

Voting Instruction Form (“VIF”) – Annual General and Special Meeting to be held on Friday, October 3, 2025

Appointee(s)

I/We being the undersigned holder(s) of **Val-d'Or Mining Corporation** (the “Company”) hereby appoint(s) **Glenn J. Mullan**, the Chairman of the Board, President, Chief Executive Officer, and a director of the Company, or failing this person, **Rico De Vega**, the Chief Financial Officer and Corporate Secretary of the Company

OR

Print the name of the person you are appointing if this person is someone other than the Management Appointees listed herein:

as my/our appointee with full power of substitution and to attend, act, and to vote for and on behalf of the holder in accordance with the following direction (or if no directions have been given, as the appointee sees fit) and all other matters that may properly come before the **Annual General and Special Meeting** (the “Meeting”) of the Company to be held at **2772 chemin Sullivan, Val-d'Or, Québec, and by telephone conference call at 3:00 p.m. Eastern time, on October 3, 2025** or at any adjournment or postponement thereof.

1. Number of Directors. To set the number of directors to be elected at the Meeting at six.	For <input type="checkbox"/>	Against <input type="checkbox"/>																																													
<table border="0" style="width: 100%;"> <tr> <td style="width: 33%; vertical-align: top;"> 2. Election of Directors. </td> <td style="width: 33%; vertical-align: top;"> <table border="0" style="width: 100%;"> <tr> <td style="width: 50%; text-align: center;"> For <input type="checkbox"/> </td> <td style="width: 50%; text-align: center;"> Withhold <input type="checkbox"/> </td> </tr> </table> </td> <td style="width: 33%; vertical-align: top;"> <table border="0" style="width: 100%;"> <tr> <td style="width: 50%; text-align: center;"> For <input type="checkbox"/> </td> <td style="width: 50%; text-align: center;"> Withhold <input type="checkbox"/> </td> </tr> </table> </td> </tr> <tr> <td style="vertical-align: top;"> a. Louis Doyle d. Glenn J. Mullan </td> <td style="vertical-align: top;"> <table border="0" style="width: 100%;"> <tr> <td style="width: 50%; text-align: center;"> <input type="checkbox"/> </td> <td style="width: 50%; text-align: center;"> <input type="checkbox"/> </td> </tr> <tr> <td style="width: 50%; text-align: center;"> <input type="checkbox"/> </td> <td style="width: 50%; text-align: center;"> <input type="checkbox"/> </td> </tr> </table> </td> <td style="vertical-align: top;"> <table border="0" style="width: 100%;"> <tr> <td style="width: 50%; text-align: center;"> For <input type="checkbox"/> </td> <td style="width: 50%; text-align: center;"> Withhold <input type="checkbox"/> </td> </tr> <tr> <td style="width: 50%; text-align: center;"> For <input type="checkbox"/> </td> <td style="width: 50%; text-align: center;"> Withhold <input type="checkbox"/> </td> </tr> </table> </td> </tr> <tr> <td style="vertical-align: top;"> b. Deborah Honig e. Lukas (Luke) C.W. Shewchuk </td> <td style="vertical-align: top;"> <table border="0" style="width: 100%;"> <tr> <td style="width: 50%; text-align: center;"> <input type="checkbox"/> </td> <td style="width: 50%; text-align: center;"> <input type="checkbox"/> </td> </tr> <tr> <td style="width: 50%; text-align: center;"> <input type="checkbox"/> </td> <td style="width: 50%; text-align: center;"> <input type="checkbox"/> </td> </tr> </table> </td> <td style="vertical-align: top;"> <table border="0" style="width: 100%;"> <tr> <td style="width: 50%; text-align: center;"> For <input type="checkbox"/> </td> <td style="width: 50%; text-align: center;"> Withhold <input type="checkbox"/> </td> </tr> <tr> <td style="width: 50%; text-align: center;"> For <input type="checkbox"/> </td> <td style="width: 50%; text-align: center;"> Withhold <input type="checkbox"/> </td> </tr> </table> </td> </tr> <tr> <td style="vertical-align: top;"> c. Jimmy S.H. Lee f. C. Jens Zinke </td> <td style="vertical-align: top;"> <table border="0" style="width: 100%;"> <tr> <td style="width: 50%; text-align: center;"> <input type="checkbox"/> </td> <td style="width: 50%; text-align: center;"> <input type="checkbox"/> </td> </tr> <tr> <td style="width: 50%; text-align: center;"> <input type="checkbox"/> </td> <td style="width: 50%; text-align: center;"> <input type="checkbox"/> </td> </tr> </table> </td> <td style="vertical-align: top;"> <table border="0" style="width: 100%;"> <tr> <td style="width: 50%; text-align: center;"> For <input type="checkbox"/> </td> <td style="width: 50%; text-align: center;"> Withhold <input type="checkbox"/> </td> </tr> <tr> <td style="width: 50%; text-align: center;"> For <input type="checkbox"/> </td> <td style="width: 50%; text-align: center;"> Withhold <input type="checkbox"/> </td> </tr> </table> </td> </tr> </table>			2. Election of Directors.	