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 amended	I, provide filing date of report th	nat is being amended	(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 investment fund)									
Item 3 - Issuer Name and Other Identifiers									
Provide the following information about the issu		d, about the fund.							
Full legal name Re	liq Health Technologies Inc.								
Previous full legal name									
If the issuer's name changed in the lo	ast 12 months, provide most recent pre	vious legal name.							
Website ww	vw.reliqhealth.com	(if applicable)							
If the issuer has a legal entity identifier, provide	below. Refer to Part B of the Instructior	ns for the definition of "legal entity ide	entifier".						
ITEM 4 - UNDERWRITER INFORMATIO	ON								
		d fine National Desistantian Database							
If an underwriter is completing the report, provid	ae the underwriter's fuil legal name and	i firm National Registration Database	(INRD) humber.						
Full legal name									
Firm NRD number		(if applicable)							
If the underwriter does not have a firm NRD nur	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	l 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 Statistics Canada's NAICS industry search tool.								
NAICS industry code 5 4 1 5 1 4								
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.								
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. Image: Im								
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 2 2 9 7 5 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								
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								
S100M to under \$500M S500M to under \$1B \$1B or over								

ITEM 6 - INVESTMENT FUND ISSUER INFORMATION								
If the issuer is an investi	ment fund, provide the following information.							
a) Investment fund manager information								
Full legal name	Full legal name							
Firm NRD number	(if applicable)							
If the investment fund man	ager 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	fund							
Type of investment fund that	most accurately identifies the issuer (select only one) .							
Money market	Equity Fixed income							
Balanced	Alternative strategies Other (describe)							
Indicate whether one or both	of the following apply to the investment fund .							
Invests primarily in	other investment fund issuers							
Is a UCITs Fund ¹								
¹ Undertaking for the Collectiv directives that allow collective	re Investment of Transferable Securities funds (UCITs Funds) are investment funds regulated by the European Union (EU) e investment schemes to operate throughout the EU on a passport basis on authorization from one member state.							
	nd financial year-end of the investment fund							
Date of formati								
	YYYY MM DD MM DD							
d) Reporting issuer sta	atus of the investment fund							
	orting issuer in any jurisdication of Canada? 🔲 No 🗌 Yes							
If yes, select the jurisdictions of All	of Canada in which the investment fund is a reporting issuer. AB BC MB NL NT							
e) Public listing status	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								
If the investment fund 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 names								
f) Net asset value (NA	V) of the investment fund							
-	nvestment fund as of the date of the most recent NAV calculation (Canadian \$).							
\$0 to under \$5M	S5M to under \$25M \$25M to under \$100M							
\$100M to under \$500								
	YYYY MM DD							

