

#### Form 45-509F2

### Report of Exemption Distribution for Community Economic Development Corporations and Cooperatives

#### General Instructions for Completing Form 45-509F2:

- 1. Instructions for preparing this report are italicized and in square brackets. Do not include these general instructions, or any specific instructions outlined below, in the completed report.
- 2. The completed report can be filed with the Financial and Consumer Services Commission of New Brunswick (Commission) by email. Blanket Order 13-503 In the Matter of an Exemption from the Requirement to File Reports of Exempt Distribution in Electronic Format on SEDAR for Distributions by Community Economic Development Corporations or Associations, allows a CEDC to submit the report by email to: EMF- MD@fcnb.ca.

tem 1 – Community Economic Development Corporation and Cooperative (CEDC) Information								
New report								
Amended repor	rt If amended, provi	de filing date of amended report	g date of amended report					
Include the legal name of t	he CEDC and the registered	l office. This should be the same i	information as provided on th	e offering document.]				
Full name (the	CEDC)							
Address								
elephone								
Vebsite (if a	(if applicable)							
-mail (if a	pplicable)							
tem 2 – Details of Distribu	tion							
State the distribution start distribution date as both the	_	t is being filed for securities distr	ibuted on only one distributio	n date, provide the				
tart Date (YYYY-MM-DD) End Date (YYYY-MM-DD)		(YYYY-MM-DD)	Closing Date (if different than End Date) (YYYY-MM-DD)					
Type of Security	Price per Security	Total Number of Security Distributed	Total Dollar Value Raised	Total Number of Purchasers				

# Item 3 – Promoters

	r the Securities Act, involved with the distribution, and state if any of these individuals received 's fee or other payment) in connection with the distribution.]
Name of Promoter	Compensation Paid (Y/N)
Item 4 – Purchasers	
[Complete Schedule 1 of this form for each purch	aser and attach the schedule to the completed report.]
Item 5 – Certification [This certificate must be signed by an officer or dicertify this report on behalf of the CEDC.]	rector of the CEDC or an agent authorized by an officer or director of the CEDC to prepare and
On behalf of the CEDC, I certify that the statemen	nts made in this report are true and accurate.
Signature	Date
Full name	Telephone
Title	E-mail
NOTE: IT IS AN OFFENSE TO MAKE A MISREPRESE	ENTATION IN THIS REPORT.

#### Notice - Collection and Use of Personal Information

The personal information required under this form is collected on behalf and used by the Commission under the authority granted in the *Securities Act* for the purposes of the administration and enforcement of that Act. If you have any questions about the collection and use of this information, contact us at 1-866-933-2222 or info@fcnb.ca.

The attached Schedule 1 may contain personal information of individuals and details of the distribution(s). The information in Schedule 1 will not be placed on the public file of the Commission. However, the *Right to Information and Protection of Privacy Act* may require the Commission to make this information available if requested.

By signing this report, the CEDC confirms that each individual listed in Schedule 1: a) has been notified by the CEDC of the delivery to the Commission the information pertaining to the individual as set out in Schedule 1, that this information is being collected by the Commission under the authority granted in the *Securities Act* and that this information is being collected for the purposes of the administration and enforcement of the *Securities Act*; and b) has authorized the indirect collection of the information by the Commission.

# Schedule 1 to Form 45-509F2

Name of Issuer	Certification Date of the Report (YYYY-MM-DD)		

# **List of Purchasers**

Full Name	Address	Telephone	Number of Shares Purchased	Total Purchase Price	Date of Purchase (YYYY-MM-DD)	Type of Security