

FORM 10

MATERIAL CHANGE REPORT

Pursuant to section 64 of the Securities Act, 2012

1. NAME OF REPORTING ISSUER

Name of Reporting Issuer
TRINIDAD AND TOBAGO MORTGAGE FINANCE COMPANY LIMITED 61 Dundonald Street, Port of Spain

2. DATE OF MATERIAL CHANGE

Date of material change
July 22, 2020

3. DESCRIPTION OF MATERIAL CHANGE

Provide a description of the material change
<p>Trinidad and Tobago Mortgage Finance Company Limited wishes to advise that at its Fifty-Fourth Annual Meeting held on July 22, 2020 the following Directors were re-elected:</p> <ol style="list-style-type: none">1. Mrs. Jennifer Lutchman2. Ms. Athena Ryan3. Mr. Anthony Campbell


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/mm/yyyy)	July 27, 2020
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If "Yes"

State the reasons for applying for the exemption


5. DETAILS OF SENIOR OFFICER

Name (Salutation, First name, Last name)	LAURETTE WALKER
Position in Organization	SECRETARY(Ag)
Business Address	'ALBION COURT', 61 DUNDONALD STREET PORT OF SPAIN
Work Phone (1-xxx-xxx-xxxx)	1-868-625-6683
Fax Phone(1-xxx-xxx-xxxx)	1-868-623-9212
Email Address	lwalker@ttmf-mortgages.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.

Laurette Walker

Laurette Walker

Secretary(Ag)

July 23, 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) _____