ITEN	TEM 7 - INFORMATION ABOUT THE DISTRIBUTION																			
pur	If an issuer located outside of Canada completes a distribution in a jurisdiction of Canada, include in Item 7 and Schedule 1 information about purchasers resident in that jurisdiction of Canada only. Do not include in Item 7 securities issued as payment of commissions or finder's fees, which should be disclosed in Item 8. The information provided in Item 7 must reconcile with the information provided in Schedule 1 of the report.																			
a)	(Curre	ency	'																
Sele	ect t	he cu	rren	су о	r curr	encie	s in which	h the dis	stributio	on was	s maa	le. All doi	lar amounts	provideo	d in the	report mu	st be in	Canadiar	n dollars.	
V	2	Cana	adia	n do	ollar		US US	dollar			Euro)	Other	(descrik	be)					
b)					date(
																			the distributi d dates for the	
							the repor		being r		, 2000			contana	.045 545		the ste			
	Start date 2017 11 02 End date 2017 11 02																			
	YYYY MM DD YYYY MM DD																			
c)	0	Detai	led	purc	chase	er inf	formatio	n												
Con	npl	ete S	Sche	dul	e 1 c	of thi	is form	for eac	ch pur	chas	er ar	nd attac	h the sche	dule to	the co	ompleted	l repo	rt.		
d)	٦	Гуре	s of	sec	curitie	es dis	stributed	ł												
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<u>A</u>	ske	d Que	estio	<u>ns.</u>																
																	1	Canadian \$	i	
		ecurity code			P num plicab			Descr	iption of	secur	ity		Numbe securi		Single or lowest price		High	est price	Total amo	ount
								its comprised of one common			12,500	12,500,000.00 0.400		0.4000	0.4000 5,000,00		00.00			
		В	s					re and one-half of one share chase warrant												
e)		Detai	ls o	f ria	hts a		onvertib			ables	secu	rities					1]
lf	any	right	ts (e.	g. w	arran	ts, op	tions) we	re distri	buted, p	provid	le the	exercise							xchangeable s	securities
W							conversio		and de: se price	scribe	any a		ns for each c			ingeable s	ecurity.			
		Secur cod			nderly curity				dian \$)				ry date - MM-DD)	Conve ra	ersion Itio	Desc	ribe oth	er items (if a	applicable)	
		-	1		-		Lowe		Hiệ	ghest										-
	W	/ N	Т	c	м	s	0.6	6000		0.60	000	2019	-11-02	1:1				nts are exercisable into ditional common share		
																		of 24 m		
f)	S	umn	nary	of t	the d	listrib	oution by	/ jurisd	iction a	and e	exem	ption								
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													tribution. Ho resident in t					e of Canaa	la completes d	7
Τŀ	nis t	able i	requ	ires (a sep	arate	line item	for: (i) e	each jui	risdict	ion w	here a pu	ırchaser resid	les, (ii) e	each exe	mption re	lied on		diction where	
		iction		es, i	j a pu	ircnus	ser resides	s in a ju	risaicii	ט ומ	Lana	<i>ua, una</i> (i	u) each exem	приот те	ellea ori	in Canaac	ι, <i>ι</i> ן α ρι	irchuser re	esides in a fore	eign
Fo	or ju	risdic	tion	s wit	thin C	Canad	la, state th	he provi	ince or	territo	ry, ot	herwise s	tate the cour	ntry.			_			
				ovino coun	ce or try						-	relied on				ber of hasers		Total amou	nt (Canadian \$	
		Br	itish	n Co	olum	nbia	NI 4	45-10	6 2.3	[Acc	redit	ed inve	estor]			19)		995,00	0.00
			A	lbe	rta		NI 4	45-10	6 2.3	[Acc	redit	ed inve	estor]			5	5		150,00	0.00
			Q	ué	bec		NI 4	45-10	6 2.3	[Acc	redit	ed inve	estor]			14	ŀ		155,00	0.00
			C)nta	ario		NI 4	45-10	6 2.3	[Acc	redit	ed inve	estor]			47	7		2,900,00	0.00
			A	ustr	alia		NI 4	45-10	6 2.3	[Acc	redit	ed inve	estor]			1			300,00	0.00
		Ca	aym	an	Islar	nds	NI 4	45-10	6 2.3	[Acc	redit	ed inve	estor]			1			500,00	0.00
												Fotal dol	lar amount	of secu	rities d	istributed	1		5,000,00	0.00
									٦	Total I	numl	per of un	ique purcha	asers ²		87	7			

²In 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.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)

EM 8 - COMPENSATION	INFORMATION
	on (as defined in NI 45-106) to whom the issuer directly provides, or will provide, any compensation in connection additional copies of this page if more than one person was, or will be, compensated.
Indicate whether any compensatio	on was paid, or will be paid, in connection with the distribution.
🗌 No 🗹 Yes	If yes, indicate number of persons compensated. 3
· · · ·	sated and registration status
Indicate whether the person co	ompensated is a registrant. No Ves
If the person compensated is an i	individual, provide the name of the individual.
Full legal name of individu	ial
	Family name First given name Secondary given names
	at an individual, provide the following information.
Full legal name of	non-individual Canaccord Genuity Corp.
Firm	NRD number 9 0 0 (if applicable)
Indicate whether the person cor	mpensated facilitated the distribution through a funding portal or an internet-based portal. 🛛 🔽 No 🔲 Y
b) Business contact informa	ation
If a firm NRD number is not prov	ided 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
	neaning of "control" in section 1.4 of NI 45-106 for the purposes of completing this section.
	investment fund or investment fund manager
\checkmark None of the above	
, ,	on paid, or to be paid, to the person identified in Item 8(a) in connection with the distribution. Provide all amounts i
Canadian dollars. Include cash co services incidental to the distribut	ommissions, securities-based compensation, gifts, discounts or other compensation. Do not report payments for tion, such as clerical, printing, legal or accounting services. An issuer is not required to ask for details about, or repo ents with the directors, officers or employees of a non-individual compensated by the issuer.
Cash commissions paid	161,500.00 Security codes Security code 1 Security code 2 Security code 3
Value of all securities	
distributed as compensation ⁴	118,750.00
Describe term	August 2015 August
Other compensation ⁵	Describe
Other compensation ⁵ Total compensation paid	Describe 280,250.00
Total compensation paid	
Total compensation paid	280,250.00

