Form 45-106F1 Report of Exempt Distribution

ITEM 1 – REPORT TYPE		
New report Amended report If amended,	, provide filing date of report that is being	amended. (YYYY-MM-DD)
ITEM 2 - PARTY CERTIFYING TH	ie Report	
Indicate the party certifying the report (select only National Instrument 81-106 Investment Fund Con Investment fund issuer ✓ Issuer (other than an investment Underwriter	ontinuous Disclosure and the companion policy	
ITEM 3 – ISSUER NAME AND OT	THER IDENTIFIERS	
Provide the following information about the issue	er, or if the issuer is an investment fund, about	the fund.
Full legal name THC	BioMed Intl Ltd.	
Previous full legal name		
If the issuer's name changed in the last	t 12 months, provide most recent previous lega	l name.
Website www.	r.thcbiomed.com (if a	pplicable)
If the issuer has a legal entity identifier, provide be	pelow. Refer to Part B of the Instructions for the	definition of "legal entity identifier".
Legal entity identifier		
If two or more issuers distributed a single security,	, provide the full legal name(s) of the co-issuer	(s) other than the issuer named above.
Full legal name(s) of co-issuer(s)	(if a	pplicable)
ITEM 4 - UNDERWRITER INFORM	MATION	
If an underwriter is completing the report, provide	e the underwriter's full legal name and firm NF	D number.
Full legal name		
Firm NRD number	(if applicable)	
If the underwriter does not have a firm NRD numb	ber, provide the head office contact informatio	n 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 in your reasonable judgment most closely corresponds to the issuer's primary business activity.
NAICS industry code 5 4 1 7 1 2
If the issuer is in the mining industry , indicate the stage of operations. This does not apply to issuers that provide services to issuers operating in the mining industry. Select the category that best describes the issuer's stage of operations. Exploration Development Production
Is the issuer's primary business to invest all or substantially all of its assets in any of the following? If yes, select all that apply.
Mortgages Real estate Commercial/business debt Consumer debt Private companies
Cryptoassets
b) Number of employees
Number of employees:
c) SEDAR profile number
Does the issuer have a <u>SEDAR</u> profile? No ✓ Yes If yes, provide SEDAR profile number 0 0 0 0 5 6 1 2 If the issuer does not have a 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 jurisdiction 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 name of the exchange on which the issuer's equity securities primarily trade. Provide only the name of an exchange and not a trading facility such as, for example, an automated trading system. Exchange name
h) Size of issuer's assets
Select the size of the issuer's assets based on its most recently available annual financial statements (Canadian \$). If the issuer has not prepared annual financial statements for its first 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 manager 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 Cryptoasset 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 Fund¹ **Undertaking for the Collective Investment of Transferable Securities funds (UCITs Funds) are investment funds regulated by the European Union (EU) directives that allow collective 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 formation Financial year-end MM DD Financial year-end
d) Reporting issuer status of the investment fund
Is the investment fund a reporting issuer in any jurisdiction of Canada? No Yes
If yes, select the jurisdictions of Canada in which the investment fund is a reporting issuer. All AB BC MB NB NL NT NS NU ON PE QC SK YT
e) Public listing status 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 name of the exchange on which the investment fund's securities primarily trade. Provide only the name of an exchange and not a trading facility such as, for example, an automated trading system. Exchange name
f) Net asset value (NAV) of the investment fund
Select the NAV range of the investment fund as of the date of the most recent NAV calculation (Canadian \$). \$ 50 to under \$5M \$5M to under \$25M \$25M to under \$100M \$100M to under \$500M \$500M to under \$1B \$1B or over Date of NAV calculation:
YYYY MM DD

ITEM 7 - INFORM	1ATION ABOUT	THE DIS	TRIBUTION						
If an issuer located outside purchasers resident in that connection with the distrib in Schedule 1 of the report.	jurisdiction of Canada ution, which must be d	only. Do not i	nclude in Item 7 se	curities i	issued as	s payment of	commissions	s or finder's fees in	n
a) Currency									
Select the currency or curre	encies in which the dist			ounts pr (descri	_	n the report i	must be in Co	ınadian dollars.	
b) Distribution da	ate(s)								
State the distribution start date as both the start and d distribution period covered	end dates. If the report								
Start da	YYYY MM	DD DD	En	d date	2019 YYY		DD DD		
c) Detailed purch	naser information								
Complete Schedule 1	of this form for eac	ch purchase	r and attach the	sched	ule to t	he comple	ted report.		
d) Types of secu	rities distributed								
Provide the following information security code. If providing t								ed.	te the
Security CUSIP n	number			Num	ber of	Single or	Highest		1
code (if applie		Description of s	ecurity		urities	lowest price	price	Total amount	
C M S 8724	I3W	Common Sha	ares	3,05	4,078	0.341		1,041,441	
									_
									_
e) Details of right	ts and convertible/e	xchangeable	esecurities						
If any rights (e.g. warrants, securities were distributed,									?
		se price dian \$) Highest	Expiry date (YYYY-MM-DD)	Conve rati		Describ	e other terms	(if applicable)	
f) Summary of th	ne distribution by jur	risdiction and	d exemption						
State the total dollar amou purchaser resides and for e distribution in a jurisdiction This table requires a separa purchaser resides, if a purch jurisdiction.	unt of securities distribu each exemption relied c n of Canada, include di ate line item for: (i) eac	uted and the no on in Canada f istributions to p ch jurisdiction	umber of purchaser or that distribution. purchasers resident where a purchaser i	Howeve in that j resides, (er, if an i jurisdicti (ii) each	issuer located on of Canad exemption re	d outside of C a only. elied on in the	Canada completes e jurisdiction whe	s a ere a
For jurisdictions within Can	nada, state the province	e or territory, c	otherwise state the o	country.	NI .	f			1
Province or country	Exe	emption relied or	1		Numbe purch	r of unique nasers ^{2a}	Total amou	ınt (Canadian \$)	
ON	NI	45-106 2.14				2	1,0	41,441	_
									-
									-
		To	tal dollar amount	of secu	ırities di	istributed	1,0	41,441	1
	To	otal number of	of unique purchas	sers ^{2b}		2	,-		

^{2a}In calculating the number of unique purchasers per row, count each purchaser only once. Joint purchasers may be counted as one purchaser.

