

FORM 10

MATERIAL CHANGE REPORT



Pursuant to Section 64 of the Securities Act, 2012 and by-law 50 of the Securities (General)
By-Laws, 2013

| | |
|------------------------------|--|
| General Instructions: | <p>Please complete all relevant sections; where the allocated space is insufficient, you may continue on a separate page and attach to the completed form. All supporting information and attached pages should be appropriately numbered and referenced.</p> <p>This report and any attachments should be certified by a Senior Officer of the Reporting Issuer.</p> <p>Completed reports should be submitted to:</p> <p style="padding-left: 40px;">The Director Market Regulation & Surveillance Trinidad and Tobago Securities and Exchange Commission 57-59 Dundonald Street Port of Spain Trinidad</p> |
| Item 1 | State the name of the reporting issuer, and include its business address. |
| Item 2 | State the date on which the material change occurred. |
| Item 3 | Provide sufficient disclosure regarding the material change to enable a reader to appreciate the nature and substance of the material change without having to refer to any other sources. Examples of matters that would be subject to disclosure include: dates, parties, terms and conditions, effect on financial condition, value, reasons for the change, purpose of the change, and a general comment on the probable impact of the material change on the reporting issuer. |
| Item 4 | State whether the issuer is seeking an exemption for publishing a notice in accordance with Section 64(2) of the Securities Act 2012, and complete the associated "yes" or "no" sections of the form accordingly. |
| Item 5 | Give the name, position, business telephone number and email address of a senior officer of the reporting issuer who may be contacted to discuss further details regarding the material change. |
| Item 6 | Include the signature of the Senior Officer identified in Item 5, confirming the material change report, and certifying the statement outlined. |



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Pursuant to section 64 of the Securities Act, 2012 and by-law 50 of the Securities (General)
By-Laws, 2013

1. NAME OR REPORTING ISSUER

| |
|--------------------------------|
| Name of Reporting Issuer |
| Citicorp Merchant Bank Limited |

2. DATE OF MATERIAL CHANGE

| |
|-------------------------|
| Date of material change |
| October 10, 2020 |

3. DESCRIPTION OF MATERIAL CHANGE

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| Provide a description of the material change |
| Mr. James Ollivierre has resigned from the position of Country Markets Head of Citicorp Merchant Bank Limited with effect from October 10, 2020. |

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4. DETAILS OF PUBLICATION OF MATERIAL CHANGE

| | YES | NO |
|--|--------------------------|-------------------------------------|
| Will you be seeking an exemption from publishing a notice in accordance with section 64(2) of the Securities Act 2012? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |

If "No"

| | |
|---|------------------------|
| Proposed Date of Publication of Notice (dd/mmm/yyyy) | October 13 or 14, 2020 |
|---|------------------------|

If "Yes"

| |
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| State the reasons for applying for the exemption |
| |

5. DETAILS OF SENIOR OFFICER

| | |
|------------------------------|--|
| Name (First name, Last name) | Danielle Rampersad |
| Position in Organization | General Counsel and Corporate Secretary |
| Business Address | No. 12 Queen's Park East, Port-of-Spain |
| Work Phone (1-xxx-xxx-xxxx) | 1-868-821-6057 |
| Fax Phone (1-xxx-xxx-xxxx) | 1-868-627-8131 |
| Email Address | danielle.rampersad@citi.com |

6. DATE, CERTIFICATION AND SIGNATURE

I hereby certify that the statement and information contained in this form and any attachment hereto are true and correct to the best of my knowledge and belief and submitted in compliance with the provisions of the Securities Act, 2012. I understand that any misrepresentation, falsification or material omission of information on this application may result in a breach of the Securities Act, 2012.

DANIELLE CAMPERJAB [Signature] GENERAL COUNSEL 9/10/2020

Print Name Signature Position Date

FOR OFFICIAL USE ONLY

| Tool | ID Information |
|--|----------------|
| Registrant's Number | |
| Director's Number | |
| Document / Record Number | |
| Record's Management Date Received (dd/mm/yyyy) | |

Approved By : _____ Date (DD/MM/YYYY) _____