

**Form 24-101F1**  
**Registered Firm Exception report of DAP/RAP Trade Reporting and Matching**

**Calendar Quarter Period Covered:**

From: \_\_\_\_\_ to: \_\_\_\_\_

**Registered Firm Identification and Contact Information:**

1. Full name of registered firm (if sole proprietor, last, first and middle name):

\_\_\_\_\_

2. Name(s) under which business is conducted, if different from item 1:

\_\_\_\_\_

3a. Address of registered firm's principal place of business:

\_\_\_\_\_

3b. [Indicate below the jurisdiction of your principal regulator within the meaning of NI 31-103 *Registration Requirements, Exemptions and Ongoing Registrant Obligations*:

Alberta

British Columbia

Manitoba

New Brunswick

Newfoundland & Labrador

Northwest Territories

Nova Scotia

Nunavut

Ontario

Prince Edward Island

Québec

Saskatchewan

Yukon [This provision will be considered when determining the interface to be established between CMR Jurisdictions and other jurisdictions.]

3c. Indicate below all jurisdictions in which you are registered:

CMR Jurisdictions

Alberta

~~British Columbia~~

Manitoba

~~New Brunswick~~

Newfoundland & Labrador

Northwest Territories

Nova Scotia

Nunavut

~~Ontario~~

~~Prince Edward Island~~

Québec

~~Saskatchewan~~

~~Yukon~~

4. Mailing address, if different from business address:

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5. Type of business:  Dealer  Adviser

6. Category of registration \_\_\_\_\_

7. (a) Registered Firm NRD number: \_\_\_\_\_

(b) If the registered firm is a participant of a clearing agency, the registered firm's CUID number:

8. Contact employee name:

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Telephone number 

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Email address: 

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**INSTRUCTIONS:**

Deliver this form for both equity and debt DAP/RAP trades together with Exhibits A, B and C pursuant to section 4.1 of the Instrument, covering the calendar quarter indicated above, within 45 days of the end of the calendar quarter if

- (a) less than 90 per cent of the equity and/or debt DAP/RAP trades executed by or for you during the quarter matched within the time required in Part 3 of the Instrument, or
- (b) the equity and/or debt DAP/RAP trades executed by or for you during the quarter that matched within the time required in Part 3 of the Instrument represent less than 90 per cent of the aggregate value of the securities purchased and sold in those trades.

**EXHIBITS:**

**Exhibit A DAP/RAP trade statistics for the quarter**

Complete Tables 1 and 2 below for each calendar quarter.

(1) *Equity DAP/RAP trades*

<i>Entered into CDS by deadline (to be completed by dealers only)</i>				<i>Matched by deadline</i>			
<b># of Trades</b>	<b>%</b>	<b>\$ Value of Trades</b>	<b>%</b>	<b># of Trades</b>	<b>%</b>	<b>\$ Value of Trades</b>	<b>%</b>

(2) *Debt DAP/RAP trades*

<i>Entered into CDS by deadline (to be completed by dealers only)</i>				<i>Matched by deadline</i>			
<b># of Trades</b>	<b>%</b>	<b>\$ Value of Trades</b>	<b>%</b>	<b># of Trades</b>	<b>%</b>	<b>\$ Value of Trades</b>	<b>%</b>

**Exhibit B Reasons for not meeting exception reporting thresholds**

Describe the circumstances or underlying causes that resulted in or contributed to the failure to achieve the percentage target for matched equity and/or debt DAP/RAP trades within the maximum time prescribed by Part 3 of the Instrument. Reasons given could be one or more matters within your control or due to another trade-matching party or service provider. If you have insufficient information to determine the percentages, the reason for this should be provided. See also Companion Policy 24-101CP to the Instrument.

**Exhibit C Steps to address delays**

Describe what specific steps you are taking to resolve delays in the equity and/or debt DAP/RAP trade reporting and matching process in the future. Indicate when each of these steps is expected to be implemented. The steps being taken could be internally focused, such as implementing a new system or procedure, or externally focused, such as meeting with a trade-matching party to determine what action should be taken by that party. If you have insufficient information to determine the percentages, the steps being taken to obtain this information should be provided. See also Companion Policy 24-101CP to the Instrument.

### Certificate of Registered Firm

The undersigned certifies that the information given in this report on behalf of the registered firm is true and correct.

DATED at \_\_\_\_\_ this \_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_

\_\_\_\_\_  
(Name of registered firm – type or print)

\_\_\_\_\_  
(Name of director, officer or partner – type or print)

\_\_\_\_\_  
(Signature of director, officer or partner)

\_\_\_\_\_  
(Official capacity – type or print)