⁵Do not include deferred compensation.

a) Name of person com	pensated and registra	tion status						
Indicate whether the perso	n compensated is a regis	trant.	No No	✓ Yes				
If the person compensated is	If the person compensated is an individual, provide the name of the individual.							
Full legal name of indiv	Full legal name of individual							
	Family	name	First given na	me s	Secondary given name	<u> </u>		
If the person compensated i	s not an individual, provi	de the following in	nformation.					
Full legal name	of non-individual Be	acon Securities	Limited					
	irm NRD number	1 5 5	4 0	(if a	applicable)			
	L				_	7 No □ Yes		
b) Business contact info	•			at or an internet-	basea portat.			
If a firm NRD number is not		ovide the business	contact information	of the person beir	a compensated.			
Street address								
			1	Province/Sta	to			
Municipality]					
Country			Post	tal code/Zip co	de			
Email address			Τε	elephone numb	er			
c) Relationship to issuer	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.							
	-							
	uer or investment fund m	-			(other than an inves	,		
	the investment fund or in	ivestment fund ma	anager <u> </u>	ployee of the iss	uer or investment fu	nd manager		
✓ None of the above								
d) Compensation details								
Provide details of all compens Canadian dollars. Include cas								
services incidental to the distr	ibution, such as clerical,	printing, legal or d	accounting services. A	n issuer is not req	uired to ask for detai			
on, internal allocation arrang	ements with the directors	s, officers or emplo	oyees of a non-individ	ual compensated	by the issuer.			
Cash commissions pa	aid 17,000.	00	Security codes	Security code	1 Security code 2	Security code 3		
Value of all securitie distributed		00		СМ	S U B S	W N T		
compensatio	12,000.							
Describe	terms of warrants, optior	ns or other rights			o a unit at \$0.40 p			
					1 share & 1/2 of 1 are and 1/2 of 1 wa			
	31,250 Units comprised of 1 share and 1/2 of 1 warrant. Each whole warrant is exercisable into a share at \$0.60 until							
Otherseense the		Describe	11/2/2019					
Other compensation		=						
	- ,		anonestion (describe	the terms helow				
	erson will or may receive	any deletted con	inperisation (describe		1			
	, , , , ,							
⁴ Provide the aggregate valu additional securities of the is								

rights exercisable to acquire additional securities of the issuer. ⁵Do not include deferred compensation.