<table border="0" style="width: 100%;"> <tr> <td style="width: 50%; text-align: center;"> For <input type="checkbox"/> </td> <td style="width: 50%; text-align: center;"> Withhold <input type="checkbox"/> </td> </tr> </table>	For <input type="checkbox"/>	Withhold <input type="checkbox"/>	<table border="0" style="width: 100%;"> <tr> <td style="width: 50%; text-align: center;"> For <input type="checkbox"/> </td> <td style="width: 50%; text-align: center;"> Withhold <input type="checkbox"/> </td> </tr> </table>	For <input type="checkbox"/>	Withhold <input type="checkbox"/>	a. Louis Doyle d. Glenn J. Mullan	<table border="0" style="width: 100%;"> <tr> <td style="width: 50%; text-align: center;"> <input type="checkbox"/> </td> <td style="width: 50%; text-align: center;"> <input type="checkbox"/> </td> </tr> <tr> <td style="width: 50%; text-align: center;"> <input type="checkbox"/> </td> <td style="width: 50%; text-align: center;"> <input type="checkbox"/> </td> </tr> </table>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<table border="0" style="width: 100%;"> <tr> <td style="width: 50%; text-align: center;"> For <input type="checkbox"/> </td> <td style="width: 50%; text-align: center;"> Withhold <input type="checkbox"/> </td> </tr> <tr> <td style="width: 50%; text-align: center;"> For <input type="checkbox"/> </td> <td style="width: 50%; text-align: center;"> Withhold <input type="checkbox"/> </td> </tr> </table>	For <input type="checkbox"/>	Withhold <input type="checkbox"/>	For <input type="checkbox"/>	Withhold <input type="checkbox"/>	b. Deborah Honig e. Lukas (Luke) C.W. Shewchuk	<table border="0" style="width: 100%;"> <tr> <td style="width: 50%; text-align: center;"> <input type="checkbox"/> </td> <td style="width: 50%; text-align: center;"> <input type="checkbox"/> </td> </tr> <tr> <td style="width: 50%; text-align: center;"> <input type="checkbox"/> </td> <td style="width: 50%; text-align: center;"> <input type="checkbox"/> </td> </tr> </table>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<table border="0" style="width: 100%;"> <tr> <td style="width: 50%; text-align: center;"> For <input type="checkbox"/> </td> <td style="width: 50%; text-align: center;"> Withhold <input type="checkbox"/> </td> </tr> <tr> <td style="width: 50%; text-align: center;"> For <input type="checkbox"/> </td> <td style="width: 50%; text-align: center;"> Withhold <input type="checkbox"/> </td> </tr> </table>	For <input type="checkbox"/>	Withhold <input type="checkbox"/>	For <input type="checkbox"/>	Withhold <input type="checkbox"/>	c. Jimmy S.H. Lee f. C. Jens Zinke	<table border="0" style="width: 100%;"> <tr> <td style="width: 50%; text-align: center;"> <input type="checkbox"/> </td> <td style="width: 50%; text-align: center;"> <input type="checkbox"/> </td> </tr> <tr> <td style="width: 50%; text-align: center;"> <input type="checkbox"/> </td> <td style="width: 50%; text-align: center;"> <input type="checkbox"/> </td> </tr> </table>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<table border="0" style="width: 100%;"> <tr> <td style="width: 50%; text-align: center;"> For <input type="checkbox"/> </td> <td style="width: 50%; text-align: center;"> Withhold <input type="checkbox"/> </td> </tr> <tr> <td style="width: 50%; text-align: center;"> For <input type="checkbox"/> </td> <td style="width: 50%; text-align: center;"> Withhold <input type="checkbox"/> </td> </tr> </table>	For <input type="checkbox"/>	Withhold <input type="checkbox"/>	For <input type="checkbox"/>	Withhold <input type="checkbox"/>	<table border="0" style="width: 100%;"> <tr> <td style="width: 50%; text-align: center;"> For <input type="checkbox"/> </td> <td style="width: 50%; text-align: center;"> Withhold <input type="checkbox"/> </td> </tr> <tr> <td style="width: 50%; text-align: center;"> For <input type="checkbox"/> </td> <td style="width: 50%; text-align: center;"> Withhold <input type="checkbox"/> </td> </tr> </table>	For <input type="checkbox"/>	Withhold <input type="checkbox"/>	For <input type="checkbox"/>	Withhold <input type="checkbox"/>
2. Election of Directors.	<table border="0" style="width: 100%;"> <tr> <td style="width: 50%; text-align: center;"> For <input type="checkbox"/> </td> <td style="width: 50%; text-align: center;"> Withhold <input type="checkbox"/> </td> </tr> </table>	For <input type="checkbox"/>	Withhold <input type="checkbox"/>	<table border="0" style="width: 100%;"> <tr> <td style="width: 50%; text-align: center;"> For <input type="checkbox"/> </td> <td style="width: 50%; text-align: center;"> Withhold <input type="checkbox"/> </td> </tr> </table>	For <input type="checkbox"/>	Withhold <input type="checkbox"/>																																									
For <input type="checkbox"/>	Withhold <input type="checkbox"/>																																														
For <input type="checkbox"/>	Withhold <input type="checkbox"/>																																														
