Form 45-106F1 Report of Exempt Distribution

BCSC EDER Reference Number 10203665

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 (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)												
ITEM 3 - ISSUER NAME AND OTHER IDENTIFIERS												
Provide the following informat						nd, abou	<i>it the fund.</i>					
Full le	egal name	Dore Cop	per Mining	Corp.								
Previous full le	Previous full legal name											
If the issuer's name ch	anged in the	last 12 monti	hs, provide mo	st recer	nt previe	ous legal	l name.					
	Website www.dorecopper.com (if applicable)											
If the issuer has a legal entity i	dentifier <u>,</u> pro	vide below. R	efer to Part B c	f the Ir	nstructio	ons for th	he definition o	of "legal entit	ty identifier".			
Legal entity	dentifier	254900TI	1I80YG825	C19								
If two or more issuers distribut	ed a single s	ecurity, provid	e the full legal	name((s) of the	e co-issu	ıer(s) other th	an the issuer	named above) 		
Full legal name(s) of co	o-issuer(s)						(if applicable	e)				
ITEM 4 - UNDERWRITE	R INFORM	IATION										
If an underwriter is completing	the report, p	provide the un	derwriter's full	legal r	name ar	nd firm N	NRD number.			-		
Full legal name]		
Firm NRD number						(if app	olicable)					
If the underwriter does not hav	ve a firm NRL	D number, pro	vide the head	office c	ontact i	informat	tion of the un	derwriter.		_		
Street address]		
Municipality						Provi	ince/State]		
Country					Post	tal code	e/Zip code]		
Telephone number							Website			(if applicable)		

ITEM 5 - ISSUER INFORMATION											
If the issuer is an investment fund, do not complete Item 5. Proceed to Item 6.											
a) Primary industry											
Provide the issuer's North American Industry Classification Standard (NAICS) code (6 digits only) that in your reasonable judgment most closely corresponds to the issuer's primary business activity.											
NAICS industry code 2 1 2 2 3 3											
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 Ves If yes, provide SEDAR profile number 0 0 0 4 5 8 1 3											
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

ib close is an investment fund, provide the following information: iiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiii									
Full legal name									
Firm 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 Country Postal code/Zjp code Telephone number Website (if applicable) D Type of investment fund Type of investment fund fund that most accurately identifies the issuer (select only one). Money market Country Postal code/Zjp code Indicate whether one or both of the following apply to the investment fund. Invests primarily in other investment fund issuers Country Indicate whether one or both of the following apply to the investment fund. Invests primarily in other investment fund issuers Indicate whether one or both of the following apply to the investment fund. Invests primarily in other investment of Transferable Securities funds (UCITs Funds) are investment funds regulated by the European Union (EU) directives that allow collective investment fund Date of formation and financial year-end of the investment fund YYYY MM DD MM DD									
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Country									
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If the investment fund has a CUSIP number, provide below (first 6 digits only) CUSIP number									
CUSIP number									
If the investment fund is publicly listed, provide the name of the exchange on which the investment fund's 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									
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 \$500M \$500M to under \$1B \$1B or over Date of NAV calculation:									

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											
Select the currency or currencies in	n which the distribution	n was made. Al	ll dollar amounts prov	ided in tl	he report m	ust be in Car	adian dollars.				
Canadian dollar	US dollar	Euro	Other (descri	be)							
b) 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 dat	2023 00	06	End C	2		06 06					
	YYYY MM	DD		<u>۲</u>	YYYY	MM DD					
c) Detailed purchaser infor				- +- +b-		ad variant					
Complete Schedule 1 of this	· · ·	cnaser ana a	ittach the schedul	e to the	e complet	ea report.					
d) Types of securities distri					(12) (1)						
Provide the following information security code. If providing the CUS											
			1			Canadi	an \$				
Security code CUSIP number (if applicable)	Description of sec	urity	Number of securities		ingle or lowest price	Highest pric	e Total amount				
C M S 25821T100 com	mon shares		3,555,000.	00	0.2000		711,000.00				
F T S 25821T100 flow-			1,900,002.		0.2400		456,000.48				
F T S 25821T100 flow-	-through shares		2,875,000.	00	0.4150		1,193,125.02				
e) Details of rights and convertible/exchangeable securities											
If any rights (e.g. warrants, option were distributed, provide the com Convertible /							le/exchangeable securities				
exchangeable Underlying security code security code	Exercise price (Canadian \$)		Expiry date (YYYY- MM-DD)		Conversion ratio Describe other items (if applicable)						
f) Summary of the distribut	ion by jurisdiction a	nd exemptior	1								
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	E	Exemption relied on				²⁹ Tot	al amount (Canadian \$)				
Alberta	NI 45-106 2.3 [Ac	credited inv	/estor]			1	41,000.00				
British Columbia	NI 45-106 2.3 [Ac	credited inv	/estor]			2	48,000.00				
Ontario	NI 45-106 2.3 [Ad	credited inv	/estor]			8	456,000.48				
Québec	NI 45-106 2.3 [Ac	credited inv	/estor]		;	32	1,815,125.02				
		Tota	al dollar amount of s	ecuritie	s distribut	ted	2,360,125.50				
	Tot	tal number of	unique purchasers ²	b	4	43					
^{2a} In calculating the number of ur	nique nurchasers per re	w count each	nurchaser only once	loint nur	chasers ma	v he counted	as one nurchaser				