a) Name of person com	pensated and registration status								
Indicate whether the perso	on compensated is a registrant.	No .	🖌 Yes						
If the person compensated is	If the person compensated is an individual, provide the name of the individual.								
Full legal name of indiv	Full legal name of individual								
	Family name	First given nam	ie Seco	ondary given names					
If the person compensated i	is not an individual, provide the following	information.							
Full legal name	of non-individual Gravitas Securiti	es Inc.							
F	Firm NRD number 2 6 2	2 6 0	(if app	licable)					
Indicate whether the person	compensated facilitated the distribution	through a funding porta	l or an internet-bas	ed portal. 🗹 No 🗌 Ye					
b) Business contact info	ormation								
If a firm NRD number is not	provided in Item 8 (a), provide the busine	ss contact information of	f the person being c	ompensated.					
Street address									
Municipality		7	Province/State						
Country		_ Posta	al code/Zip code						
Email address			ephone number						
c) Relationship to issue	r or investment fund manager		·						
	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 t	he meaning of "control" in section 1.4 of I	NI 45-106 for the purpos	es of completing th	is section.					
Connect with the issu	uer or investment fund manager	Insid	ler of the issuer (ot	her than an investment fund)					
Director or officer of	the investment fund or investment fund r	nanager 🗌 Emp	loyee of the issuer	or investment fund manager					
None of the above									
d) Compensation details	3								
Canadian dollars. Include cas services incidental to the distr	sation paid, or to be paid, to the person ia sh commissions, securities-based compens ribution, such as clerical, printing, legal or rements with the directors, officers or emp	ation, gifts, discounts or accounting services. An	other compensation issuer is not require	n. Do not report payments for ed to ask for details about, or report					
Cash commissions pa	aid 161,500.00	Security codes	Security code 1	Security code 2 Security code 3					
Value of all securiti		Occurry codes	с м ѕ	U B S W N T					
distributed a compensation	110,700.00								
Describe terms of warrants, options or other rights 403,750 Warrants exercisable into a unit at \$0.40 per unit until 11/2/2019. Each unit consists of 1 share & 1/2 of 1 warrant. 296,875 Units comprised of 1 share and 1/2 of 1 warrant. Each whole warrant is exercisable into a share at \$0.60 until 11/2/2019									
Other compensation	on ⁵ Describe								
Total compensation pa	aid 280,250.00								
Check box if the pe	erson will or may receive any deferred co	mpensation (describe t	he terms below)						
	e of all securities distributed as compension								
additional securities of the is	ssuer. Indicate the security codes for all .	securities distributed as	compensation, inc.	luding options, warrants or other					

rights exercisable to acquire additional securities of the issuer. ⁵Do not include deferred compensation.

Item 9	- DIRECTORS, EXECUTIV	/E OFFICERS A	ND PROMO	TERS OF THE I	SSUER					
If the issuer is an investment fund, do not complete Item 9. Procced to Item 10.										
Indicat	te whether the issuer is any of the	e following (select a	ll that apply).							
\checkmark	Reporting issuer in any jurisdic	tion of Canada								
	Foreign public issuer									
	Wholly owned subsidiary of a reporting issuer in any jurisdiction of Canada ⁶									
	Provide name of reporting issuer									
	Wholly owned subsidiary of a foreign public issuer ⁶									
	Provide name of for	eign public issuer								
	Issuer distributing eligible foreig	on securities only to	permitted clien	ts ⁷						
If the	issuer is at least one of the ab	ove, do not compl	ete Item 9(a) –	(c). Proceed to Ite	m 10.					
securitie ⁷ Check	⁶ An issuer is a wholly owned subsidiary of a reporting issuer or a foreign public issuer if all of the issuer's outstanding voting securities, other than securities that are required by law to be owned by its directors, are beneficially owned by the reporting issuer or the foreign public issuer, respectively. ⁷ Check this box if it applies to the current distribution even if the issuer made previous distributions of other types of securities to non-permitted clients. Refer to the definitions of "eligible foreign security" and "permitted client" in Part B(1) of the Instructions.									
a) D	Virectors, executive officers a	nd promoters of	the issuer							
	de the following information for ory; otherwise state the country. I						da, sta	te the p	province or	
ο	rganization or company name	Family name	First given name	Secondary give names	Business lo non-indivio residen jurisdicti indivio	dual or ntail ion of	Relationship to issuer (select all that apply)		that	
					Province o	r country	D	0	Р	
b) P	romoter information		·							
	promoter listed above is not an n Canada, state the province or t		-				-			
0	rganization or company name	Family name	First given name	Secondary given names	Residential jurisdiction of individual	Relatio (select one				
				Province or country D O)			
c) R	esidential address of each ir	ndividual								
Compl	lete Schedule 2 of this form pro	oviding the full res	sidential addre	ss for each individ	lual listed in Ite	m 9(a) and	(b) an	d atta	:h 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	Beukman	Eugene					
	Family name	First given name	Secondary given names				
Title	Director						
Name of issuer/underwriter/ investment fund manager	Reliq Health Technologies Inc.						
Telephone number	6046872038	Email address ebeukma	an@pendergroup.ca				
Signature	"Eugene Beukman"	Date 2017	11 08				
		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.

 \checkmark Same as individual certifying the report

Full legal name				Title
	Family name	First given name	Secondary given names	
Name of company				
Telephone number		E	mail address	

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.