
PROOF OF CLAIM
relating to CANNTRUST HOLDINGS INC., CANNTRUST INC.,
CTI HOLDINGS (OSOYOOS) INC., and ELMCLIFFE INVESTMENTS INC.
(hereinafter referred to as the “**Applicants**”) or THEIR FORMER and CURRENT
DIRECTORS and OFFICERS (hereinafter referred to as the “**Directors**” and “**Officers**”)

A. PARTICULARS OF CLAIMANT

Full Legal Name of Claimant:

_____ (the “**Claimant**”)

(Full legal name should be the name of the Claimant of the Applicants or the Directors or Officers as of March 31, 2020 (the “**Filing Date**”), notwithstanding whether an assignment of a Claim, or a portion thereof, has occurred following that date.)

Attention (Contact Person): _____

Email Address: _____

Telephone Number: _____ Fax Number: _____

Full Mailing Address of the Claimant (the Claimant as of March 31, 2020):

B. PARTICULARS OF ASSIGNEE(S) (IF ANY)

Has the Claim been sold or assigned by the Claimant to another party [check (✓) one]?

Yes: ☐ No: ☐

(If Yes, you must include the details and documentation that support the assignment including if all or portion of the Claim has been assigned. If there is more than one assignee, please attach a separate sheet with the required contact information for each.)

Full Legal Name of Assignee(s): _____

Attention (Contact Person): _____

Email Address: _____

Telephone Number: _____ Fax Number: _____

Full Mailing Address of the Assignee:

C. PROOF OF CLAIM

I, _____
(name of Claimant or as a representative of the Claimant)

as _____ (state position or title, if applicable)

of _____ (city and province), do hereby certify:

a. that I [check (✓) only if applicable]

am a Director of ☐ CannTrust Holding Inc., ☐ CannTrust Inc., ☐ CTI Holdings
(OSOYOOS) Inc., and/or ☐ Elmcliffe Investment Inc. and a Claimant;

b. that I have knowledge of all the circumstances connected with the Claim referred to below;

c. the Claimant asserts its Claim against [check (✓) one or both, as applicable]:

☐ _____ (Name of Applicant)

☐ Director(s) or Officer(s) of _____ (Name of Applicant)

Specifically, _____

(If you are making a Claim against the Directors or Officers, please list the Director(s) and Officer(s) against which you assert your Claim); and

d. the Applicant/Director(s) was/were and still is/are indebted to the Creditor as follows:

i. PRE-FILING CLAIM arising prior to March 31, 2020:

\$ _____ (amount and currency)

ii. RESTRUCTURING CLAIM:

\$ _____ (amount and currency)

(Restructuring Claim against any Applicant or any Director or Officer arising out of the restructuring, termination, repudiation or disclaimer of any lease, contract, or other agreement on or after the Filing Date.)

iii. TOTAL CLAIM: \$ _____ (Total i. plus ii.)

D. NATURE OF CLAIM [Check (✓) one and complete appropriate category]

☐ UNSECURED CLAIM OF \$_____ (amount and currency)

That in respect of this debt, I do not hold any security or claim any priority.

☐ SECURED CLAIM OR PRIORITY CLAIM OF \$_____ (amount and currency)

That in respect of this debt, the Claimant holds security valued at \$_____ (amount and currency), or claims a priority over other unsecured or secured creditors in the amount of \$_____ (amount and currency), particulars of which are attached.

If a secured claim is being asserted, please give full particulars of the security, including the date on which the security was given and the value at which you assess the security, and attach a copy of the security documents. If a priority claim is being asserted, please provide details as to the priority claim being asserted, and the basis for this priority claim.

☐ CLAIM AGAINST THE DIRECTORS AND OFFICERS OF

\$_____ (amount and currency)

E. PARTICULARS OF CLAIM AND DOCUMENTATION

Other than as already set out herein, the particulars of the undersigned's total Claim are attached.

Provide all particulars of the Claim and supporting documentation, including amount, description of transaction(s) or agreement(s) giving rise to the Claim, name of any guarantor which has guaranteed the Claim, and amount of invoices, particulars of all credits, discounts, etc. claimed, description of the security, if any, granted by any Applicant or any Director or Officer to the Claimant and estimated value of such security, and particulars of any restructuring claim.

This Proof of Claim must be received by the Monitor by no later than **5:00 p.m.** (Eastern Time) on the applicable Claims Bar Date specified in the Claims Procedure Order. The Claims Bar Date applicable to Pre-Filing Claims and Directors & Officer Claims is **June 22, 2020** (the "**Pre-Filing Claims Bar Date**"). The Claims Bar Date related to Restructuring Claims is 5:00 p.m. (Eastern Time) on the later of (i) June 22, 2020 and (ii) the day which is 30 days after the date the Monitor sends a Claims Package with respect to such Claim (the "**Restructuring Claims Bar Date**"). Proofs of Claim should be sent by email or, if not possible to send by email, by prepaid ordinary mail, courier, personal delivery or fax to the following address:

Ernst & Young Inc.
Court-appointed Monitor of CannTrust Inc. & others

E-mail: CannTrust.Monitor@ca.ey.com
Fax: 416-943-3300
Address: 100 Adelaide Street, West, PO Box 1, Toronto ON M5H 0B3

If you have any questions you can contact us using the information above or call us at 1-855-224-0800 or 416-943-2091.

F. FILING OF CLAIM

Failure to file your proof of claim as directed by **5:00 p.m.** (Eastern Time), on the applicable Claims Bar Date will result in your claim being barred and in you being prevented from making or enforcing a Claim against the Applicants or any Director or Officer. In addition, you shall not be entitled to further notice in, and shall not be entitled to participate as a creditor in these proceedings.

Dated at _____ this _____ day of _____, 2020.

Signature of Claimant /Representative of Claimant