



**FORM 10A**

Mar 09, 2023, 3:11 pm

**MATERIAL CHANGE REPORT**

**Pursuant to Section 64 of the Securities Act, 2012**

**1. NAME OF REPORTING ISSUER**

Name of Reporting Issuer
SCOTIA TRINIDAD AND TOBAGO FIXED INCOME FUND

**2. DATE OF MATERIAL CHANGE**

Date of material change
7 <sup>th</sup> March, 2023

**3. DESCRIPTION OF MATERIAL CHANGE**

Provide a description of the material change
<p>Effective 7<sup>th</sup> March, 2023, Ms. Roxane De Freitas retired as Director from the Board of Directors of Scotiabank Trinidad and Tobago Limited, the Trustee of the Scotia Trinidad and Tobago Fixed Income Fund.</p>

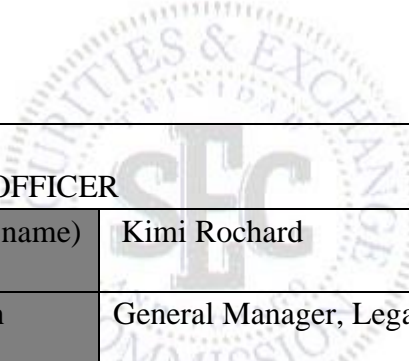
#### 4. DETAILS OF PUBLICATION OF MATERIAL CHANGE

	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”

Date of Publication of Notice (dd/mmm/yyyy)	13/03/2023
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If “Yes”

State the reasons for applying for the exemption


#### 5. DETAILS OF SENIOR OFFICER

Name (First name, Last name)	Kimi Rochard
Position in Organization	General Manager, Legal and Corporate Secretary
Business Address	56-58 Richmond Street, Port of Spain.
Work Phone (1-xxx-xxxxxxx)	1-868-778-5096
Fax Phone(1-xxx-xxx-xxxx)	n/a
Email Address	kimi.rochard@scotiabank.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.

KIMI ROCHARD



General Manager, Legal  
and Corporate Secretary

9th March, 2023

**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) \_\_\_\_\_