# Form 45-106F1 Report of Exempt Distribution

## IT IS AN OFFENCE TO MAKE A MISREPRESENTATION IN THIS REPORT

ITEM 1 - REPORT TYPE								
✓ New report								
Amended report If amen	ided, provide filing date	of report that is being am	ended (YYYY-MM-DD)					
ITEM 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 inves	stment fund)							
Underwriter		_						
ITEM 3 - ISSUER NAME AND OTH	HER IDENTIFIERS							
Provide the following information about the	e issuer, or if the issuer is an in	vestment fund, about the fund.						
Full legal name	Glance Technologies I	nc.						
Previous full legal name								
If the issuer's name changed in	the last 12 months, provide mo	ost recent previous legal name.						
Website	www.glance.tech		(if applicable)					
If the issuer has a legal entity identifier₋ pro	vide below. Refer to Part B of t	he Instructions for the definition	of "legal entity identifier".					
Legal entity identifier								
ITEM 4 - UNDERWRITER INFORM	ATION							
		Lucana and Fran National Roa	interesting Database (AIDD) number					
If an underwriter is completing the report, p	Provide the underwriter's Juli leg	даі пате апа ұнт тұйылы кеу	Istration Database (INKD) number.					
Full legal name								
Firm NRD number		(if applicable)						
If the underwriter does not have a firm NRL	If the underwriter does not have a firm NRD number, provide the head office contact information of the underwriter.							
Street address								
Municipality		Province/State						
Country		Postal code/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 corresponds to the issuer's primary business activity.  For more information on finding the NAICS industry code go to <b>Statistics Canada's NAICS industry search tool.</b> NAICS industry code  5 1 1 2 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 is 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					
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 3 8 8 5 9  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.					
L AII L AB L BC L MB L NB L NL L 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 names of all exchanges on which its securities are listed. Include only the names of exchanges for which the issuer has applied for and received a listing, which excludes, for example, automated trading systems.					
Exchange name(s):					
h) Size of issuer's assets					
Select the size of the issuer's assets for its most recent financial year-end (Canadian \$). If the issuer has not existed for a full 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	ITEM 6 - INVESTMENT FUND ISSUER INFORMATION					
If the issuer is an invest	If the issuer is an investment fund, provide the following information.					
a) Investment fund m	anager informaiton					
Full legal name	Full legal name					
Firm NRD number	(if applicable)					
If the investment fund ma	nager does not have a firm NRD number, provide the head office contact information of the investment fund manager.					
Street address						
Municipality	Province/State Province/State					
Country	Postal code/Zip code					
Telephone number	Website (if applicable)					
b) Type of investment	t fund					
Type of investment fund tha	nt most accurately identifies the issuer (select only one) .					
☐ Money market	☐ Equity ☐ Fixed income					
☐ Balanced	Alternative strategies 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						
	ive Investment of Transferable Securities funds (UCITs Funds) are investment funds regulated by the European Union (EU) ve investment schemes to operate throughout the EU on a passport basis on authorization from one member state.					
c) Date of formation a	and financial year-end of the investment fund					
Date of format	· L L L					
d) Reporting issuer st	YYYY MM DD MM DD tatus of the investment fund					
, 1	orting issuer in any jurisdication of Canada? No Yes					
	of Canada in which the investment fund is a reporting issuer.					
All 🔲	AB BC MB NB NL NT					
□ NS □	NU ON PE QC SK TT					
e) Public listing status	s of the investment fund					
If the investment fund has a	a CUSIP number, provide below (first 6 digits only)					
CUSIP number						
If the investment fund is publicly listed, provide the names of all exchanges on which its securities are listed. Include only the names of exchanges for which the issuer has applied for and received a listing, which excludes, for example, automated trading systems.						
Exchage name	s					
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 \$).						
\$0 to under \$5M	\$5M to under \$25M \$25M to under \$100M					
\$100M to under \$500	DM \$500M to under \$1B \$1B or over Date of NAV calculation:  YYYY MM DD					

