

Form 45-106F1 - Report of Exempt Distribution

Except in British Columbia, this is the form required under section 6.1 of NI 45-106 for a report of exempt distribution. In British Columbia, the required form is Form 45-106F6.

Issuer / underwriter information

Item 1:

Full name of issuer:

(If the issuer is an investment fund, state the name of the fund.)

Former name of issuer:

(If the issuer's name has changed since the last report, state the former name.)

Is the issuer an investment fund? No Yes

If no, provide head office address and phone number of the issuer.

If yes, provide full name, head office address and phone number of the investment fund manager.

If applicable, provide full name of investment fund manager:

Head office address and phone number of the issuer or, if applicable, the investment fund manager.

Suite / Apt #:

Street address:

City / Town:

Province:

Country Postal code:

Phone number:

123

456-7890

Extension

Foreign Phone Number

Has this form been completed by an underwriter? No Yes

If yes, provide full name, head office address and phone number of the underwriter.

Full name of the underwriter:

Head office address and phone number of the underwriter.

Suite / Apt #:

Street address:

City / Town:

Province:

Country Postal code:

Phone number:

123

456-7890

Extension

Foreign Phone Number

Item 2:

Is the issuer a reporting issuer? No Yes

If yes, indicate all jurisdictions in which the issuer is reporting:

- | | |
|--|--|
| <input type="checkbox"/> British Columbia | <input type="checkbox"/> Alberta |
| <input type="checkbox"/> Saskatchewan | <input type="checkbox"/> Manitoba |
| <input type="checkbox"/> Ontario | <input type="checkbox"/> Quebec |
| <input type="checkbox"/> Prince Edward Island | <input type="checkbox"/> Nova Scotia |
| <input type="checkbox"/> Newfoundland and Labrador | <input type="checkbox"/> New Brunswick |
| <input type="checkbox"/> Northwest Territories | <input type="checkbox"/> Nunavut |
| <input type="checkbox"/> Yukon | |

Item 3:

Indicate the industry of the issuer from the following list:

- | | |
|--------------------------------------|--------------------------------------|
| <input type="checkbox"/> Bio-tech | <input type="checkbox"/> Forestry |
| <input type="checkbox"/> Hi-tech | <input type="checkbox"/> Industrial |
| <input type="checkbox"/> Oil and gas | <input type="checkbox"/> Real estate |
| <input type="checkbox"/> Utilities | |

Financial Services

Mining

- | | |
|---|--|
| <input type="checkbox"/> Investment companies and funds | <input type="checkbox"/> Exploration / development |
| <input type="checkbox"/> Mortgage investment companies | <input type="checkbox"/> Production |
| <input type="checkbox"/> Securitized products issuers | |

Other
Describe

Details of distribution

Item 4:

Complete Schedule 1 in a separate ".xlsx" file. Schedule 1 is designed to assist in completing the remainder of this report.

Item 5:

State all distribution dates:

| | | | | | | | | |
|---------------------------|---------------------------|---------------------------|---------------------------|---------------------------|---------------------------|---------------------------|---------------------------|---------------------------|
| <input type="text"/> M | <input type="text"/> D | <input type="text"/> Y | <input type="text"/> M | <input type="text"/> D | <input type="text"/> Y | <input type="text"/> M | <input type="text"/> D | <input type="text"/> Y |
| <input type="text"/> M | <input type="text"/> D | <input type="text"/> Y | <input type="text"/> M | <input type="text"/> D | <input type="text"/> Y | <input type="text"/> M | <input type="text"/> D | <input type="text"/> Y |
| <input type="text"/> M | <input type="text"/> D | <input type="text"/> Y | <input type="text"/> M | <input type="text"/> D | <input type="text"/> Y | <input type="text"/> M | <input type="text"/> D | <input type="text"/> Y |
| For Investment Funds From | <input type="text"/> M | <input type="text"/> D | <input type="text"/> Y | To | <input type="text"/> M | <input type="text"/> D | <input type="text"/> Y | |

Item 6:

Provide the following information for each security distributed.