a. Louis Doyle d. Glenn J. Mullan	<table border="0" style="width: 100%;"> <tr> <td style="width: 50%; text-align: center;"> <input type="checkbox"/> </td> <td style="width: 50%; text-align: center;"> <input type="checkbox"/> </td> </tr> <tr> <td style="width: 50%; text-align: center;"> <input type="checkbox"/> </td> <td style="width: 50%; text-align: center;"> <input type="checkbox"/> </td> </tr> </table>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<table border="0" style="width: 100%;"> <tr> <td style="width: 50%; text-align: center;"> For <input type="checkbox"/> </td> <td style="width: 50%; text-align: center;"> Withhold <input type="checkbox"/> </td> </tr> <tr> <td style="width: 50%; text-align: center;"> For <input type="checkbox"/> </td> <td style="width: 50%; text-align: center;"> Withhold <input type="checkbox"/> </td> </tr> </table>	For <input type="checkbox"/>	Withhold <input type="checkbox"/>	For <input type="checkbox"/>	Withhold <input type="checkbox"/>																																					
<input type="checkbox"/>	<input type="checkbox"/>																																														
<input type="checkbox"/>	<input type="checkbox"/>																																														
For <input type="checkbox"/>	Withhold <input type="checkbox"/>																																														
For <input type="checkbox"/>	Withhold <input type="checkbox"/>																																														
b. Deborah Honig e. Lukas (Luke) C.W. Shewchuk	<table border="0" style="width: 100%;"> <tr> <td style="width: 50%; text-align: center;"> <input type="checkbox"/> </td> <td style="width: 50%; text-align: center;"> <input type="checkbox"/> </td> </tr> <tr> <td style="width: 50%; text-align: center;"> <input type="checkbox"/> </td> <td style="width: 50%; text-align: center;"> <input type="checkbox"/> </td> </tr> </table>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<table border="0" style="width: 100%;"> <tr> <td style="width: 50%; text-align: center;"> For <input type="checkbox"/> </td> <td style="width: 50%; text-align: center;"> Withhold <input type="checkbox"/> </td> </tr> <tr> <td style="width: 50%; text-align: center;"> For <input type="checkbox"/> </td> <td style="width: 50%; text-align: center;"> Withhold <input type="checkbox"/> </td> </tr> </table>	For <input type="checkbox"/>	Withhold <input type="checkbox"/>	For <input type="checkbox"/>	Withhold <input type="checkbox"/>																																					
<input type="checkbox"/>	<input type="checkbox"/>																																														
<input type="checkbox"/>	<input type="checkbox"/>																																														
For <input type="checkbox"/>	Withhold <input type="checkbox"/>																																														
For <input type="checkbox"/>	Withhold <input type="checkbox"/>																																														
c. Jimmy S.H. Lee f. C. Jens Zinke	<table border="0" style="width: 100%;"> <tr> <td style="width: 50%; text-align: center;"> <input type="checkbox"/> </td> <td style="width: 50%; text-align: center;"> <input type="checkbox"/> </td> </tr> <tr> <td style="width: 50%; text-align: center;"> <input type="checkbox"/> </td> <td style="width: 50%; text-align: center;"> <input type="checkbox"/> </td> </tr> </table>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<table border="0" style="width: 100%;"> <tr> <td style="width: 50%; text-align: center;"> For <input type="checkbox"/> </td> <td style="width: 50%; text-align: center;"> Withhold <input type="checkbox"/> </td> </tr> <tr> <td style="width: 50%; text-align: center;"> For <input type="checkbox"/> </td> <td style="width: 50%; text-align: center;"> Withhold <input type="checkbox"/> </td> </tr> </table>	For <input type="checkbox"/>	Withhold <input type="checkbox"/>	For <input type="checkbox"/>	Withhold <input type="checkbox"/>																																					
<input type="checkbox"/>	<input type="checkbox"/>																																														
<input type="checkbox"/>	<input type="checkbox"/>																																														
For <input type="checkbox"/>	Withhold <input type="checkbox"/>																																														
For <input type="checkbox"/>	Withhold <input type="checkbox"/>																																														
For <input type="checkbox"/>	Withhold <input type="checkbox"/>																																														
For <input type="checkbox"/>	Withhold <input type="checkbox"/>																																														
3. Appointment of Auditors. To re-appoint McGovern Hurley LLP as the Auditor of the Company for the ensuing year.			For <input type="checkbox"/>	Withhold <input type="checkbox"/>																																											
4. Creation of Jimmy S.H. Lee as a Control Person. To approve the creation of Jimmy S.H. Lee as a Control Person of the Company, the details of which are set out in the Company's Information Circular dated August 29, 2025.			For <input type="checkbox"/>	Against <input type="checkbox"/>																																											
5. Approval of Amendments to the Stock Option Incentive Plan. To give approval to amendments to the Company's Stock Option Incentive Plan, all as more particularly described in the Company's Information Circular dated August 29, 2025.			For <input type="checkbox"/>	Against <input type="checkbox"/>																																											