^{2b}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.

a)	Not proces	de to the	investment	fund hy	iuriediction
q)	Met procee	นร เบ เทษ	HIVESHIEH	Turiu by	Julisaiction

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&}quot;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)
1.				
2.				
3.				

ITEM 8 - COMPENSATION INFORMATION
Provide information for each person (as defined in NI 45-106) to whom the issuer directly provides, or will provide, any compensation in connection with the distribution. Complete additional copies of this page if more than one person was, or will be, compensated.
Indicate whether any compensation was paid, or will be paid, in connection with the distribution.
✓ No Yes If yes, indicate number of persons compensated.
a) Name of person compensated and registration status
Indicate whether the person compensated is a registrant. 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
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.
☐ No ☐ Yes
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. Connected 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
Value of all securities distributed as compensation ⁴ Security code 1 Security code 2 Security code 2 Security code 3 Security code 1 Security code 2 Security code 3
Describe terms of warrants, options or other rights
Other compensation ⁵ Describe
Total compensation paid
Check box if the person will or may receive any deferred compensation (describe the terms below)
4Provide the aggregate value of all securities distributed as compensation, excluding options, warrants or other rights exercisable to acquire additional securities of the issuer. Indicate the security codes for all securities distributed as compensation, including options, warrants or other rights exercisable to acquire additional securities of the issuer. 5Do not include deferred compensation.
⁵ Do not include deferred compensation.

ITEM 9 – DIRECTORS, EXEC	UTIVE OFFICERS	AND PROM	OTERS OF	THE IS	SUER				
If the issuer is an investment fund,	do not complete Ite	m 9. Proceed	to Item 10.						
Indicate whether the issuer is any of the Reporting issuer in any jurisd Foreign public issuer Wholly owned subsidiary of a Provide name Wholly owned subsidiary of a	reporting issuer in a of reporting issuer foreign public issuer foreign public issuer e foreign securities a pove, do not complete foreign securities a pove, do not complete foreign securities and pove of the issuer or a foreign public issuer or a foreign such of the issuer in Part B(1) of the Infove, check this both cers and promoter each director, executi	any jurisdiction The litem 9(a) — The graphic issuer if the graphic issuer or the form and previous distructions. The and complete the solution of the issue we officer and provided the solution of the issue the solution of	tion is to permi (c). Proceed to all of the issuer's or eign public issuer istributions of othe tre Item 9(a) - (ar	itted clie o Item 1 outstandir, respectir er types or (c).	nts only ⁷ 10. ng voting securely. f securities to	nrities, other than non-permitted cla	lients. R	efer to the	definitions
Organization or company name	Family name	First given name	Secondary name:	given	Business non-ind resid jurisdi indiv	location of ividual or dential ction of vidual or country		lationshi issuer elect all t apply)	
					Trovince	or country			
b) Promoter information						L			
If the promoter listed above is not an illocations within Canada, state the pro									
Organization or company name	Family name	First given name	Secondary given names	juriso ind Prov	sidential diction of ividual vince or ountry	Relation (select one		o promot h if appli	
					ми				
c) Residential address of e	each individual								

attach to the completed report. Schedule 2 also requires information to be provided about control persons.

Complete Schedule 2 of this form providing the full residential address for each individual listed in Item 9(a) and (b) and

ITEM 10 - CERTIFICATION

Provide the following certification and business contact information of an officer, director or agent 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 be delegated, but only to an agent that has been authorized by an officer or director of the issuer or underwriter to prepare and certify the report on behalf of the issuer or underwriter. If the report is being certified by an agent on behalf of the issuer or underwriter, provide the applicable information for the agent in the boxes below.

If the individual completing and filing the report is different from the individual certifying the report, provide the name and contact details for the individual completing and filing the report 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.

Securities legislation requires an issuer or underwriter that makes a distribution of securities under certain prospectus exemptions to file a completed report of exempt distribution.

By completing the information below, I certify, on behalf of the issuer/underwriter/investment fund manager, to the securities regulatory authority or regulator, as applicable, that I have reviewed this report and to my knowledge, having exercised reasonable diligence, the information provided in this report is true and, to the extent required, complete.

Name of issuer/underwriter/ investment fund manager/agent	THC BioMed Intl Ltd.				
Full legal name	Miller	John			
·	Family name	First given name	9	Secondary gi	ven names
Title	President, Chief Executive Offi	cer and Director			
Telephone number	250-870-2512	Email address	jn	n@thcmeds	s.ca
Signature	"John Miller"	Date	2019	02	21
			YYYY	MM	DD

ITEM 11 - CONTACT PERSON

Provide the following business contact information for the individual that the securities regulatory authority or regulator may contact with any questions regarding the contents of this report, if different than the individual certifying the report in Item 10.

uestions regarding the c	estions regarding the contents of this report, if different than the individual certifying the report in Item 10.					
Same as ind	vidual certifying the repo	ort				
Full legal name	Stephens	Erin		Title	Paralegal Practicum Student	
	Family name	First given name	e Secondary given names	ven		
Name of company		Owen Bird	Law Corporation			
Telephone number	604-697-5637		Email address	estephens@ow	enbird.com	

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 Schedule 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.

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