ŀ ιy ^{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)

Ітем 8 - Со	MPENSATIC	N INFORMATION	
		rson (as defined in NI 45-106) to whom the issuer directly provides, or will provide, any compensation in connection wit litional copies of this page if more than one person was, or will be, compensated.	h
Indicate wheth	ner any compen	ation was paid, or will be paid, in connection with the distribution.	
🗌 No	✓ Yes	If yes, indicate number of persons compensated.	

a) Name of person comp	ensated and regis	stration	status							
Indicate whether the person compensated is a registrant. No Ves										
If the person compensated is an individual, provide the name of the individual.										
Full legal name of individual										
		Family n	ame			Firs	t given n	ame		Secondary given names
If the person compensated is not an individual, provide the following information.										
Full legal name of non-individual PARADIGM CAPITAL INC. / PARADIGME CAPITAL INC.										
Firm NRD number 3 4 5 0 (if applicable)										
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal.										
b) Business contact infor	mation									
If a firm NRD number is not pro	ovided in Item 8 (a), p	provide t	the busin	ness co	ontact info	rmatior	n of the	person Ł	oeing con	npensated.
Street address										
Municipality							Р	rovince	e/State	
Country						F	Postal c	code/Zi	p code	
Email address							Telep	hone n	number	
c) Relationship to issuer	or investment fun	d mana	ager		1					
										aning of "connected" in Part B(2) of
the Instructions and the meanin	-			-106 [or the pur			-		ner than an investment fund)
			-							
Director or officer of th	ne investment fund (or inves	tment fu	nd ma	anager		Employ	vee of th	e issuer	or investment fund manager
✓ None of the above										
d) Compensation details										
Canadian dollars. Include cash c	ommissions, securiti ch as clerical, printin	es-baseo g, legal	d compei or accou	nsatio Inting	n, gifts, di. services. A	scounts In issue	or othei r is not i	r compe required	nsation. I to ask fo	tribution. Provide all amounts in Do not report payments for services r details about, or report on, internal
Cash commissions pa	id 4,8	00.00						Security	code 1	Security code 2 Security code 3
Value of all securitie distributed as compensation	es Security codes W N T									
Describe terms of warrants, options or other rights					Paradigm Capital Inc. received 24,000 non-transferable warrants to purchase common shares. The exercise price of each warrant is \$0.20 per common share and the expiry date is 24 months from June 6, 2023 (i.e., June 6, 2025).					
Other compensation	n ⁵		Desc	cribe						
Total compensation pa	id 4,80	00.00								
Check box if the person will or may receive any deferred compensation (describe the terms below)										
⁴ Provide the aggregate value of additional securities of the issu- rights exercisable to acquire ac ⁵ Do not include deferred comp	er. Indicate the secu dditional securities c	urity cod	les for a							

a) Name of person compo	ensated and regis	tration statu	s							
Indicate whether the person con	npensated is a registr	ant.		🗌 No	\checkmark] Yes				
If the person compensated is an individual, provide the name of the individual.										
Full legal name of individual										
	F	amily 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 Canaccord Genuity Corp./Corporation Canaccord Genuity										
Firm NRD number900(if applicable)										
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal. Ves										
b) Business contact inform	nation									
If a firm NRD number is not pro	vided in Item 8 (a), p	rovide the bu	siness co	ontact inform	nation of the	e person b	eing com	pensated.		
Street address										
Municipality						Province	e/State			
Country					Postal	code/Zi	p code			
Email address					Tele	phone n	umber			
c) Relationship to issuer of	or investment fund	l manager								
Indicate the person's relationship the Instructions and the meaning								ning of "connected" in Part B(2) of		
Connect with the issue	er or investment fund	d manager		I	Inside	r of the is	suer (oth	er than an investment fund)		
Director or officer of th	e investment fund o	r investment	fund ma	anager	Emplo	oyee of th	e issuer c	or investment fund manager		
✓ None of the above										
d) Compensation details										
	ommissions, securitie h as clerical, printing	rs-based comp 1, legal or acco	pensatio punting	n, gifts, disco services. An	ounts or othe issuer is not	er compei t required	nsation. D to ask for	ribution. Provide all amounts in 10 not report payments for services 1 details about, or report on, internal		
Cash commissions pa	d 16,20	00.00				Security	code 1	Security code 2 Security code 3		
Value of all securitie distributed as compensatior	-		ç	Security code	es	W N				
Describe te	S Canaccord Genuity Corp. received 67,500 non-transferable warrants to purchase common shares. The exercise price of each warrant is \$0.20 per common share and the expiry date is 24 months from June 6, 2023 (i.e., June 6, 2025).									
Other compensation	5	De	scribe							
Total compensation pai	d 16,20	0.00		L						
Check box if the per	Check box if the person will or may receive any deferred compensation (describe the terms below)									
⁴ Provide the aggregate value o additional securities of the issu rights exercisable to acquire ad ⁵ Do not include deferred compo- additional security of the include deferred security of	er. Indicate the secu Iditional securities of	rity codes for								