Authorized Signature(s) – This section must be completed for your instructions to be executed.

I/we authorize you to act in accordance with my/our instructions set out above. I/We hereby revoke any VIF previously given with respect to the Meeting. If no voting instructions are indicated above, this VIF will be voted as recommended by Management.

Signature(s):

Date

/ /
MM / DD / YY

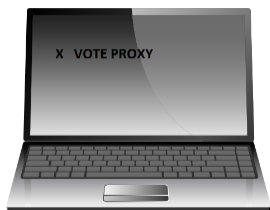
This form of VIF is solicited by and on behalf of Management.

VIFs must be received by 3:00 pm, Eastern Time, on Wednesday, October 1, 2025.

Notes to VIF

1. We are sending to you the enclosed proxy-related materials that relate to a meeting of the holders of the series or class of securities that are held on your behalf by the intermediary identified above.
2. Each holder has the right to appoint a person, who need not be a holder, to attend and represent him or her at the Meeting or any adjournment or postponement thereof. If you wish to appoint a person other than the persons whose names are printed herein, please insert the name of your chosen appointee in the space provided on the reverse. If you want to attend the Meeting and vote in person, please write your name in the place provided for that purpose in this form. You can also write the name of someone else whom you wish to attend the Meeting and vote on your behalf. Unless prohibited by law, the person whose name is written in the space provided will have full authority to present matters to the Meeting and vote on all matters that are presented at the Meeting, even if those matters are not set out in this form or the information circular. Consult a legal advisor if you wish to modify the authority of that person in any way. If you require help, please contact the Registered Representative who services your account.
3. If the securities are registered in the name of more than one holder (for example, joint ownership, trustees, executors, etc.) then all of the holders must sign this VIF in the space provided on the reverse. If you are voting on behalf of a corporation or another individual, you must sign this VIF with signing capacity stated and you may be required to provide documentation evidencing your power to sign this VIF.
4. This VIF should be signed in the exact manner as the name appears on the VIF. If these voting instructions are given on behalf of a body corporate set out the full legal name of the body corporate, the name and position of the person giving voting instructions on behalf of the body corporate and the address for service of the body corporate.
5. If this VIF is not dated, it will be deemed to bear the date on which it is mailed by Management to the holder.
6. **When properly signed and delivered, securities represented by this VIF will be voted as directed by you, however, if such a direction is not made in respect of any matter the VIF will direct the voting of the securities to be made as recommended in the documentation provided by Management for the Meeting.**
7. Your voting instructions will be recorded on receipt of the VIF.
8. The securities represented by this VIF will be voted or withheld from voting, in accordance with the instructions of the holder, or voted against each of the matters described herein, as applicable, on any ballot that may be called for and, if the holder has specified a choice with respect to any matter to be acted on, the securities will be voted accordingly.
9. This VIF confers discretionary authority in respect of amendments to matters identified in the Notice of Meeting or other matters that may properly come before the Meeting or any adjournment or postponement thereof.
10. This VIF should be read in conjunction with the accompanying documentation provided by Management.
11. Please complete, date and sign your VIF and return it to our transfer agent, Odyssey Trust Company, Suite 350, 409 Granville Street, Vancouver, British Columbia V6C 1T2, Attention: Proxy Department; or by facsimile: 1-800-517-4553.

INSTEAD OF MAILING THIS VIF, YOU MAY SUBMIT YOUR VIF USING SECURE ONLINE VOTING AVAILABLE ANYTIME:



To Vote Your VIF Online please visit:

<https://login.odysseytrust.com/pxlogin>

You will require the CONTROL NUMBER printed with your address to the right.

If you vote by Internet, do not mail this VIF.

To request the receipt of future documents via email and/or to sign up for Securityholder Online services, you may contact Odyssey Trust Company at www.odysseycontact.com.

Voting by mail may be the only method for securities held in the name of a corporation or securities being voted on behalf of another individual. A return envelope has been enclosed for voting by mail.