

PROOF OF CLAIM

Court File No.: CV-23-00709030-00CL

**ONTARIO
SUPERIOR COURT OF JUSTICE
(COMMERCIAL LIST)**

B E T W E E N:

ONTARIO SECURITIES COMMISSION

Applicant

- and -

**TRAYNOR RIDGE CAPITAL INC.,
TR1 FUND, TR1-I FUND, TR3 FUND, TR1 GP LTD.,
TR1 INTERNATIONAL FUND AND TR1 MASTER FUND**

Respondents

PROOF OF CLAIM

1. PARTICULARS OF CREDITOR

Full Legal Name of Creditor:	
Full Mailing Address of Creditor:	
Telephone Number of Creditor:	
E-mail Address of Creditor:	
Attention (Contact Person of Creditor):	

2. PARTICULARS OF ORIGINAL CREDITOR FROM WHOM YOU ACQUIRED THE CLAIM, IF APPLICABLE:

(a) Have you acquired this Claim by assignment? Yes No
(if yes, attach documents evidencing assignment)

a. Full Legal Name of original creditor(s):

3. PROOF OF CLAIM

THE UNDERSIGNED CERTIFIES AS FOLLOWS:

That I am a Creditor [or hold the position of _____ of the Creditor] and have knowledge of all the circumstances connected with the Claim described herein;

That I have knowledge of all the circumstances connected with the Claim described and set out below;

_____ [Insert Respondent Name(s)] was and is still indebted to the Creditor as follows:

When completing the Proof of Claim, please ensure to include the exact legal name of the Respondent that you are asserting a Claim against (i.e. Traynor Ridge Capital Inc. Any Claims denominated in a foreign currency shall be filed in such currency and will be converted to Canadian Dollars at the rate as set out in the Claims Process Order.

Respondent¹	Amount of Claim
<i>(Traynor Ridge Capital Inc., TR1 Fund, TR1-I Fund, TR3 Fund, TR1 GP Ltd., TR1 International Fund and TR1 Master Fund)</i>	<i>(include the foreign currency if not Canadian dollars)</i>
	\$

¹ Please include the full legal name of the Respondent that you are asserting a Claim against. If you are asserting Claims against multiple Respondents, you must complete a separate Proof of Claim in respect of each Respondent.

4. NATURE OF CLAIM

(CHECK AND COMPLETE APPROPRIATE CATEGORY)

- Total Unsecured Claim of \$ _____
- Total Secured Claim of \$ _____

In respect of this debt, I hold security over the assets of _____ [*Insert Respondent Name*] valued at \$ _____ [*List the value of security*], the particulars of which security and value are attached to this Proof of Claim form².

(If the Claim is secured, provide full particulars of the security, including the date on which the security was given, the value for which you ascribe to the assets charged by your security, the basis for such valuation and attach a copy of the security documents evidencing the security.)

5. PARTICULARS OF CLAIM:

The particulars of the undersigned's total Claims are attached.

(Provide full particulars of the Claim(s) and supporting documentation, including the legal name of the Respondent(s) you are asserting a Claim against, the amount, description of transaction(s) or agreement(s) giving rise to the Claim(s), name of any guarantor(s) which has guaranteed the Claim(s), and amount of Claim(s) allocated thereto, date and number of all invoices, particulars of all credits, discounts, etc. claimed.)

² If you hold security over more than one Respondent, please attach particulars to this Proof of Claim form that clearly describe the Respondent that you hold security from and the amount of such security.

6. FILING OF CLAIM

This Proof of Claim must be returned to and received by the Receiver by 5:00 p.m. (Toronto Time) on the Claims Bar Date (May 15, 2024).

In each case, completed forms must be delivered by prepaid registered mail, courier, personal delivery, facsimile transmission or email to the Receiver at the following address:

Ernst & Young Inc.
Court-appointed Receiver of Traynor Ridge Capital Inc., et. al.
Ernst & Young Tower
100 Adelaide Street West, P.O. Box 1
Toronto, Ontario M5H 0B3
Attention: Greg McDonald

Hotline: 1-833-453-2981 / 1-416-943-8048
Email: TraynorRidge.Receiver@ca.ey.com

Dated at _____(location) this _____ day of _____, 2024.

Witness Name:

Name of Creditor: _____

Signature of Creditor:

If Creditor is other than an individual, print name and title of authorized signatory

Name: _____

Title: _____