# Form 45-106F1 Report of Exempt Distribution (Non-investment fund issuer)

ITEM 1 – REPOR	T TYPE						
TIEW I - KEI OK							
✓ New report							
Amended report	If amended, provide	Submission ID of report that is	being amended:	(Example: EDR1234567890-12	23)		
			-				
ITEM 2 – PARTY	CERTIFYING TH	IE REPORT					
			parding whether an issuer is an inve the companion policy to NI 81-106.	estment fund, refer to section 1.1 of			
☑ Issuer (Other than an investment fund)							
Underwriter							
ITEM 3 – ISSUER	NAME AND OT	HER IDENTIFIERS					
1121113 100021	MAME AND OT	HER IBENTII IERO					
-	information about the	issuer, or if the issuer is an in	nvestment fund, about the fund.				
Full legal name Avicanna Inc.							
Previous full legal nar	ne If the issuer's nam	e changed in the last 12 mon	ths, provide most recent previous l	egal name.			
\	<b>.</b>						
Website (if applicable	)						
If the inquest has a los	ual antitu idantifian nua	vida halaw Dafarta Dart Dar	Etha laatuvatiana fay tha dafinitian a	f "logal antity identific"			
_	iai eriitty ideritiiler, pro	vide below. Refer to Part B of	the Instructions for the definition of	r legar enuty idenumer .			
Legal entity identifier							
Did two or more co-is	suers distribute a sing	le security? ✓ No ☐ Yes					
If two or more issuers	distributed a single se	ecurity, provide the full legal n	ame(s) of the co-issuer(s) other the	in the issuer named above.			
Full legal name(s) of c	o-issuer(s)						
ITEM 4 – UNDER	WRITER INFOR	MATION					
If an underwriter is co	mpleting the report in	rovide the underwriter's full lea	gal name and firm NRD number.				
Full legal name	impleating the report, pr	ovide the dilderwiner o fall leg	gar name and min tvi D nambor.				
Does the Underwriter	s Firm have an NRD N	lumber? Firm NRD n	umber				
☐ No ☐ Yes							
If the underwriter doe	s not have a firm NRD	number, provide the head of	fice contact information of the unde	rwriter.			
Street address		Municipality	Province/State	Postal/ZIP code			
Country		Telephone number	Website (if applicable)				

ITEM 5 - ISSUER INFORMATION							
a) Primary industry							
Provide the issuer's North American Indus corresponds to the issuer's primary busine	stry Classification Standard (NAICS) code (6 digits only) that ess activity.	in your reasonable judgment most closely					
NAICS industry code	NAICS industry code						
325410							
	dicate the stage of operations. This does not apply to issuers nat best describes the issuer's stage of operations. ction	that provide services to issuers operating in					
	all or substantially all of its assets in any of the following? If a cial/business debt Consumer debt Private companies	• • •					
b) Number of employees							
<b>√</b> 0 - 49	or more						
c) SEDAR profile number							
Does the issuer have a <u>SEDAR</u> profile?  ☐ No ☑ Yes	screenshot of t	EDAR profile is a "private" profile, please provide a he issuer's profile by e-mail to illings@osc.gov.on.ca					
d) Head office address	If the issuer does not	have a SEDAR profile, complete Item 5(d) – (h).					
Street address	Municipality Province/State	Postal/ZIP code					
Country	Telephone number						
e) Date of formation and financial year	r-end						
Date of formation	Financial year-end						
f) Reporting issuer status							
Is the issuer a reporting issuer in any juriso ☐ No ☐ Yes	diction of Canada?						
If yes, select the jurisdictions of Canada in							
AII AB BC MB	NB NL NT						
NS NU ON PE	∐QC ∐SK ∐YT						
g) Public listing status							
Does the issuer have a CUSIP number?	CUSIP number (provide first 6 digits only)						
· · · · · · · · · · · · · · · · · · ·	name of the exchange on which the issuer's equity securities s, for example, an automated trading system.	primarily trade. Provide only the name of an					
Exchange name:  Not Applicable  Torc	onto Stock Exchange TSX Venture Exchange	Canadian Securities Exchange					
Aequitas Neo Exchange	stralian Securities Exchange Deutsche Boerse	Euronext					
London Stock Exchange	daq New York Stock Exchange	Shanghai Stock Exchange					
Shenzhen Stock Exchange Stoc	ck Exchange Of Hong Kong 🗌 Tokyo Stock Exchange	OTHER					
If other, describe:							
h) Size of issuer's assets							
financial statements for its first financial ye	ed on its most recently available annual financial statements ear, provide the size of the issuer's assets at the distribution to under \$25M						
	OM to under \$1B \$1B or over						

