# 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 amen	ided, provide filing date	of report that is being am	ended (YYYY-MM-DD)			
ITEM 2 - PARTY CERTIFYING THE	REPORT					
	Indicate the party certifying the report (select only one). For guidance regarding whether an issuer is an investment fund, refer to section 1.1 of National Instrument 81-106 Investment Fund Continuous Disclosure and the companion policy to NI 81-106.					
☐ Investment fund issuer						
✓ Issuer (other than an inves	stment fund)					
Underwriter						
ITEM 3 - ISSUER NAME AND OTH	HER IDENTIFIERS					
Provide the following information about the	e issuer, or if the issuer is an in	vestment fund, about the fund.				
Full legal name	Imagin Medical Inc.					
Previous full legal name						
If the issuer's name changed in	the last 12 months, provide mo	ost recent previous legal name.				
Website			(if applicable)			
If the issuer has a legal entity identifier∠ pro	vide below. Refer to Part B of t	the Instructions for the definition	of "legal entity identifier".			
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 Nationai кед 	istration Database (NRD) number.			
Full legal name						
Firm NRD number		(if applicable)				
If the underwriter does not have a firm NRE	If the underwriter does not have a firm NRD number, provide the head office contact information of the underwriter.					
Street address						
Municipality		Province/State				
Country		Postal code/Zip code				
Telephone number		Website	(if applicable)			

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 <b>Statistics Canada's NAICS industry search tool</b> .
NAICS industry code 3 3 9 1 1 0
If the issuer is in the <b>mining industry</b> , 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.
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 Commercial/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?
No  ✓ Yes If yes, provide SEDAR profile number  0 0 0 0 5 6 5 0
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 MM DD 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.
☐ AII ☐ AB ☐ BC ☐ MB ☐ NB ☐ NL ☐ NT
NS NU ON PE QC SK YT
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 - INVESTMENT	Fund Issuer Information				
If the issuer is an investm	ent fund, provide the following information.				
a) Investment fund man	ager information				
Full legal name					
Firm NRD number	(if applicable)				
If the investment fund mana	ger 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 investment for	und				
Type of investment fund that r	nost accurately identifies the issuer (select only one) .				
Money market	Equity Fixed income				
Balanced	Alternative strategies Other (describe)				
Indicate whether one or both c	of the following apply to the investment fund .				
Invests primarily in o	other investment fund issuers				
☐ Is a UCITs Fund¹					
**Undertaking for the Collective	Investment of Transferable Securities funds (UCITs Funds) are investment funds regulated by the European Union (EU)				
	investment schemes to operate throughout the EU on a passport basis on authorization from one member state.				
c) Date of formation and financial year-end of the investment fund					
Date of formatio	n Financial year-end MM DD MM DD				
d) Reporting issuer stat	us of the investment fund				
Is the investment fund a repor	ting issuer in any jurisdication of Canada? No Yes				
· · · <u></u> · · · · <u></u> ·	Canada in which the investment fund is a reporting issuer.				
	AB BC MB NB NL NT				
	NU ON PE QC SK YT				
-	of the investment fund				
	If the investment fund has a CUSIP number, provide below (first 6 digits only)				
CUSIP number					
	cly listed, provide the names of all exchanges on which its securities are listed. Include only the names of exchanges for or and received a listing, which excludes, for example, automated trading systems.				
Exchange names					
f) Net asset value (NAV	() of the investment fund				
Select the NAV range of the in	vestment 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 \$500M	\$500M to under \$1B S1B or over Date of NAV calculation:				
	YYYY MM DD				

TEN	17 - Information A	OUT THE DISTRIBU	TION						
purc	n issuer located outside of Canac chasers resident in that jurisdiction Ild be disclosed in Item 8. The in	on of Canada only. Do not	include in Ite	m 7 securities iss	ued as	s payment of co	nmissions or find	der's fees, which	
a)	Currency								
Sele	ct the currency or currencies in v	which the distribution was	made. All dol	lar amounts prov	ided ii	n the report mus	t be in Canadiar	n dollars.	
<u></u>	Canadian dollar	US dollar 🔲 E	Euro	Other (des	cribe	)			
b)	Distribution date(s)								
as	State the distribution start and end dates. If the report is being filed for securities distributed on only one distribution date, provide the distribution date as both the start and end dates. If the report is being filed for securities distributed on a continuous basis, include the start and end dates for the distribution period covered by the report.  Start date  2018 03 07  YYYY MM DD  End date 2018 03 07  YYYY MM DD								
c)	Detailed purchaser inform	ation							
Con	plete Schedule 1 of this fo	orm for each purchase	r and attac	h the schedul	to th	he completed	report.		
d)	Types of securities distrib	uted							
In di	ovide the following information structions for how to indicate th stributed. The information included sked Questions.	e security code. If providing	g the CUSIP n	umber, indicate	he ful	l 9-digit CUSIP r	umber assigned	to the security l	_
							Canadian \$	i	
	Security CUSIP number (if applicable)	Description of security	у	Number of securities		Single or lowest price	Highest price	Total amour	nt
	C M S 45250L Cor	nmon Shares		888,889,00	0.00	0.2700		240,00	0.00
e) Details of rights and convertible/exchangeable securities									
	any rights (e.g. warrants, options	<del></del>				-	•	xchangeable sec	urities
We	Security Underlying code security code	Exercise price (Canadian \$)  Lowest Highest	Expi		onvers ratio	ion	ibe other items (if	applicable)	
f)	Summary of the distribution	n by jurisdiction and ex	emption						
pu dis Th pu jui	ate the total dollar amount of se irchaser resides and for each exe stribution in a jurisdiction of Car is table requires a separate line irchaser resides, if a purchaser re risdiction. r jurisdictions within Canada, st	curities distributed and the emption relied on in Canad nada, include distributions item for: (i) each jurisdictic esides in a jurisdiction of Co	e number of p la for that dis to purchasers on where a pu anada, and (i	tribution. Howeve resident in that j rchaser resides, ( ii) each exemptio	er, if an iurisdic ii) eac	n issuer located o ction of Canada h exemption reli	outside of Canad only. ed on in the juris	la completes a sdiction where a	
	Province or country	Exemp	otion relied on			Number of purchasers	Total amou	nt (Canadian \$)	
	British Columbia	Other				2		190,000	.00
	Alberta	Other				1		50,000	.00
			Total dol	lar amount of s	ecurit	ies distributed		240,000	.00
		Total n	umber of un	ique purchaser	s <sup>2</sup>	3			

