,		
c) Residential address of eac			· · · · · · ·							
Complete Schedule 2 of this form completed report. Schedule 2 also					(a) and (b)	and at	tach to tl	ne		

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	onora Gold & Silver Corp.							
Full legal name	Churchill							
	Family name First given name			Secondary given names				
Title	CEO							
Telephone number	6043985396	Email address	ken@sonoragoldcorp.com					
Signature	"Ken Churchill"	Date		08	17			
			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	Hjerpe	Sandra			Title	Consultant
	Family name	First given name	Secondary	given names		
Name of company	Take It Public Services I	nc.				
Telephone number	6046822928		Email address	sandra@tak	eitpublic	services.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.