| | Type of security | Number of securities distributed | Convertible or exchangeable (Yes / No) | Type of underlying security If a convertible or exchangeable security |
|---|------------------------|----------------------------------|--|---|
| 1 | | | | |
| | Type of security | # | Y/N | Type of underlying security |
| | Exemption(s) relied on | | | |
| 2 | | | | |
| | Type of security | # | Y/N | Type of underlying security |
| | Exemption(s) relied on | | | |
| 3 | | | | |
| | Type of security | # | Y/N | Type of underlying security |
| | Exemption(s) relied on | | | |
| 4 | | | | |
| | Type of security | # | Y/N | Type of underlying security |
| | Exemption(s) relied on | | | |
| 5 | | | | |
| | Type of security | # | Y/N | Type of underlying security |
| | Exemption(s) relied on | | | |

If applicable, describe the terms of exercise or conversion and any expiry date for each convertible or exchangeable security listed above.

Item 8: Commissions and Finder's Fees

Provide the following information for each person who has received or will receive compensation in connection with the distribution(s). Do not include the exercise price of any convertible security in the total dollar value of compensation unless the securities have been converted. Compensation includes commissions, discounts or other fees or payments of a similar nature. Do not include payments for services incidental to the distribution, such as clerical, printing, legal or accounting services.

| | | Compensation paid or to be paid (cash and / or securities) | | | | | | | Total dollar value of compensation (Canadian \$) | |
|---|-------------------------------------|--|-----------------------------|--------------------|---------------------------|--------------------|----------------------|---|---|---|
| | | <u>Cash</u> (Canadian \$) | Number of securities issued | <u>Securities</u> | | Price per security | Date of distribution | | | |
| | | | | | Type of securities issued | | | M | D | Y |
| 1 | Compensation | | | | | | | | | |
| | | Cash | # | Type of securities | Price | M | D | Y | Total | |
| | Full name – individual ² | First Name | | | Middle Name | Last Name | | | | |
| | Full name – other ³ | Name of Entity (i.e. Corporation, Partnership, Trust) | | | | | | | | |
| | Full address | Suite / Apt | Street Address | | | | | | | |
| | | City / Town | | | Province | | Country | | Postal Code | |
| | | Exemption(s) relied on | | | | | | | | |
| 2 | Compensation | | | | | | | | | |
| | | Cash | # | Type of securities | Price | M | D | Y | Total | |
| | Full name – individual ² | First Name | | | Middle Name | Last Name | | | | |
| | Full name – other ³ | Name of Entity (i.e. Corporation, Partnership, Trust) | | | | | | | | |
| | Full address | Suite / Apt | Street Address | | | | | | | |
| | | City / Town | | | Province | | Country | | Postal Code | |
| | | Exemption(s) relied on | | | | | | | | |

² This row is not applicable if the person receiving the compensation is not an individual.

³ This row is not applicable if the person receiving the compensation is an individual.

| | | | | | | | | | | |
|-------------------------------------|-------------------------------------|---|-------------|--------------------|--------------------|-----------|-------------|-------------|-------|-------|
| 3 | Compensation | Cash | # | Type of securities | Price | M | D | Y | Total | |
| | | Full name – individual ² | | First Name | Middle Name | Last Name | | | | |
| | Full name – other ³ | Name of Entity (i.e. Corporation, Partnership, Trust) | | | | | | | | |
| | | Full address | Suite / Apt | Street Address | | | | | | |
| | City / Town | | | Province | | Country | | Postal Code | | |
| | Exemption(s) relied on | | | | | | | | | |
| | 4 | Compensation | Cash | # | Type of securities | Price | M | D | Y | Total |
| Full name – individual ² | | | First Name | Middle Name | Last Name | | | | | |
| Full name – other ³ | | Name of Entity (i.e. Corporation, Partnership, Trust) | | | | | | | | |
| | | Full address | Suite / Apt | Street Address | | | | | | |
| City / Town | | | Province | | Country | | Postal Code | | | |
| Exemption(s) relied on | | | | | | | | | | |
| 5 | | Compensation | Cash | # | Type of securities | Price | M | D | Y | Total |
| | Full name – individual ² | | First Name | Middle Name | Last Name | | | | | |
| | Full name – other ³ | Name of Entity (i.e. Corporation, Partnership, Trust) | | | | | | | | |
| | | Full address | Suite / Apt | Street Address | | | | | | |
| | City / Town | | | Province | | Country | | Postal Code | | |
| | Exemption(s) relied on | | | | | | | | | |

