# Form 45-106F1 Report of Exempt Distribution

IT IS AN OFFENCE TO MAKE A MISREPRESENTATION IN THIS REPORT

Item 1 - Report Type									
<ul> <li>New report</li> <li>Amended report If amended, provide filing date of report that is being amended (YYYY-MM-DD)</li> </ul>									
ITEM 2 - PARTY CERTIFYING T	HE 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.									
	<ul> <li>✓ Investment fund issuer</li> <li>✓ Issuer (other than an investment fund)</li> </ul>								
	,								
ITEM 3 - ISSUER NAME AND C	THER IDENTIFIERS								
Provide the following information about		nvestment fund, about the fund.							
Full legal nam	e QuikFlo Health Inc.								
Previous full legal nam	e								
If the issuer's name changed	in the last 12 months, provide m	ost recent previous legal name.							
Websi	e www.quikflohealth.com	n	(if applicable)						
If the issuer has a legal entity identifier.		the Instructions for the definition	of "legal entity identifier".						
Legal entity identifie	۶r								
ITEM 4 - UNDERWRITER INFOR	MATION								
If an underwriter is completing the repo		egal name and firm National Rea	istration Database (NRD) number						
		egut nume una firm National Reg							
Firm NRD number	Firm NRD number   (if applicable)								
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 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 3 4 5 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 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 Ves If yes, provide SEDAR profile number 0 0 0 2 6 7 4 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     Financial year-end       YYYY     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.									
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 investi	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 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 <sup>1</sup>									
<sup>1</sup> 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 (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	S5M to under \$25M \$25M to under \$100M								
\$100M to under \$500	S100M to under \$500M to under \$1B \$1B or over Date of NAV calculation:								
	YYYY MM DD								

ITEN	ITEM 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)	a) Currency																	
Sele	Select the currency or currencies in which the distribution was made. All dollar amounts provided in the report must be in Canadian dollars.																	
<u> </u>	Cana	adia	n do	llar		<u> </u>	6 dollar		🗌 Eu	ro	Other	(describ	e)					
b)																		
as	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 date for the distribution period covered by the report.																	
	Start date         2017         04         24         End date         2017         04         24           YYYY         MM         DD         YYYY         MM         DD																	
c)	Deta	led	purc	hase	er in	formati	on											
Con	nplete S	Sche	edule	e 1 c	of th	is form	for ea	ch purcl	haser d	nd atta	ch the sche	dule to	the co	mpleted	d repo	rt.		
d)	Туре	s of	sec	uritie	es di	stribute	d											
lr d	nstructior	ns foi 1. Th	r how e info	∕ to ir	ndica	ite the se	ecurity co	de. If pro	viding ti	he CUSIP i		cate the fu	ıll 9-di	git CUSIP	numbe	r assigned	Part A of the I to the security ee our <u>Frequer</u>	0
																Canadian \$	3	
	Securit code		CUSIF (if apj				Desc	ription of s	ecurity		Numbe secur			ingle or owest price	High	est price	Total amo	unt
								3,852,5			8,852	2,505.00	ו	0.0750			663,9	37.70
								price of nit cons										
	UB	S				comm	on sha	re and	one h									
			_	_		warra	nt.	re purc										
e)			-					hangeal			price and ex	niny data	for oac	h right. If	any cor	wartible/a	xchangeable se	ocuritios
			-								ns for each c	-		-	-		xentingeuble se	
	Secu							se price dian \$)		Exp	iry date - MM-DD)	Conver		Deer	rihe oth	ar itama (if	appliaghta)	
	cod	e	sec	urity o	code	Lov	/est	High	est		- IVIIVI-DD)	rati	0	Desc	inde otni	er items (if a	applicable)	
						C	.1500	(	).1500	)		1:1				commo		
	W N	Т	С	м	s					2010	9-04-24					arrant er rchase o	ntitles the	
		1.								2010	0121			comm	on sha	are at ar	n exercise	
														price c	of \$0.1	5 per sł	nare.	]
f)							••	iction ar		•								
										-		-					irisdiction whe la completes a	
di	stributio	n in	a juri	sdict	ion c	, f Canad	a, include	e distribu	tions to	purchaser	s resident in t	that jurisd	liction	of Canado	a only.	-	•	
																	sdiction where esides in a fore	
ju	risdictior	7.		-			-								., , , , , ,			·9''
Fo	or jurisdie	ction	s witi	hin C	anad	da, state	the prov	ince or te	rritory, o	otherwise	state the cour	ntry.						
			rovinc count					I	Exemptic	on relied on				iber of hasers		Total amou	int (Canadian \$)	
		A	Albei	rta		Ν	45-10	6 2.3 [/	Accred	lited inve	estor]			2	2		104,999	9.75
	Br	itisł	n Co	olum	ıbia		vestme B, NB)	ent deal	er- ex	emption	(BC, AB,	SK,		11			71,92	5.00
	Br	itisł	n Co	olum	bia	Ν	45-10	6 2.3 [/	Accred	lited inve	estor]			15	5		191,420	0.95
		C	Onta	rio		N	NI 45-106 2.3 [Accredited investor]						6	6		110,275	5.00	