ITEM 7 - IN	IFORMATION	ABOUT THE DISTRIBUTION					
purchasers res	sident in that juri	Canada completes a distribution in a jurisdict sdiction of Canada only. Do not include in Ite The information provided in Item 7 must reco	em 7 securities issued as	payment of cor	nmissions or find	ler's fees, which	
a) Currer	ncy						
Select the curi	rency or currenci	es in which the distribution was made. All dol	lar amounts provided ir	n the report mus	t be in Canadian	dollars.	
✓ Canad	dian dollar	US dollar Euro	Other (describe)				
b) Distrib	ution date(s)						
as both the s	start and end dat period covered by	d end dates. If the report is being filed for seces. If the report is being filed for securities dis the report.  art date 2016 08 31  YYYY MM DD		s basis, include	•		
c) Detaile	ed purchaser ir	formation					
Complete So	hedule 1 of th	nis form for each purchaser and attac	h the schedule to th	ne completed	report.		
d) Types	d) Types of securities distributed						
Provide the following information for all distributions that take place in a jurisdiction of Canada on a per security basis. Refer to Part A of the Instructions for how to indicate the security code. If providing the CUSIP number, indicate the full 9-digit CUSIP number assigned to the security being distributed.							
	Canadian \$						
Security code	CUSIP number (if applicable)	Description of security	Number of securities	Single or lowest price	Highest price	Total amount	
UBS	376790101	One common share and one-half of one share purchase warrant which expires 12 months after	1,699,663.00	0.1500	0.1500	254,949.50	

#### Details of rights and convertible/exchangeable securities

date of issuance.

which expires 12 months after

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.

	Security Underlying security code														Underlying security code							(Cana	ise price adian \$)	Expiry date (YYYY- MM-DD)	Conversion ratio	Describe other items (if applicable)
						Lowest	Highest																			
U	В	S	С	М	S	0.2500		2016-09-06		Warrants issued on August 31, 2016 expire August 31, 2017 and warrants issued September 6, 2016 expire September 6, 2017.																

#### 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 purchasers	Total amount (Canadian \$)
British Columbia	NI 45-106 2.3 [Accredited investor]	14	189,450.00
British Columbia	NI 45-106 2.5 [Family, friends and business associates]	2	54,999.50
Alberta	NI 45-106 2.3 [Accredited investor]	2	5,250.00
Cayman Islands	NI 45-106 2.3 [Accredited investor]	1	5,250.00
	254,949.50		

<sup>2</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.

#### 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)

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. <b>Complete additional copies of this page if more than one person was, or will be, compensated.</b>						
Indicate whether any compensation was paid, or will be paid, in connection with the distribution.						
No ✓ Yes If yes, indicate number of persons compensated. 1						
a) Name of person compensated and registration status						
Indicate whether the person compensated is a registrant. No Yes						
If the person compensated is an individual, provide the name of the individual.						
Full legal name of individual						
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 Leede Jones Gable Inc.						
Firm NRD number (if applicable)						
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal.	'es					
b) Business contact information						
If a firm NRD number is not provided in Item 8 (a), provide the business contact information of the person being compensated.						
Street address 1140 Pender St W, Suite 1140						
Municipality Vancouver Province/State British Columbia						
Country Canada Postal code/Zip code V6E 4G1						
Email address Telephone number 6046583252						
c) Relationship to issuer or investment fund manager						
Indicate the person's relationship with the issuer or investment fund manager (select all that apply). Refer to the meaning of "connected" in Part B(2) of the Instructions and the meaning of "control" in section 1.4 of NI 45-106 for the purposes of completing this section.						
Connect with the issuer or investment fund manager Insider of the issuer (other than an investment fund)						
Director or officer of the investment fund or investment fund manager Employee of the issuer or investment fund manager						
✓ None of the above						
d) Compensation details						
Provide details of all compensation paid, or to be paid, to the person identified in Item 8(a) in connection with the distribution. Provide all amounts Canadian dollars. Include cash commissions, securities-based compensation, gifts, discounts or other compensation. Do not report payments for services incidental to the distribution, such as clerical, printing, legal or accounting services. An issuer is not required to ask for details about, or repond, internal allocation arrangements with the directors, officers or employees of a non-individual compensated by the issuer.						
Cash commissions paid 15,996.00 Security codes Security code 1 Security code 2 Security code 3	3					
Value of all securities distributed as compensation <sup>4</sup>						
Describe terms of warrants, options or other rights  106,640 warrants exercisable at \$0.15 per common share for a	٦					
period of 24 months from the date of grant.	4					
Other compensation 5 15,996.00 Describe						
Total compensation paid 31,992.00						
Check box if the person will or may receive any deferred compensation (describe the terms below)	7					
<sup>4</sup> Provide the aggregate value of all securities distributed as compensation, excluding 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.  5Do not include deferred compensation.						

