Form 45-106F1 Report of Exempt Distribution

IT IS AN OFFENCE TO MAKE A MISREPRESENTATION IN THIS REPORT

ITEM 1 - REPORT TYPE									
 □ New report ☑ Amended report If amer 	nded, provide filing date	of report that is being am	ended 2018 02 09 (YYYY-MI	M-DD)					
ITEM 2 - PARTY CERTIFYING THE	Report								
Indicate the party certifying the report (sele National Instrument 81-106 Investment Fu									
Investment fund issuer									
Issuer (other than an inves	stment fund)								
Item 3 - Issuer Name and Oth									
Provide the following information about the		vestment fund, about the fund							
Full legal name	Evergreen Medicinal S								
	[
	Previous full legal name If the issuer's name changed in the last 12 months, provide most recent previous legal name.								
Website	www.evergreenmedicir		(if applicable)						
	_								
If the issuer has a legal entity identifier, pro Legal entity identifier			of legal entity identifier .						
ITEM 4 - UNDERWRITER INFORM	ATION								
If an underwriter is completing the report, p	provide the underwriter's full le	gal name and firm National Reg	istration Database (NRD) number.						
Full legal name									
Firm NRD number		(if applicable)							
If the underwriter does not have a firm NRL	D number, provide the head off	ice contact information of the ur	nderwriter.						
Street address									
Municipality]	Province/State							
Country		Postal code/Zip code							
Telephone number	I	Website							
		vvedsite	(if applicab	ie)					

ITEM 5 - ISSUER INFORMATION
If the issuer is an investment fund, do not complete Item 5. Proceed to Item 6.
a) Primary industry
Provide the issuer's North American Industry Classification Standard (NAICS) code (6 digits only) that corresponds to the issuer's primary business activity. For more information on finding the NAICS industry code go to Statistics Canada's NAICS industry search tool.
NAICS industry code 1 1 1 9 9 9
If the issuer is in the mining industry , indicate the stage of operations. This does not apply to issuers that provide services to issuers operating in the mining industry. Select the category that best describes the issuer's stage of operations. Exploration Development Production
Is the issuer's primary business to invest all or substantially all of its assets in any of the following? If yes, select all that apply. Mortgages Real estate Commerial/business debt Consumer debt Private companies
b) Number of employees
Number of employees: 🔽 0 - 49 🗌 50 - 99 🗌 100 - 499 🔲 500 or more
c) SEDAR profile number
Does the issuer have a SEDAR profile?
NoYesIf yes, provide SEDAR profile number0042791
If the issuer does not have SEDAR profile complete item 5(d) - (h).
d) Head office address
Street address Province/State
Municipality Postal code/Zip code
Country Telephone number
e) Date of formation and financial year-end
Date of formation Financial year-end YYYY MM DD
f) Reporting issuer status
Is the issuer a reporting issuer in any jurisdication of Canada? 🔲 No 🗌 Yes
If yes, select the jurisdictions of Canada in which the issuer is a reporting issuer.
g) Public listing status
If the issuer has a CUSIP number, provide below (first 6 digits only)
CUSIP number
If the issuer is publicly listed, provide the names of all exchanges on which its securities are listed. Include only the names of exchanges for which the issuer has applied for and received a listing, which excludes, for example, automated trading systems.
Exchange name(s):
h) Size of issuer's assets
Select the size of the issuer's assets for its most recent financial year-end (Canadian \$). If the issuer has not existed for a full financial year, provide the size of the issuer's assets at the distribution end date.
□ \$0 to under \$5M □ \$5M to under \$25M □ \$25M to under \$100M
□ \$100M to under \$500M □ \$500M to under \$1B □ \$1B or over

ITEM 6 - INVESTMEN	t Fund Issuer Information								
If the issuer is an invest	tment fund, provide the following information.								
a) Investment fund m	anager information								
Full legal name									
Firm NRD number	(if applicable)								
If the investment fund ma	nager does not have a firm NRD number, provide the head office contact information of the investment fund manager.								
Street address									
Municipality	Province/State								
Country	Postal code/Zip code								
Telephone number	Website (if applicable)								
b) Type of investmen	t fund								
Type of investment fund the	at most accurately identifies the issuer (select only one) .								
Money market	Equity Fixed income								
Balanced	Alternative strategies Other (describe)								
Indicate whether one or bot	h of the following apply to the investment fund .								
Invests primarily in	n other investment fund issuers								
Is a UCITs Fund ¹	ive Investment of Transferable Securities funds (UCITs Funds) are investment funds regulated by the European Union (EU)								
directives that allow collecti	ve investment of transferable securities tands (och's runds) are investment tands regulated by the European onion (EO) ve investment schemes to operate throughout the EU on a passport basis on authorization from one member state.								
c) Date of formation a	and financial year-end of the investment fund								
Date of forma	tion Financial year-end MM DD MM DD								
d) Reporting issuer s	tatus of the investment fund								
Is the investment fund a rep	porting issuer in any jurisdication of Canada? 🔲 No 🗌 Yes								
If yes, select the jurisdictions	of Canada in which the investment fund is a reporting issuer. AB BC MB NB NL NT								
	s of the investment fund								
If the investment fund has a	a CUSIP number, provide below (first 6 digits only)								
	CUSIP number								
	blicly listed, provide the names of all exchanges on which its securities are listed. Include only the names of exchanges for I for and received a listing, which excludes, for example, automated trading systems.								
Exchange nam	les								
f) Net asset value (NA	AV) of the investment fund								
-	investment fund as of the date of the most recent NAV calculation (Canadian \$).								
\$0 to under \$5M	\$5M to under \$25M \$25M to under \$100M								
\$100M to under \$50									
	YYYY MM DD								

ITEM 7 - INFORMATION A	BOUT THE DISTRIBUTIO	N						
If an issuer located outside of Cana purchasers resident in that jurisdict should be disclosed in Item 8. The i	ion of Canada only. Do not incl	ude in Ite	em 7 securitie	es issued as	s payment of c	commissio	ons or fin	der's fees, which
a) Currency	·····				F			
Select the currency or currencies in	which the distribution was mad	le. All do	llar amounts	provided ii	n the report m	ust be in	Canadia	n dollars.
🖌 Canadian dollar	US dollar 🛛 Euro)	Other (describe)			
b) Distribution date(s)								
State the distribution start and en as both the start and end dates. If distribution period covered by the	the report is being filed for secu							
Start da	ate 2018 02 01 YYYY MM DD			End date	2018 YYYY	02 MM	01 DD	
c) Detailed purchaser inform	nation							
Complete Schedule 1 of this f	orm for each purchaser an	d attac	h the sched	dule to tl	he complete	ed repor	t.	
d) Types of securities distrib	outed							
Provide the following information Instructions for how to indicate th distributed. The information inclu <u>Asked Questions.</u>	ne security code. If providing the	e CUSIP r	, number, indic	ate the ful	I 9-digit CUSIF	P number	assigned	to the security being
						(Canadian \$	3
Security code CUSIP number (if applicable)	Description of security		Numbe securit		Single or lowest price	Highe	est price	Total amount
C M S Co	mmon shares of the Issu	ier	30	,000.00	3.250	0		97,500.00
e) Details of rights and conv	/ertible/exchangeable secu	rities						
If any rights (e.g. warrants, option were distributed, provide the con							vertible/e	xchangeable securities
Security Underlying code security code	Exercise price (Canadian \$) Lowest Highest		ry date - MM-DD)	Conversi ratio		cribe othe	er items (if	applicable)
f) Summary of the distribution	on by jurisdiction and exem	ntion						
State the total dollar amount of s purchaser resides and for each ex distribution in a jurisdiction of Ca This table requires a separate line purchaser resides, if a purchaser r jurisdiction. For jurisdictions within Canada, s	ecurities distributed and the nur emption relied on in Canada for nada, include distributions to pu item for: (i) each jurisdiction w esides in a jurisdiction of Canad	mber of p r that dis urchasers here a pu la, and (i	tribution. Hou s resident in ta ırchaser resid ii) each exem	wever, if an hat jurisdid les, (ii) each ption relie	n issuer locate ction of Canad h exemption r	d outside la only. elied on i	e of Canac in the juri:	da completes a sdiction where a
Province or country	Exemption	relied on			Number of purchasers	1	Fotal amou	int (Canadian \$)
British Columbia	NI 45-106 2.30 [Isolated issuer]	d distril	oution by			1		97,500.00
	1	otal dol	lar amount o	of securit	ies distribute	ed		97,500.00
	Total numb	per of ur	ique purcha	asers ²		1		
² In calculating the total number of the issuer distributed multiple types types the issuer distributed mul						chaser on	nly once, r	regardless of whether

g) Net proceeds to the investment fund by jurisdiction

If the issuer is an investment fund, provide the net proceeds to the investment fund for each jurisdiction of Canada and foreign jurisdiction where a purchaser resides.³ If an issuer located outside of Canada completes a distribution in a jurisdiction of Canada, include net proceeds for that jurisdiction of Canada only. For jurisdictions within Canada, state the province or territory, otherwise state the country.

