FORM 18 – NOTICE OF SECURITY CONSOLIDATION (REVERSE STOCK SPLIT)	
Name of Listed Issuer:	
Trading symbol:	
Date:	
If this is updating a prior notice, give date(s) of those notices:	
Date of news release(s) disclosing the consolidation:	
Number of Listed Securities outstanding on the day preceding the public announcement of the consolidation:	
Closing price of Listed Securities on the day preceding the public announcement of the consolidation:	
Provide the following information concerning consolidation:	
(i) Effective Date:	
(ii) Date of mailing the letter of transmittal to securityholders:	
(iii) CUSIP for the post-consolidation securities:	
(iv) Trading symbol for the post-consolidation securities:	
(v) Terms of the consolidation:[1]	

Complete the following:	YES	NO
(i) Is shareholder approval required in connection with the consolidation?	☐	☐
(ii) Is the Listed Issuer relying on any exemption from shareholder approval requirements?	☐	☐

If the response to any of the foregoing questions is “**YES**”, provide full particulars:

	YES	NO
Will the Listed Issuer continue to meet continuous listing requirements following the consolidation?	☐	☐

Provide full particulars of continuous listing requirements compliance following the consolidation:

[1] Ex: “one for ten reverse stock split.”

CERTIFICATE

The undersigned certifies that:

1. The undersigned is duly authorized to sign this certificate on behalf of the Listed Issuer;
2. To the best of the undersigned's knowledge after reasonable inquiry, the Listed Issuer is in compliance with applicable securities legislation and Exchange Requirements, except as follows:

   ____

   ____

3. All information in this form is true and complete, and the form contains no untrue statement of material fact and does not omit to state a material fact that is required to be stated or that is necessary to make a statement not misleading in the light of the circumstances in which it was made.

______________________________ ______________________________

Signature of Authorized Person **Date**

Name:

Position: