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 identifier₄ 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	rovide 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 NRE) number, provide the head off	fice contact information of the ur	nderwriter.						
Street address	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 Statistics Canada's NAICS industry search tool .							
NAICS industry code 3 3 9 1 1 0							
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. 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	T FUND ISSUER INFORMATION
If the issuer is an invest	ment fund, provide the following information.
a) Investment fund ma	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 Province/State
Country	Postal code/Zip code
Telephone number	Website (if applicable)
b) Type of investment	fund
Type of investment fund tha	t most accurately identifies the issuer (select only one) .
☐ Money market	☐ Equity ☐ Fixed income
☐ Balanced	Alternative strategies Other (describe)
Indicate whether one or boti	h of the following apply to the investment fund .
☐ Invests primarily in	other investment fund issuers
☐ Is a UCITs Fund¹	
	ve Investment of Transferable Securities funds (UCITs Funds) are investment funds regulated by the European Union (EU) re 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 format	
d) Reporting issuer st	YYYY MM DD MM DD atus of the investment fund
, 1	
	orting issuer in any jurisdication of Canada? No Yes of Canada in which the investment fund is a reporting issuer.
All	AB BC MB NB NL NT
□ NS □	NU ON PE QC SK TT
e) Public listing status	s of the investment fund
If the investment fund has a	CUSIP number, provide below (first 6 digits only)
	CUSIP number
	olicly listed, provide the names of all exchanges on which its securities are listed. Include only the names of exchanges for for and received a listing, which excludes, for example, automated trading systems.
Exchange nam	es
f) Net asset value (NA	AV) of the investment fund
Select the NAV range of the	investment fund as of the date of the most recent NAV calculation (Canadian \$). \$5M to under \$25M \$25M to under \$100M
\$100M to under \$500	DM \$500M to under \$1B \$1B or over Date of NAV calculation: YYYY MM DD

rem 7 - Information About the Distribution									
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) Currency									
Select the currency or currencies in wh	ich the distrii	bution wa	s made. A	All dollar amounts provided in t	he report n	nust be in	Canadian	ı dollars.	
✓ Canadian dollar ☐ U	S dollar		Euro	Other (describe)					
b) Distribution date(s)									
State the distribution start and end d as both the start and end dates. If the distribution period covered by the rep Start date	e report is bei port.		-	-			-		
c) Detailed purchaser information	ion								
Complete Schedule 1 of this form for each purchaser and attach the schedule to the completed report.									
d) Types of securities distribut	ed								
Provide the following information for all distributions that take place in a jurisdiction of Canada on a per security basis. Refer to Part A of the Instructions for how to indicate the security code. If providing the CUSIP number, indicate the full 9-digit CUSIP number assigned to the security being distributed. The information included in item 7d must reconcile to item 7f. For examples on how to report convertible securities, see our Frequently									

					Canadian \$	
Security CUSIP numbe (if applicable)		Description of security	Number of securities	Single or lowest price Highest price		Total amount
UBS		Units comprised of one common share and one share purchase warrant	12,858,500.00	0.1000		642,940.00

e) Details of rights and convertible/exchangeable securities

Asked Questions.

If any rights (e.g. warrants, options) were distributed, provide the exercise price and expiry date for each right. If any convertible/exchangeable securities were distributed, provide the conversion ratio and describe any other terms for each convertible/exchangeable security.

Security code		Underlying security code				Conversion ratio	Describe other items (if applicable)			
						Lowest	Highest			
W	N	Т	С	М	S	0.1000	0.1000	2018-10-05		Each share purchase warrant entitles the holder thereof to purchase one additional common share at a price of \$0.10 for a period of 12 months.

f) Summary of the distribution by jurisdiction and exemption

State the total dollar amount of securities distributed and the number of purchasers for each jurisdiction of Canada and foreign jurisdiction where a purchaser resides and for each exemption relied on in Canada for that distribution. However, if an issuer located outside of Canada completes a distribution in a jurisdiction of Canada, include distributions to purchasers resident in that jurisdiction of Canada only.

This table requires a separate line item for: (i) each jurisdiction where a purchaser resides, (ii) each exemption relied on in the jurisdiction where a purchaser resides, if a purchaser resides in a jurisdiction of Canada, and (iii) each exemption relied on in Canada, if a purchaser resides in a foreign jurisdiction.

 $For jurisdictions \ within \ Canada, \ state \ the \ province \ or \ territory, \ otherwise \ state \ the \ country.$

Province or country	Exemption relied on	Number of purchasers	Total amount (Canadian \$)
Alberta	NI 45-106 2.5 [Family, friends and business associates]	1	50,000.00
Alberta	NI 45-106 2.3 [Accredited investor]	1	10,000.00
British Columbia	NI 45-106 2.5 [Family, friends and business associates]	1	18,000.00
British Columbia	NI 45-106 2.3 [Accredited investor]	4	65,000.00
British Columbia	Other	2	15,000.00

	Total dollar amount of securities distributed						
Thailand	Other	1	30,000.00				
Marshall Islands	Other	1	50,000.00				
Paraguay	Other	1	10,000.00				
Paraguay	NI 45-106 2.3 [Accredited investor]	1	10,000.00				
United States	Other	1	11,940.00				
United States	NI 45-106 2.5 [Family, friends and business associates]	1	35,000.00				
Québec	Other	1	14,000.00				
Québec	NI 45-106 2.3 [Accredited investor]	1	10,000.00				
Ontario	Other	8	224,000.00				
Ontario	NI 45-106 2.3 [Accredited investor]	3	80,000.00				
Ontario	NI 45-106 2.5 [Family, friends and business associates]	1	10,000.00				

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. 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)

Provide information for each perso	n (as defined in I	N NI 45-106) to whom t	he issuer directly provid	des, or will provide, o	ıny compensation ir	n connection	
with the distribution. Complete a					ensated.		
Indicate whether any compensation	•	•	on with the distribution. ons compensated.				
☐ No ✓ Yes	ii yes, iiidica	te number of pers	ons compensated.				
a) Name of person compens							
Indicate whether the person co		-	✓ No	Yes			
If the person compensated is an i		e the name of the ind	ividual.			_	
Full legal name of individua	al C	Georgetti	Patrick				
	Fam	nily name	First given name	e Seco	ndary given names		
If the person compensated is no	t an individual, pi	rovide the following i	nformation.				
Full legal name of r	non-individual						
Firm	NRD number			(if appl	icable)		
Indicate whether the person con	npensated facilita	ted the distribution to	hrough a funding portal	! or an internet-base	ed portal.	No Yes	
b) Business contact informa	tion						
If a firm NRD number is not prov	ided in Item 8 (a),	, provide the business	contact information of	the person being co	mpensated.		
Street address 18	Parkview Hill C	rescent					
Municipality Tor	onto]	Province/State	Ontario		
Country Car	nada		Posta	I code/Zip code	M4B 1P6		
Email address geo	rgetti@rogers.	com	Tele	ephone number	6472044336		
c) Relationship to issuer or i	nvestment fund	d manager					
Indicate the person's relationship B(2) of the Instructions and the m ☐ Connect with the issuer o ☐ Director or officer of the in	eaning of "contro r investment fund	ol" in section 1.4 of N d manager	45-106 for the purpose		s section. er than an investm	ent fund)	
d) Compensation details	• • • • •		.:			"	
Provide details of all compensatio Canadian dollars. Include cash co services incidental to the distribut on, internal allocation arrangeme	mmissions, securi ion, such as cleric	ties-based compensa al, printing, legal or a	tion, gifts, discounts or a accounting services. An	other compensation issuer is not required	. Do not report payr d to ask for details d	ments for	
Cash commissions paid	19,84	10.00	Security codes	Security code 1	Security code 2	Security code 3	
Value of all securities distributed as compensation ⁴			·	WNT			
Describe term	s of warrants, op	tions or other rights	396,800 non-transi warrant is exercisa \$0.10 per common date of issue.	ble into one com	mon share at a p	rice of	
Other compensation ⁵		Describe					
Total compensation paid	19,84	10.00					
Check box if the persor	will or may rece	eive any deferred cor	npensation (describe th	ne terms below)			

тем 9	- DIRECTORS, EXECUTI	VE O FFICERS A	AND PROMO	TERS OF THE I	SSUER					
If the	issuer is an investment fund, o	do not complete It	tem 9. Procced to	ltem 10.						
Indica	te whether the issuer is any of th	e following (select o	all that apply).							
\checkmark	Reporting issuer in any jurisdic	tion of Canada								
	Foreign public issuer									
	Wholly owned subsidiary of a r	eporting issuer in a	any jurisdiction of	Canada ⁶						
	Provide name o	of reporting issuer								
	Wholly owned subsidiary of a f	oreign public issue	er ⁶							
	Provide name of for	eign public issuer								
	Issuer distributing eligible forei	gn securities only t	to permitted clien	ts ⁷						
If the	issuer is at least one of the ab	ove, do not comp	lete Item 9(a) –	(c). Proceed to Ite	m 10.					
securiti 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.									
	If the issuer is none of the ab	ove, check this bo	x and complete	Item 9(a) - (c).						
a) D	Directors, executive officers a	and promoters of	the issuer							
	ide the following information for ory; otherwise state the country.						da, stai	te the p	rovince	or
C	rganization or company name	Family name	First given name	Secondary give names	Y I IIIIISAICTION OT I		vidual or issuer (select all that			
					Province o	r country	D	0	Р	
b) F	romoter information					·				
If the	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	urisdiction of (select one)		nship to promoter or both if applicable)		
					Province or country	D		C)	
c) R	Residential address of each in	ndividual								

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	Avelino Jorge				
	Family name	First given name		Secondary given names	
Title	Chief Financial Officer				
Name of issuer/underwriter/ investment fund manager	Imagin Medical Inc.				
Telephone number	7789985000	Email address ja	avelin@ja	avell.ca	
Signature	"Jorge Avelino"	Date	2017	10	13
			YYYY	MM	DD

ITEM 11- CONTACT PERSON

, ,	· · · · · ·		,	ority or regulator may contact with any			
questions regarding the c	ontents of this report, if diff	erent than the individua	l certifying the report in It	em 10.			
Same as individual certifying the report							
Full legal name	Lightfoot	Jeffrey	B.	Title Solicitor			
	Family name	First given name	Secondary given				

First given name

Name of company

Owen Bird Law Corporation

Family name

Telephone number 6046975606

Email address clary@owenbird.com

names

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:

- 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
- has authorized the indirect collection of the information by the securities regulatory authority or regulator.