# 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										
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  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.   □ Exploration □ Development □ Production								
Is the issuer's primary business is 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?  No Yes If yes, provide SEDAR profile number 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								
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 investment fund, provide the following information.										
a) Investment fund manager information										
Full legal name										
Firm NRD number	(if applicable)									
If the investment fund ma	If the investment fund manager 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									
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 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 \$).  \$\Boxed{\Pi}\$ \$0 to under \$5M \Boxed{\Pi}\$ \$5M to under \$25M \Boxed{\Pi}\$ \$25M to under \$100M										
\$100M to under \$500	DM \$500M to under \$1B \$1B or over Date of NAV calculation:  YYYY MM DD									

TEM 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 which the distribution was made. All dollar amounts provided in the report must be in Canadian dollars.								
✓ Canadian dollar    US dollar    Euro    Other (describe)								
b) Distribution date(s)								
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  2017  02  24  YYYY  MM  DD  End date  2017  02  24  YYYY  MM  DD								
c) Detailed purchaser information								
Complete Schedule 1 of this form for each purchaser and attach the schedule to the completed report.								
d) Types of securities distributed								
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 Asked Questions.								

						Canadian \$	
		CUSIP number (if applicable)	Description of security	Number of securities	Single or lowest price	Highest price	Total amount
C	C V N		Convertible note term is 12 months from date of closing and will bear interest at a rate of 10% per annum. Convertible to units at \$0.09 per unit. Each unit consists of one share and one warrant (exercisable at \$0.12 for 12 months following closing)	118.00	1,000.0000		118,000.00

#### e) Details of rights and convertible/exchangeable securities

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		_	Exercise price (Canadian \$)		Expiry date (YYYY- MM-DD)	Conversion ratio	Describe other items (if applicable)	
				Lowest	Highest				
U B S	С	М	S	0.0900					

#### 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 \$)	
British Columbia	NI 45-106 2.3 [Accredited investor]	1	27,000.00	
British Columbia	Existing security holder exemption	1	12,000.00	
Ontario	NI 45-106 2.3 [Accredited investor]	1	18,000.00	

United States	NI 45-106 2.5 [Family, friends and business associates]	3	61,000.00
	118,000.00		
	Total number of unique purchasers <sup>2</sup>	6	

<sup>&</sup>lt;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)	

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. <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.							
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 <sup>4</sup>							
Describe terms of warrants, options or other rights							
Other compensation <sup>5</sup> Describe							
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	ND PROMO	TERS OF THE <b>I</b> S	SSUER					
If the issuer is an investment fund, do not complete Item 9. Procced to Item 10.									
Indicate whether the issuer is any of the following (select all that apply).									
Reporting issuer in any jurisdiction of Canada									
Foreign public issuer									
Wholly owned subsidiary of a reporting issuer in any jurisdiction of Canada <sup>6</sup>									
Provide name of reporting issuer									
Wholly owned subsidiary of a foreign pu	ıblic issuer <sup>6</sup>								
Provide name of foreign publ	lic issuer								
☐ Issuer distributing eligible foreign securi	ties only to	permitted client	ts <sup>7</sup>						
If the issuer is at least one of the above, do r	not comple	te Item 9(a) – (	(c). Proceed to Ite	m 10.					
<sup>6</sup> An issuer is a wholly owned subsidiary of a rep securities that are required by law to be owned be <sup>7</sup> Check this box if it applies to the current distribu- clients. Refer to the definitions of "eligible foreign	by its directo ution even i	ors, are benefic if 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	and complete	Item 9(a) - (c).						
a) Directors, executive officers and prom	noters of th	he issuer							
Provide the following information for each dire territory; 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	Relationsh issue (select all apply	r that		
				Province o	r country	D O	Р		
b) Promoter information									
If the promoter listed above is not an individua	l, provide th	ne following info	rmation for each d	lirector and execu	tive officer o	f the promot	er. For locations		
within Canada, state the province or territory; o	otherwise st	ate the country.	For "Relationship t	to promoter", "D"	– Director, "(	O" – Executiv	re Officer.		
Organization or company name  First given name  Secondary given names  Residential jurisdiction of individual  Relationship to promoter (select one or both if applicable)									
				Province or country	D		0		
c) Residential address of each individua	I								
Complete Schedule 2 of this form providing t	he full resi	idential addres	s for each individ	lual listed in Iter	n 9(a) and	(b) and atta	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	Chief Financial Officer				
Name of issuer/underwriter/ investment fund manager	Imagin Medical Inc.				
Telephone number	7757373292 Email address javelino@javell.ca				
Signature	"Jorge Avelino"	Date 2	017	03	07
		Y	YYY	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 individual certifying the report								
Full legal name	Lightfoot	Jeffrey		Title Solicitor				
	Family name	First given name	Secondary given names					
Name of company	Owen Bird Law Corpora							

#### Notice - Collection and use of personal information

Email address | szasheyko@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:

- 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.