<sup>2</sup>In calculating the total number of unique purchasers to which the issuer distributed securities, count each purchaser only once, regardless of whether the issuer distributed multiple types of securities to, and relied on multiple exemptions for, that purchaser.

### 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. 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	

<sup>&</sup>lt;sup>3</sup>"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)

tem 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. <b>Complete additional copies of this page if more than one person was, or will be, compensated.</b>				
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.    No Yes				
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.	es			
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	7			
Email address Telephone number	<u>-</u>			
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 compensation⁴				
Describe terms of warrants, options or other rights	٦			
Other compensation <sup>5</sup> Describe	i			
Total compensation paid	_			
Check box if the person will or may receive any deferred compensation (describe the terms below)				
	]			
<sup>4</sup> 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. <sup>5</sup> Do not include deferred compensation.				

TEM 9 - DIRECTORS, EXECUTIVE OFF	ICERS AN	ID PROMOT	TERS OF THE IS	SSUER			
If the issuer is an investment fund, do not co	mplete Iten	n 9. Procced to	Item 10.				
Indicate whether the issuer is any of the followin	g (select all	that apply).					
Reporting issuer in any jurisdiction of Ca	anada						
Foreign public issuer							
Wholly owned subsidiary of a reporting i	ssuer in any	y jurisdiction of	Canada <sup>6</sup>				
Provide name of reporting	ng issuer						
Wholly owned subsidiary of a foreign pu	blic issuer <sup>6</sup>						
Provide name of foreign publ	lic issuer						
☐ Issuer distributing eligible foreign securit	ties only to p	permitted client	s <sup>7</sup>				
If the issuer is at least one of the above, do n	ot complet	e Item 9(a) – (	c). Proceed to Ite	m 10.			
<sup>6</sup> An issuer is a wholly owned subsidiary of a reposecurities that are required by law to be owned be a considerable. The characteristics of the current distribution of the current distribution of the considerable for eight	by its directo ution even if	ors, are benefic the issuer mad	ially owned by the de previous distrib	reporting issuer utions of other ty	or the foreig pes of secur	n public issu	ier, respectively.
If the issuer is none of the above, chec	k this box o	and complete	Item 9(a) - (c).				
a) Directors, executive officers and prom	noters of th	e issuer					
Provide the following information for each directerritory; otherwise state the country. For "Relat						da, state the	province or
Organization or company name Family	y name	First given name	Secondary given	Business lo non-individ resider jurisdicti individ	dual or ntail on of	Relations issue (select al apply	r I that
				Province o	r country	D O	Р
b) Promoter information						·	
If the promoter listed above is not an individual	l, provide the	e following info	rmation for each d	irector and execu	tive officer o	f the promo	ter. For locations
within Canada, state the province or territory; o	otherwise sta	ite the country.	For "Relationship t	o promoter", "D"	– Director, "(	O" – Executi	ve Officer.
Organization or company name Family		First given name	Secondary given names	Residential jurisdiction of individual		nship to proi or both if ap	
				Province or country	D		0
c) Residential address of each individua							_
Complete Schedule 2 of this form providing t	he full resid	dential addres	s for each individ	lual listed in Iter	n 9(a) and	(b) and atto	ich 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	Avelino	Jorge			
	Family name	First given name		Secondary given names	
Title	Authorized Signatory				
Name of issuer/underwriter/ investment fund manager	Imagin Medical Inc.				
Telephone number	7789985000	Email address ja	velino@	javell.ca	
Signature	"Jorge Avelino"	Date	2018	03	15
			YYYY	MM	DD

# ITEM 11- CONTACT PERSON

Telephone number 6046975606

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 indiv	vidual certifying the repor	t				
Full legal name	Lightfoot	Jeffrey	B.	Title	Solicitor	
	Family name	First given name	Secondary given names			
Name of company Owen Bird Law Corporation						

### Notice - Collection and use of personal information

Email address | jlightfoot@owenbird.com

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.