# 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 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)
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 Date End Date

2022-12-21 2022-12-21

# c) Detailed purchaser information

Complete Schedule 1 of this form for each purchaser and attach the schedule to the completed report.

Schedule 1 to Form 45-106F1.XLSX - 90 KB

#### d) Types of securities distributed

Provide the following information for all distributions reported on a per security basis. Refer to Part A(12) 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	Number of securities	Single or lowest price	Highest price	Total amount	
UBS		3,030,205.0000	0.3500		1,060,571.7500	
Description of security: Bundled securities consisting of 1 common share and 1/2 of 1 common share purchase warrant						

# 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.

# Not Applicable

Convertible / exchangeable	Underlying security		se price dian \$)	Expiry date (YYYY-MM-DD)	Conversion ratio
security code	code	Lowest	Highest	(TTTT-WIWI-DD)	
WNT	CMS	0.4000		2025-12-21	1:1
Describe other terms: Each common share purchase warrant is exercisable into one common share at an exercise price of \$0.40 per common share (if applicable) for a period of 36 months from closing.					

# f) 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 jurisdiction. For jurisdictions within of Canada, state the province or territory, otherwise state country.

Province or country	Exemption relied on	No. of unique purchasers <sup>2a</sup>	Total amount (Canadian \$)
Ontario	NI 45-106 2.3 [Accredited investor]	13	1,048,571.6500
Quebec NI 45-106 2.3 [Accredited investor]		1	12,000.1000
	1,060,571.7500		

<sup>&</sup>lt;sup>2a</sup>In calculating the number of unique purchasers per row, count each purchaser only once. Joint purchasers may be counted as one purchaser.

<sup>&</sup>lt;sup>2b</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.

h) Offering materials - This section applies only	in Saskatchewa	an, Ontario, C	Québec, New Brunswic	k and Nova Scotia.
If a distribution has occurred in Saskatchewan, Onta materials that are required under the prospectus exe in those jurisdictions. In Ontario, if the offering materials listed in the table an electronic version of the offering materials that ha	mption relied on to	o be filed with e filed with or	or delivered to the securi	ties regulatory authority or regulator  Securities Commission (OSC), attach
✓ Not Applicable				

ITEM 7 – INFORMATION ABOUT THE DISTRIBUTION

	Description	Date of document or other material	Previously filed with or delivered to regulator?	Previously filed Submission ID	Filename
1.			$\square$ Y $\square$ N		

ITEM 8 - COMPENSATIO	N INFORMATIO	ON					
Provide information for each pers connection with the distribution.	,	,		•			
Indicate whether any compensate ☐ No ☑ Yes	ion was paid, or will	be paid, in connection	n with the dis	ribution.			
PERSON 1							
a) Name of person compensa	ted and registration	n status					
Indicate whether the person com  ✓ No ☐ Yes	pensated is a regist	trant.					
If the person compensated is an individual, provide the full legal name of the individual.  Family name First given name Secondary given names							
Cavan Christopher							
If the person compensated is not	t an individual, provi	de the following inforn	nation.				
Full legal name of non-individual				Firm NRD number (if	applicable)		
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal.  No Yes							
b) Business contact informati	on						
If a firm NRD number is not prov	vided in Item 8(a), pr	ovide the business co	ontact informa	ation of the person bei	ing compensated.		
Street address	Municip	ality	Province/Sta	te	Postal/ZIP code		
3403-181 Wynford Dr	North Y	ork	Ontario		M3C0C6		
Country	Telepho	ne number Email address		SS			
Canada	416-881	-6384	chris@citywidegroup.com				
c) Relationship to issuer or ir	vestment fund ma	nager					
Indicate the person's relationship Part B(2) of the Instructions and Connected with the issuer or i	the meaning of "cor	ntrol" in section 1.4 of	NI 45-106 fo		pleting this section	7.	
Insider of the issuer (other tha	ın an investment fun	d)	✓ None	of the above			
Director or officer of the invest	ment fund or investr	ment fund manager					
d) Compensation details							
Provide details of all compensati in Canadian dollars. Include cas for services incidental to the dist about, or report on, internal alloc	h commissions, sec tribution, such as cle	urities-based compen erical, printing, legal o	sation, gifts, or accounting	discounts or other con services. An issuer is	npensation. Do no not required to as	t report paymer k for details	
Cash commissions paid	2,499.9000						
Value of all securities		Security code1	Sec	curity code2	Security code	<b>3</b>	
distributed as compensation <sup>4</sup>		Describe terms of wa	rrants, optior	s or other rights			
- 5							
☐ Other compensation <sup>5</sup>		Describe					
Total compensation Paid	2,499.9000						
Check box if the person will o		deferred compensation	n (describe th	e terms helow)			
Shook box it the person will t	ay roooive any c	20.01100 compensation	. (40001106 111	2 (3/11/0 00/04/)			