| | | | | | | | | | | | |
|------------------------|-------------------------------------|---|----------------|--------------------|-----------|---|---|-------------|-------|--|--|
| 6 | Compensation | | | | | | | | | | |
| | | Cash | # | Type of securities | Price | M | D | Y | Total | | |
| | Full name – individual ² | | | | | | | | | | |
| | | First Name | | Middle Name | Last Name | | | | | | |
| | Full name – other ³ | Name of Entity (i.e. Corporation, Partnership, Trust) | | | | | | | | | |
| | Full address | Suite / Apt | Street Address | | | | | | | | |
| | City / Town | | | Province | Country | | | Postal Code | | | |
| Exemption(s) relied on | | | | | | | | | | | |
| 7 | Compensation | | | | | | | | | | |
| | | Cash | # | Type of securities | Price | M | D | Y | Total | | |
| | Full name – individual ² | | | | | | | | | | |
| | | First Name | | Middle Name | Last Name | | | | | | |
| | Full name – other ³ | Name of Entity (i.e. Corporation, Partnership, Trust) | | | | | | | | | |
| | Full address | Suite / Apt | Street Address | | | | | | | | |
| | City / Town | | | Province | Country | | | Postal Code | | | |
| Exemption(s) relied on | | | | | | | | | | | |
| 8 | Compensation | | | | | | | | | | |
| | | Cash | # | Type of securities | Price | M | D | Y | Total | | |
| | Full name – individual ² | | | | | | | | | | |
| | | First Name | | Middle Name | Last Name | | | | | | |
| | Full name – other ³ | Name of Entity (i.e. Corporation, Partnership, Trust) | | | | | | | | | |
| | Full address | Suite / Apt | Street Address | | | | | | | | |
| | City / Town | | | Province | Country | | | Postal Code | | | |
| Exemption(s) relied on | | | | | | | | | | | |

| | | | | | | | | | | |
|--------------|-------------------------------------|---|---|--------------------|-------|-----------|---|-------------|-------|--|
| 9 | Compensation | | | | | | | | | |
| | | Cash | # | Type of securities | Price | M | D | Y | Total | |
| | Full name – individual ² | | | | | | | | | |
| | | First Name | | Middle Name | | Last Name | | | | |
| | Full name – other ³ | | | | | | | | | |
| | | Name of Entity (i.e. Corporation, Partnership, Trust) | | | | | | | | |
| Full address | Suite / Apt | Street Address | | | | | | | | |
| | City / Town | | | Province | | Country | | Postal Code | | |
| | Exemption(s) relied on | | | | | | | | | |
| 10 | Compensation | | | | | | | | | |
| | | Cash | # | Type of securities | Price | M | D | Y | Total | |
| | Full name – individual ² | | | | | | | | | |
| | | First Name | | Middle Name | | Last Name | | | | |
| | Full name – other ³ | | | | | | | | | |
| | | Name of Entity (i.e. Corporation, Partnership, Trust) | | | | | | | | |
| Full address | Suite / Apt | Street Address | | | | | | | | |
| | City / Town | | | Province | | Country | | Postal Code | | |
| | Exemption(s) relied on | | | | | | | | | |

If the securities being issued as compensation are or include convertible securities, such as warrants or options, describe the terms of the convertible securities, including the term and exercise price.

Item 9:

If a distribution is made in Ontario, you will need to also attach the *Notice – Collection and use of personal information* and the *Authorization of Indirect Collection of Personal Information for Distributions in Ontario*. (see next page)

Certificate

Date:
M D Y

Name of person signing

Title of person signing

Telephone number
123 456-7890 Extension Foreign Phone Number

Signature (Typed)

Item 10:

Provide the name, title and telephone number of the person who may be contacted with respect to any questions regarding the contents of this report, if different than the person signing the certificate.

Name of contact person

Title of contact person

Telephone number
123 456-7890 Extension Foreign Phone Number

IT IS AN OFFENSE TO MAKE A MISREPRESENTATION IN THIS REPORT.

