# 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 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)  Underwriter										
ITEM 3 - ISSUER NAME AND OTHER IDENTIFIERS										
Provide the following information about	the issuer, or if the issuer i	is an investment fund, about th	he fund.							
Full legal name	THC BioMed Intl Ltd	l.								
Previous full legal name										
If the issuer's name changed in	the last 12 months, provi	ide most recent previous legal	name.							
Website		(if ap	pplicable)							
If the issuer has a legal entity identifier, p	provide below. Refer to Par	t B of the Instructions for the c	definition of "legal entity identif	ier".						
Legal entity identifier	www.thcbi	omed.com								
If two or more issuers distributed a single	security, provide the full l	legal name(s) of the co-issuer(:	's) other than the issuer named (	above.						
Full legal name(s) of co-issuer(s)		(if ap	pplicable)							
Irri A. Hunenwaren I										
ITEM 4 – UNDERWRITER I										
If an underwriter is completing the report	t, provide the underwriter:	s full legal name and firm NKL	D number.	1						
Full legal name	1 1 1									
Firm NRD number		(if applicable)								
If the underwriter does not have a firm N	RD number, provide the h	ead office contact information	n of the underwriter.	1						
Street address		1								
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 <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 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: $\boxed{\checkmark} 0-49$ $\boxed{} 50-99$ $\boxed{} 100-499$ $\boxed{} 500$ 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 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 Financial year-end MM DD MM DD
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)										
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 Fund <sup>1</sup> 1 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										
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.										
AII										
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 \$).										
\$0 to under \$5M										
\$100M to under \$500M \$500M to under \$1B \$1B or over Date of NAV calculation: YYYY MM DD										

# ITEM 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 in connection with the distribution, which must be disclosed in Item 8. The information provided in Item 7 must reconcile with the information provided in Schedule 1 of the report.

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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
 2020
 11
 12
 End date
 2020
 11
 12

 YYYY
 MM
 DD
 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 reported on a per security basis. Refer to Part A(12) 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.

							Canadian	\$
Security code				Description of security  Number securitie		Single or lowest price	Highest price	Total amount
U	В	S	87243W	Each Unit is comprised of one common share and one common share purchase warrant. Each warrant entitles the holder to purchase one common share in the capital of the company at a price of \$0.15 for a period of 24 months.	3,636,363	0.11		\$399,999.93

#### 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.

	nvertib hange:		Underlying				se price dian \$)	Expiry date	Conversion	Describe other terms (if applicable)
	curity c		sec	ccurity code Lowest Highest (YYYY-MM-DD) ratio		, II ,				
W	N	Т	С	М	S	0.15	0.15	2022-11-12	1:1	

#### 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 unique purchasers <sup>2a</sup>	Total amount (Canadian \$)
ON	NI 45-106 s. 2.10	1	\$399,999.93
	\$399,999.93		
	Total number of unique purchasers <sup>2b</sup>	1	

<sup>2a</sup>In calculating the number of unique purchasers per row, count each purchaser only once. Joint purchasers may be counted as one purchaser.

<sup>2b</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.<sup>3</sup> 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)
1.				
2.				
3.				