Province or country	Net proceeds (Canadian \$)
Total net proceeds to the investment fund	

³"Net proceeds" means the gross proceeds realized in the jurisdiction from the distributions for which the report is being filed, less the gross redemptions that occurred during the distribution period covered by the report.

h) Offering materials - This section applies only in Saskatchewan, Ontario, Québec, New Brunswick and Nova Scotia.

If a distribution has occurred in Saskatchewan, Ontario, Québec, New Brunswick or Nova Scotia, complete the table below by listing the offering materials that are required under the prospectus exemption relied on to be filed with or delivered to the securities regulatory authority or regulator in those jurisdictions.

In Ontario, if the offering materials listed in the table are required to be filed with or delivered to the Ontario Securities Commission (OSC), attach an electronic version of the offering materials that have not been previously filed with or delivered to the OSC.

Description	Date of document or other material (YYYY-MM-DD)	Previously filed with or delivered to regulator? (Y/N)	Date previously filed or delivered (YYYY-MM-DD)

ITEM 8 - COMPENSATION INFORMATION
Provide information for each person (as defined in NI 45-106) to whom the issuer directly provides, or will provide, any compensation in connection with the distribution. Complete additional copies of this page if more than one person was, or will be, compensated.
Indicate whether any compensation was paid, or will be paid, in connection with the distribution.
✓ No Yes If yes, indicate number of persons compensated.
a) Name of person compensated and registration status
Indicate whether the person compensated is a registrant.
If the person compensated is an individual, provide the name of the individual.
Full legal name of individual
Family name First given name Secondary given names
If the person compensated is not an individual, provide the following information.
Full legal name of non-individual
Firm NRD number (if applicable)
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal.
b) Business contact information
If a firm NRD number is not provided in Item 8 (a), provide the business contact information of the person being compensated.
Street address
Municipality Province/State
Country Postal code/Zip code
Email address Telephone number
 c) Relationship to issuer or investment fund manager Indicate the person's relationship with the issuer or investment fund manager (select all that apply). Refer to the meaning of "connected" in Part
B(2) of the Instructions and the meaning of "control" in section 1.4 of NI 45-106 for the purposes of completing this section.
Connect with the issuer or investment fund manager Insider of the issuer (other than an investment fund)
Director or officer of the investment fund or investment fund manager Employee of the issuer or investment fund manager
None of the above
d) Compensation details
Provide details of all compensation paid, or to be paid, to the person identified in Item 8(a) in connection with the distribution. Provide all amounts in Canadian dollars. Include cash commissions, securities-based compensation, gifts, discounts or other compensation. Do not report payments for services incidental to the distribution, such as clerical, printing, legal or accounting services. An issuer is not required to ask for details about, or report on, internal allocation arrangements with the directors, officers or employees of a non-individual compensated by the issuer.
Cash commissions paid Security codes Security code 1 Security code 2 Security code 3
Value of all securities distributed as compensation ⁴
Describe terms of warrants, options or other rights
Other compensation ⁵ Describe
Total compensation paid
Check box if the person will or may receive any deferred compensation (describe the terms below)
⁴ Provide the aggregate value of all securities distributed as compensation, <u>excluding</u> options, warrants or other rights exercisable to acquire additional securities of the issuer. Indicate the security codes for all securities distributed as compensation, <u>including</u> options, warrants or other rights exercisable to acquire additional securities of the issuer. ⁵ Do not include deferred compensation.