a) Name of person com	pensated and registration sta	atus									
Indicate whether the person co	ompensated is a registrant.	\checkmark] No	Yes							
If the person compensated is a	n individual, provide the name of	f the individual	l.								
Full legal name of indi	vidual										
	Family name	I	First	given name		Secondary	given names				
If the person compensated is not an individual, provide the following information.											
Full legal name of non-individual CDPQ Placements Privés Québec Inc.											
Firm NRD number (if applicable)											
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal.											
b) Business contact info	rmation										
If a firm NRD number is not pr	rovided in Item 8 (a), provide the	business conta	ct information	of the person b	eing com	pensated.					
Street address	A-12, 1000 Place Jean-Pau	l Riopelle									
Municipality	Montréal			Province	/State	Québec					
Country	Canada		Po	ostal code/Zip	code	H2Z 2B3					
Email address	fzwarts@cdpq.com			Telephone n	umber	5148472648					
c) Relationship to issue	r or investment fund manage					L					
	nip with the issuer or investment					ning of "connect	ed" in Part B	(2) of			
	ing of "control" in section 1.4 of N		· · ·								
Connect with the iss	uer or investment fund manager			nsider of the is	suer (othe	er than an inves	iment fund)				
Director or officer of	the investment fund or investme	nt fund manag	ger 🔲 E	mployee of the	e issuer o	r investment fur	nd manager				
✓ None of the above											
d) Compensation details	3										
	tion paid, or to be paid, to the pe										
	commissions, securities-based co uch as clerical, printing, legal or a										
-	he directors, officers or employee	s of a non-indi	ividual compens	sated by the iss	uer.						
Cash commissions p	aid			Security	code 1	Security code 2	Security co	de 3			
Value of all securiti distributed as compensation		Secu	urity codes								
	terms of warrants, options or oth	ner rights									
Other compensation	on⁵ 22,995.00	Describe									
Total compensation p	aid 22,995.00										
Check box if the p	Check box if the person will or may receive any deferred compensation (describe the terms below)										
⁴ Drovido the eggragate value	of all securities distributed as cc	monopolion	avaluding antia	na warranta a	athar ria	hte evereigeble	to occuiro				
additional securities of the iss	uer. Indicate the security codes	for all securitie						r			
⁵ Do not include deferred com	additional securities of the issuer pensation.										

ITEM 9 - DIRECTORS, EXECU	TIVE OFFICERS	AND PROMOT	ERS OF THE ISS	SUER									
If the issuer is an investment fund	l, do not complete	Item 9. Procced to	Item 10.										
Indicate whether the issuer is any of the following (select the one that applies - if more than one applies, select only one).													
✓ Reporting issuer in any jurisdiction of Canada													
Foreign public issuer													
Wholly owned subsidiary of a reporting issuer in any jurisdiction of Canada ⁶													
Provide name of reporting issuer													
Wholly owned subsidiary of a foreign public issuer ⁶													
Provide name of	foreign public issue	er]					
Issuer distributing only eligi	ble foreign securitie	s and the distributio	n is to permitted clie	ents only ⁷									
If the issuer is at least one of the	above, do not com	plete Item 9(a) – (d	c). Proceed to Item	10.									
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, respectively. ⁷ 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.													
a) Directors, executive officers and promoters of the issuer													
Provide the following information for territory; otherwise state the country.						tate the	province	or					
Organization or company name	Family name	First given name	Secondary given names	Business location of non-individual or residented		idual or entail tion of							
				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	Organization or company name Family name First given name Secondary gi						to promoter oth if applicable)						
				Province or country	D		0						
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	Dore Copper Mining Corp.								
Full legal name	Nelson	Gavin							
	Family name	First given name		Secondary given names					
Title	Chief Financial Officer								
Telephone number	8077663407	Email address	gavin.nelson@dorecopper.com						
Signature	(signed) "Gavin Nelson"	Date	2023	06	16				
			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	Peterson	Esther			Title	Associate
	Family name	First given name	Secondary	given names		
Name of company	Bennett Jones LLP					
Telephone number	4167777833	E	mail address	petersone@	bennettjo	ones.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.