

FORM 7**MONTHLY PROGRESS REPORT**

Name of Listed Issuer: Trulieve Cannabis Corp. (the "Issuer").

Trading Symbol: TRUL

Number of Outstanding Listed Securities: 636,465.82 Multiple Voting Shares, 131,470,952 Subordinate Voting Shares.

Date: November 5, 2021

This Monthly Progress Report must be posted before the opening of trading on the fifth trading day of each month. This report is not intended to replace the Issuer's obligation to separately report material information forthwith upon the information becoming known to management or to post the forms required by Exchange Policies. If material information became known and was reported during the preceding month to which this report relates, this report should refer to the material information, the news release date and the posting date on the Exchange website.

This report is intended to keep investors and the market informed of the Issuer's ongoing business and management activities that occurred during the preceding month. Do not discuss goals or future plans unless they have crystallized to the point that they are "material information" as defined in the Policies. The discussion in this report must be factual, balanced and non-promotional.

General Instructions

- (a) Prepare this Monthly Progress Report using the format set out below. The sequence of questions must not be altered, nor should questions be omitted or left unanswered. The answers to the items must be in narrative form. State when the answer to any item is negative or not applicable to the Issuer. The title to each item must precede the answer.
- (b) The term "Issuer" includes the Issuer and any of its subsidiaries.
- (c) Terms used and not defined in this form are defined or interpreted in Policy 1 – Interpretation and General Provisions.

Report on Business

1. Provide a general overview and discussion of the development of the Issuer's business and operations over the previous month. Where the Issuer was inactive disclose this fact.
 - The Issuer has operations in Arizona, California, Colorado, Connecticut, Florida, Maryland, Massachusetts, Nevada, Pennsylvania, and West Virginia. The issuer has received a Notice of Intent to Award a Class 1 Production license in Georgia.
 - The Issuer operates 152 dispensaries nationwide, encompassing over 500,000 square feet of retail space.
 - The Issuer operates approximately 3.1 million square feet of total cultivation and production facilities.
 - The Issuer produces or sells over 950 different SKUs, including smokable flower, flower pods for vaporizing, concentrates, topicals, capsules, tinctures, vape cartridges, and edibles.

2. Provide a general overview and discussion of the activities of management.

The Issuer was actively looking at various acquisition opportunities in other states and expansion plans for the business in the states where it currently operates. Management also spent time working on strategic planning, financing activities, integration plans and tactical execution plans for the upcoming year. Such plans include, among other things, a focus on inventory and shipment logistics for new dispensary openings, product quality and expansion of new product lines and effective branding and sales and marketing support.

3. Describe and provide details of any new products or services developed or offered. For resource companies, provide details of new drilling, exploration or production programs and acquisitions of any new properties and attach any mineral or oil and gas or other reports required under Ontario securities law.

The Issuer released the following products during October 2021:

Live Budder (Hydrocarbon Line Extension)

4. Describe and provide details of any products or services that were discontinued. For resource companies, provide details of any drilling, exploration or production programs that have been amended or abandoned.

N/A

5. Describe any new business relationships entered into between the Issuer, the Issuer's affiliates or third parties including contracts to supply products or services, joint venture agreements and licensing agreements etc. State whether the relationship is with a Related Person of the Issuer and provide details of the relationship.

None material.

6. Describe the expiry or termination of any contracts or agreements between the Issuer, the Issuer's affiliates or third parties or cancellation of any financing arrangements that have been previously announced.

None material.

7. Describe any acquisitions by the Issuer or dispositions of the Issuer's assets that occurred during the preceding month. Provide details of the nature of the assets acquired or disposed of and provide details of the consideration paid or payable together with a schedule of payments if applicable, and of any valuation. State how the consideration was determined and whether the acquisition was from or the disposition was to a Related Person of the Issuer and provide details of the relationship.

The Issuer acquired 100% of the Harvest Health & Recreation, Inc. The acquisition was not from a Related Person.

8. Describe the acquisition of new customers or loss of customers.

None material.

9. Describe any new developments or effects on intangible products such as brand names, circulation lists, copyrights, franchises, licenses, patents, software, subscription lists and trademarks.

None Material.

10. Report on any employee hirings, terminations or lay-offs with details of anticipated length of lay-offs.

The Issuer had new hires of 648 and terminations and resignations of 285.

11. Report on any labour disputes and resolutions of those disputes if applicable.

None material.

12. Describe and provide details of legal proceedings to which the Issuer became a party, including the name of the court or agency, the date instituted, the principal parties to the proceedings, the nature of the claim, the amount claimed, if any, if the proceedings are being contested, and the present status of the proceedings.

None material.

13. Provide details of any indebtedness incurred or repaid by the Issuer together with the terms of such indebtedness.

The Issuer completed the issuance of 8% Senior Secured Notes in the aggregate principal amount of US \$350 million, as disclosed in the Issuer's CSE Form 9 dated October 5, 2021. The proceeds were used, in part, to redeem certain indebtedness of Harvest Health & Recreation, Inc., with an aggregate principal amount of approximately US \$271 million.

14. Provide details of any securities issued and options or warrants granted.

Security	Number Issued	Details of Issuance	Use of Proceeds ⁽¹⁾
Subordinate Voting Shares	50,874,175	Acquisition	The Issuer completed the acquisition of Harvest Health & Recreation, Inc., as disclosed in the Issuer's CSE Form 9 dated October 1, 2021.

15. Provide details of any loans to or by Related Persons.

None.

16. Provide details of any changes in directors, officers, or committee members.

None.

17. Discuss any trends which are likely to impact the Issuer including trends in the Issuer's market(s) or political/regulatory trends.

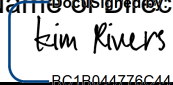
The Issuer operates in multiple states and is faced with competition from both single state and multistate operators. Several states in which the Issuer operates have introduced legislation which would legalize adult-use cannabis.

Certificate of Compliance

The undersigned hereby certifies that:

1. The undersigned is a director and/or senior officer of the Issuer and has been duly authorized by a resolution of the board of directors of the Issuer to sign this Certificate of Compliance.
2. As of the date hereof there is no material information concerning the Issuer which has not been publicly disclosed.
3. The undersigned hereby certifies to the Exchange that the Issuer is in compliance with the requirements of applicable securities legislation (as such term is defined in National Instrument 14-101) and all Exchange Requirements (as defined in CNSX Policy 1).
4. All of the information in this Form 7 Monthly Progress Report is true.

Dated November 5, 2021.

Kim Rivers
 Name of Director or Senior Officer

 Signature
 CEO
 Official Capacity

Issuer Details Name of Issuer Trulieve Cannabis Corp		For Month End October 2021	Date of Report 2021/11/05
Issuer Address 6749 Ben Bostic Rd			
City/Province/Postal Code Quincy, FL 32351	Issuer Fax No. ()	Issuer Telephone No. (850) 480-7955	
Contact Name Eric Powers	Contact Position Secretary	Contact Telephone No. (850) 480-7955	
Contact Email Address ir@trulieve.com	Web Site Address www.trulieve.com		