ТЕМ	9 - DIRECTORS, EXECUTI	VE OFFICERS A	AND PROMO	TERS OF THE I	SSUER					
If t	he issuer is an investment fund, o	do not complete I	tem 9. Procced to	o Item 10.						
Ind	Indicate whether the issuer is any of the following (select all that apply).									
Reporting issuer in any jurisdiction of Canada										
	Foreign public issuer									
	Wholly owned subsidiary of a r	eporting issuer in	any jurisdiction of	f Canada <sup>6</sup>						
	Provide name	of reporting issuer								
	Wholly owned subsidiary of a f	oreign public issu	er <sup>6</sup>							
	Provide name of for	reign public issuer								
	Issuer distributing eligible forei	gn securities only	to permitted clien	ts <sup>7</sup>						
If t	he issuer is at least one of the ab	ove, do not comp	olete Item 9(a) –	(c). Proceed to Ite	m 10.					
sect 7 Ch	issuer is a wholly owned subsidiar urities that are required by law to be ecck this box if it applies to the curn its. Refer to the definitions of "eligin	e owned by its dire rent distribution ev	ectors, are benefic en if the issuer m	cially owned by the ade previous distri	reporting issuer ibutions of other t	or the foreig Types of sect	n publ	ic issue	er, respe	ectively.
Γ	If the issuer is none of the ab	ove, check this bo	ox and complete	Item 9(a) - (c).						
a)	Directors, executive officers a	and promoters o	f the issuer							
	ovide the following information for rritory; otherwise state the country.						da, sta	te the p	province	or
	Organization or company name	Family name	First given name	Secondary give names	THE INFORMATION OF THE STATE OF			that		
					Province o	r 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	First given name		Secondary given names	Residential jurisdiction of individual		nship to promoter e or both if applicable)			
					Province or country	D		C	)	
c)	Residential address of each i	ndividual								

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 or director 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 not be delegated to an agent or other individual preparing the report on behalf of the issuer or underwriter. If the individual completing and filing the report is different from the individual certifying the report, provide their name and contact details 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.

#### IT IS AN OFFENCE TO MAKE A MISREPRESENTATION IN THIS REPORT

By completing the information below, I certify to the securities regulatory authority or regulator that:

- I have read and understand this report; and
- all of the information provided in this report is true.

Full legal name	Green	Penny					
	Family name	First given name		Secondary given names			
Title	Chief Operating Officer and a director						
Name of issuer/underwriter/ investment fund manager	I Clanca Tachnalogica Inc						
Telephone number	6046177979	Email address	penny@g	lancepay.com			
Signature	"Penny Green"	Date	2016	09	09		
		•	VVVV	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	Vettoretti	Melissa		Title Paralegal
	Family name	First given name	Secondary given names	
Name of company	Glance Technologies Inc	C.		
Telephone number	6046321286	E	mail address melissa@	glancepay.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:

- 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
- has authorized the indirect collection of the information by the securities regulatory authority or regulator.