ITEM 8 - COMPENSA	ATION INFO	RMATION									
			* ·	or will provide, any compensation in on was, or will be, compensated.							
Indicate whether any compensor  No  ✓ Yes	· ·	•	nnection with the distribution.  r of persons compensated.	1							
a) Name of person c	ompensated and	d registration st	atus								
Indicate whether the person con  No ✓ Yes	mpensated is a reg	istrant.									
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 Echelon Wealth Partners Inc.										
-	<u> </u>										
	NRD number	3 2 4	2 0 (if application of through a funding portal or an	,							
No Yes	mpensatea facilitat	ea the distribution	n through a funding portal or an	ınternet-vasea portat.							
b) Business contact											
F	ovided in Item 8(a),	, provide the busii	ness contact information of the p	erson being compensated.							
Street address			1								
Municipality [			Province/State								
Country			Postal code/Zip code								
Email address			Telephone number								
c) Relationship to iss	suer or investme	ent fund manage	er								
	d the meaning of "ossuer or investmen	control" in section t fund manager	I manager (select all that apply). 1 1.4 of NI 45-106 for the purpose	Refer to the meaning of "connected" in ss of completing this section.							
Director or officer of the	he investment fund	d or investment fu	und manager								
Employee of the issue	er or investment fu	ınd manager									
✓ None of the above											
d) Compensation de	tails										
amounts in Canadian dollars. In payments for services incidenta	nclude cash commi	issions, securities- n, such as clerical,	based compensation, gifts, discouprinting, legal or accounting serv	ction with the distribution. Provide all unts or other compensation. Do not report vices. An issuer is not required to ask for of a non-individual compensated by the							
Cash commissions paid	\$28,000										
Value of all securities distributed as		Sec	urity codes Security code 1	Security code 2 Security code 3							
compensation <sup>4</sup>											
Describe terms of	of warrants, options	s or other rights		rchase warrants exercisable into or two years at a price of \$0.15							
Other compensation <sup>5</sup>		Describe									
Total compensation paid	\$28,000										
Check box if the person	will or may receiv	e any deferred co	ompensation (describe the terms	s below)							
4Provide the aggregate value of all se	ecurities distributed as	compensation exclu	iding ontions, warrants or other rights e	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.

<sup>5</sup>Do not include deferred compensation.

I.	TEM 9 – DIRECTORS, EXEC	CUTIVE OFFICERS	S AND PROM	OTERS OF	THE IS	SUER				
If	the issuer is an investment fund,	do not complete Ite	em 9. Proceed t	to Item 10.						
In	dicate whether the issuer is any of th	ne following (select th	he one that appl	lies – if more th	nan one	applies, sele	ect only one).			
	✓ Reporting issuer in any jurisd	liction 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	0 .	er <sup>6</sup>							
	Provide name of fo	oreign public issuer								
	Issuer distributing only eligibl	e foreign securities a	and the distribut	tion is to permi	itted clie	ents only <sup>7</sup>				
	the issuer is at least one of the al	-								
<sup>6</sup> A la	n issuer is a wholly owned subsidiary of a now with the owned by its directors, are beneficial to the owned by its directors.	reporting issuer or a fore ally owned by the reporti	ign public issuer if a ng issuer or the for	all of the issuer's eign public issuer	outstandii ; respecti	ng voting secu vely.	ırities, other thai	n securit	ies that a	re required b
	Check this box if it applies to the current dist			stributions of othe	er types o	f securities to	non-permitted c	lients. R	efer to the	e definitions
01	"eligible foreign security" and "permitted cli	, ,								
	If the issuer is none of the a		-		(c).					
	a) Directors, executive offi	cers and promote	rs of the issue	r						
	rovide the following information for rritory, otherwise state the country. I							da, stai	te the pi	rovince or
							location of	Re	lationsh	ip to
	0	F7	First given	Secondary given names		non-individual or residential		issuer (select all that		
	Organization or company name	Family name	name			•	ction of vidual	,	apply)	
					Province		or country	D	0	Р
										1
	1) 5									
	b) Promoter information									
	the promoter listed above is not an c cations within Canada, state the pro									
	fficer.	rance or correctly, ou	TOT THESE STATE CITE		, totalion	smp to prom		2 11 0010	., 0	_xccattre
				0 1		sidential	Relatio	nship to	o promo	oter
	Organization or company name	Family name	First given name	Secondary given		diction of lividual	(select one			
			Hame	names		vince or	D		С	)
					CC	ountry				
1										

ı				

c) Residential address of each individual

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, 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	е	Secondary gi	ven names				
Title	President, Chief Executive Officer and Director								
Telephone number	250-870-2512	Email address	jm@thcmeds.ca						
Signature	"John Miller"	Date	2020	11	18				
			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.											
Same as individual certifying the report											
Full legal name	Stephens	Erin			Title	Paralegal					
	Family name	First given nam	ne	Secondary given	ven						
Name of company	Owen Bird Law Corporation										
Telephone number	604-697-5637	97-5637 Email address			estephens@ow	enbird.com					