<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, including options, warrants or other rights exercisable to acquire additional securities of the issuer.

 $^{5}\,\mathrm{Do}$  not include deferred compensation.

IILW 3 – D	IRECTORS, EXECUTIVE OFFICERS	AND PROMOTERS OF	THE ISSUER						
	her 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 p	ublic issuer								
☐ Wholly ow	ned subsidiary of a reporting issuer in any juris	diction of Canada <sup>6</sup>							
•	ame of reporting issuer	diotion of Canada							
Wholly ow	Wholly owned subsidiary of a foreign public issuer <sup>6</sup>								
	Provide name of foreign public issuer								
	7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1								
leguer die	tributing only eligible foreign securities and the	distribution is to permitted clien	ite only <sup>7</sup>						
	uer is at least one of the above, do not com								
_	r is a wholly owned subsidiary of a reporting iss			ecurities, other than					
	that are required by law to be owned by its dire								
	his box if it applies to the current distribution ev			to non-permitted					
	efer to the definitions of "eligible foreign securit		B(1) of the instructions.						
☐ If the issu	uer is none of the above, check this box and	d complete Item 9(a) – (c).							
a) Directors	, executive officers and promoters of the iss	suer							
Provide the fo	Illowing information for each director, executive	officer and promoter of the issue	uer For locations within Canada, state t	he province or					
	rwise state the country. For "Relationship to iss			ic province or					
		Familianama	Dusiness legation of	Relationship to					
Individual?	Organization or company name	Family name First given name	Business location of non-individual or residential	issuer					
	3	Secondary given name	jurisdiction of individual	(select all that apply)					
Y									
L Y L IN									
'									
1) 5	1.6								
b) Promoter	information								
If the promote	er listed above is not an individual, provide the f	ollowing information for each di	rector and executive officer of the prom	oter. For locations					
within Canada	a, state the province or territory, otherwise state	the country. For "Relationship t	to promoter", "D" – Director, "O" – Exect	utive Officer.					
		Family name	2	Relationship to					
	Organization or company name	First given name	Residential jurisdiction of individual	promoter (select one or both					
		Secondary given name	or marviada.	if applicable)					
				ПрПо					
			_						
c) Residenti	al address of each individual								
.,									
	hedule 2 of this form providing the full resid completed report. Schedule 2 also requires								

# **ITEM 10 - CERTIFICATION**

Name of issuer/underwriter/agent Avicanna Inc.

Full legal name - Family name

Smith

Name of company

DLA Piper (Canada) LLP

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 exempt distribution.

By completing the information below, I certify, on behalf of the issuer/underwriter, 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.

Full legal name - Family name First given r		name			Secondary given names	
Cardella	Phillip					
Title		Telephone number Em		Ema	uil address	
Chief Financial Officer		64724	35283	philli	p.cardella@avicanna.com	
Signature Phillip Cardella		Date	2022-12-29			
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						

# Notice - Collection and use of personal information

4163653425

Secondary given names

Telephone number

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 Schedule 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.

First given name

Brendan

Submission ID	Date	

Title

Email address

Associate

brendan.smith@dlapiper.com