Item 11:

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 authorities or, where applicable, the regulators 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, where applicable, the regulator in the jurisdiction(s) where the form is filed, at the address(es) listed at the end of this report.

Authorization of Indirect Collection of Personal Information for Distributions in Ontario

The attached Schedule I contains personal information of purchasers and details of the distribution(s). The issuer/underwriter hereby confirms that each purchaser listed in Schedule I of this report who is resident in Ontario

- (a) has been notified by the issuer/underwriter
 - (i) of the delivery to the Ontario Securities Commission of the information pertaining to the person as set out in Schedule I,
 - (ii) that this information is being collected indirectly by the Ontario Securities Commission under the authority granted to it in securities legislation,
 - (iii) that this information is being collected for the purposes of the administration and enforcement of the securities legislation of Ontario, and
 - (iv) of the title, business address and business telephone number of the public official in Ontario, as set out in this report, who can answer questions about the Ontario Securities Commission's indirect collection of the information, and

- (b) has authorized the indirect collection of the information by the Ontario Securities Commission

Securities Regulatory Authorities and Regulators

Alberta Securities Commission
Suite 600, 250 – 5th Street SW
Calgary, AB T2P 0R4
Telephone: (403) 297-6454
Facsimile: (403) 297-6156

Financial and Consumer Affairs Authority of Saskatchewan
Suite 601 - 1919 Saskatchewan Drive Regina,
Saskatchewan S4P 4H2
Telephone: (306) 787-5879
Facsimile: (306) 787-5899

The Manitoba Securities Commission
500 – 400 St Mary Avenue
Winnipeg, Manitoba R3C 4K5
Telephone: (204) 945-2548
Toll free in Manitoba 1-800-655-5244
Facsimile: (204) 945-0330

Ontario Securities Commission
Suite 1903, Box 55
20 Queen Street West
Toronto, Ontario M5H 3S8
Telephone: (416) 593- 8314
Toll free in Canada: 1-877-785-1555
Facsimile: (416) 593-8122

Public official contact regarding indirect collection of information:
Administrative Support Clerk Telephone: (416) 593-3684

Autorité des marchés financiers
800, Square Victoria, 22e étage
C.P. 246, Tour de la Bourse
Montréal, Québec H4Z 1G3
Telephone: (514) 395-0337
Or 1-877-525-0337
Facsimile: (514) 873-6155 (For filing purposes only)
Facsimile: (514) 864-6381 (For privacy requests only)

Financial and Consumer Services Commission (New Brunswick)
85 Charlotte Street, Suite 300
Saint John, New Brunswick E2L 2J2
Telephone: (506) 658-3060
Toll Free in New Brunswick 1-866-933-2222
Facsimile: (506) 658-3059

Nova Scotia Securities Commission
Suite 400, 5251 Duke Street
Halifax, Nova Scotia B3J 1P3
Telephone: (902) 424-7768
Facsimile: (902) 424-4625

Prince Edward Island Securities Office
95 Rochford Street, 4th Floor Shaw Building
P.O. Box 2000
Charlottetown, Prince Edward Island C1A 7N8
Telephone: (902) 368-4569
Facsimile: (902) 368-5283

Government of Newfoundland and Labrador
Financial Services Regulation Division
P.O. Box 8700
Confederation Building
2nd Floor, West Block
Prince Philip Drive
St. John's, NFLD A1B 4J6
Attention: Director of Securities
Telephone: (709) 729-4189
Facsimile: (709) 729-6187

Government of Yukon
Office of the Yukon Superintendent of Securities
Government of Yukon Department of Community Services
307 Black Street, 1st Floor
PO Box 2703 (C-6)
Whitehorse, Yukon Y1A 2C6
Telephone: (867) 667-5466
Facsimile: (867) 393-6251

Government of Northwest Territories
Department of Justice
Securities Registry
1st Floor, Stuart M. Hodgson Building
5009 – 49th Street
Yellowknife, Northwest Territories X1A 2L9
Telephone: (867) 920-3318
Facsimile: (867) 873-0243

Government of Nunavut
Department of Justice
Legal Registries Division
P.O. Box 1000, Station 570
1st Floor, Brown Building
Iqaluit, Nunavut X0A 0H0
Telephone: (867) 975-6590
Facsimile: (867) 975-6594