Item	9 - DIRECTORS, EXECUTI	VE OFFICERS A	ND PROMO	TERS OF THE ISS	SUER					
lf t	he issuer is an investment fund, o	lo not complete It	em 9. Procced to	o Item 10.						
Ind	icate whether the issuer is any of th	e following (select d	ıll that apply).							
[Reporting issuer in any jurisdic	tion of Canada								
[Foreign public issuer									
[Wholly owned subsidiary of a r	eporting issuer in a	ny jurisdiction of	^f Canada ⁶						
	Provide name o	of reporting issuer								
[Wholly owned subsidiary of a f	oreign public issue	r ⁶							
	Provide name of for	eign public issuer								
[Issuer distributing eligible forei	gn securities only t	o permitted clien	ts ⁷						
lf t	he issuer is at least one of the ab	ove, do not compl	ete Item 9(a) –	(c). Proceed to Item	10.					
secu ⁷ Chu clien [a)	issuer is a wholly owned subsidiary urities that are required by law to be each this box if it applies to the currents. Refer to the definitions of "eligit If the issuer is none of the ab Directors, executive officers a rovide the following information for rritory; otherwise state the country.	e owned by its direct out distribution ever ble foreign security ove, check this bound and promoters of each director, execu	ctors, are benefic on if the issuer man " and "permitted on and complete the issuer utive officer and p	ially owned by the re de previous distribut client" in Part B(1) or Item 9(a) - (c).	eporting issuer tions of other ty, f the Instruction r. For locations	or the foreig pes of secur is. within Canad	rities to	lic issue o non-p	er, respec ermitted	ctively.
	Organization or company name	Family name	First given name	Secondary given names	Business lo non-indivio resider jurisdicti indivio	dual or ntail on of dual		ationshi issuer lect all t apply)	that	
					Province of	r country	D	0	Р	
		Galbraith	Shawn	Scott	British Colum	nbia	✓	✓	✓	
		Galbraith	Michael	Brent	British Colum	nbia	✓		✓	
b)	Promoter information									
If the promoter listed above is not an individual, provide the following information for each director and executive officer of the promoter. For locations within Canada, state the province or territory; otherwise state the country. For "Relationship to promoter", "D" – Director, "O" – Executive Officer.										
	Organization or company name	Family name	First given name	Secondary given j names	jurisdiction of individual (select one or both if applica					
					Province or country	D		C)	

c) Residential address of each individual

Complete Schedule 2 of this form providing the full residential address for each individual listed in Item 9(a) and (b) and attach to the completed report. Schedule 2 also requires information to be provided about control persons.

ITEM 10 - CERTIFICATION

Provide the following certification and business contact information of an officer or director of the issuer or underwriter. If the issuer or underwriter is not a company, an individual who performs functions similar to that of a director or officer may certify the report. For example, if the issuer is a trust, the report may be certified by the issuer's trustee. If the issuer is an investment fund, a director or officer of the investment fund manager (or, if the investment fund manager is not a company, an individual who performs similar functions) may certify the report if the director or officer has been authorized to do so by the investment fund.

The certification may not be delegated to an agent or other individual preparing the report on behalf of the issuer or underwriter. If the individual completing and filing the report is different from the individual certifying the report, provide their name and contact details in Item 11.

The signature on the report must be in typed form rather than handwritten form. The report may include an electronic signature provided the name of the signatory is also in typed form.

IT IS AN OFFENCE TO MAKE A MISREPRESENTATION IN THIS REPORT

By completing the information below, I certify to the securities regulatory authority or regulator that:

- I have read and understand this report; and
 - all of the information provided in this report is true.

Full legal name	Galbraith	Shawn			
	Family name First given name		9	Secondary giv	en names
Title	President and Director				
Name of issuer/underwriter/ investment fund manager	Evergreen Medicinal Supply Inc.				
Telephone number	Email address evergreenmedicinalsupply@gmai .com				
Signature	Shawn Galbraith	Date	2018	02	21
			YYYY	MM	DD

ITEM 11- CONTACT PERSON Provide the following business contact information for the individual that the securities regulatory authority or regulator may contact with any questions regarding the contents of this report, if different than the individual certifying the report in Item 10. Same as individual certifying the report Full legal name Title Solicitor McLeod John Secondary given Family name First given name names Name of company Reed Pope Law Corporation Email address imcleod@reedpope.ca Telephone number 2502139932 Notice - Collection and use of personal information The personal information required under this form is collected on behalf of and used by the securities regulatory authority or regulator under the authority granted in securities legislation for the purposes of the administration and enforcement of the securities legislation. If you have any questions about the collection and use of this information, contact the securities regulatory authority or regulator in the local jurisdiction(s) where the report is filed, at the address(es) listed at the end of this form. The attached Schedules 1 and 2 may contain personal information of individuals and details of the distribution(s). The information in Schedules 1 and 2 will not be placed on the public file of any securities regulatory authority or regulator. However, freedom of information legislation may require the securities regulatory authority or regulator to make this information available if requested. By signing this report, the issuer/underwriter confirms that each individual listed in Schedule 1 or 2 of the report who is resident in a jurisdiction of Canada:

- a) has been notified by the issuer/underwriter of the delivery to the securities regulatory authority or regulator of the information pertaining to the individual as set out in Schedules 1 or 2, that this information is being collected by the securities regulatory authority or regulator under the authority granted in securities legislation, that this information is being collected for the purposes of the administration and enforcement of the securities legislation of the local jurisdiction, and of the title, business address and business telephone number of the public official in the local jurisdiction, as set out in this form, who can answer questions about the security regulatory authority's or regulator's indirect collection of the information, and
- b) has authorized the indirect collection of the information by the securities regulatory authority or regulator.