	Total number of unique purchasers <sup>2</sup>	42	
	663,937.7		
United States	Distributions to purchasers outside of local jurisdiction (BC, AB, NB)	3	52,342.0
South Africa	Investment dealer- exemption (BC, AB, SK, MB, NB)	1	5,250.0
Germany	Distributions to purchasers outside of local jurisdiction (BC, AB, NB)	1	7,500.0
Belize	Distributions to purchasers outside of local jurisdiction (BC, AB, NB)	1	99,975.0
Manitoba	Investment dealer- exemption (BC, AB, SK, MB, NB)	1	15,000.0
Ontario	NI 45-106 2.5 [Family, friends and business associates]	1	5,250.0

<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.<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>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 Ves If yes, indicate number of persons compensated.	8							
a) Name of person compensated and registration status								
Indicate whether the person compensated is a registrant. No Ves								
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 PI Financial Corp.								
Firm NRD number 5 2 9 0	(if applicable)							
Indicate whether the person compensated facilitated the distribution through a funding portal or an ir								
b) Business contact information								
If a firm NRD number is not provided in Item 8 (a), provide the business contact information of the pers	son being compensated.							
Street address								
Municipality Provin	nce/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). Rej $P(2)$ of the instructions and the manning of "control" is participal 4 of NI 45, 100 for the purposes of approximately in participal 4 of NI 45,								
B(2) of the Instructions and the meaning of "control" in section 1.4 of NI 45-106 for the purposes of con Connect with the issuer or investment fund manager Insider of the	e issuer (other than an investment fund)							
	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 Canadian dollars. Include cash commissions, securities-based compensation, gifts, discounts or other con services incidental to the distribution, such as clerical, printing, legal or accounting services. An issuer is on, internal allocation arrangements with the directors, officers or employees of a non-individual compe	mpensation. Do not report payments for not required to ask for details about, or report							
Cash commissions paid 7,554.00 Security codes Secur	ity code 1 Security code 2 Security code 3							
Value of all securities distributed as compensation <sup>4</sup>	N T							
Describe terms of warrants, options or other rights Issuance of 100,720 finder's warrants. Each finder's warrant entitles the holder to acquire one additional common share at an exercise price of \$0.15 per share for a period of two years. Expiry date of finder's warrant is April 24, 2019.								
Other compensation <sup>5</sup> Describe								
Total compensation paid 7,554.00								
Check box if the person will or may receive any deferred compensation (describe the terms	s below)							
<sup>4</sup> Provide the aggregate value of all securities distributed as compensation, <u>excluding</u> options, warrar additional securities of the issuer. Indicate the security codes for all securities distributed as compen								

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

a) Name of person compe	nsated and registration status								
Indicate whether the person of	compensated is a registrant.	No No	✓ Yes						
If the person compensated is an	n individual, provide the name of th	ne individual.							
Full legal name of individual									
	Family name	First given n	ame Secondary g	iven names					
If the person compensated is n	oot an individual, provide the follov	ving information.							
Full legal name of	Full legal name of non-individual Mackie Research Capital Corporation								
Firm NRD number 3 0 7 0 (if applicable)									
Indicate whether the person co	ompensated facilitated the distribut			al. 🔽 No 🗖 Yes					
b) Business contact inform		ion in ough a fanalig po							
1	ovided in Item 8 (a), provide the bu	siness contact informatior	n of the person being compens	sated.					
Street address		•	, , , , , ,						
Municipality			Province/State						
Country			stal code/Zip code						
Email address		1	Telephone number						
	r investment fund manager								
•	ip with the issuer or investment fur meaning of "control" in section 1.4	5		-					
	or investment fund manager		sider of the issuer (other than						
	-		·	·					
	investment fund or investment fu		mployee of the issuer or inve	stillerit fullu filariagei					
✓ None of the above									
d) Compensation details	• • • • • • • •								
	ion paid, or to be paid, to the perso commissions, securities-based com								
services incidental to the distribution	ution, such as clerical, printing, leg	al or accounting services.	An issuer is not required to as	k for details about, or report					
on, internal allocation arrangem	nents with the directors, officers or	employees of a non-indivi	idual compensated by the issu	er.					
Cash commissions paid	8,000.00	Security codes	Security code 1 Secur	ity code 2 Security code 3					
Value of all securities distributed as			W N T						
compensation <sup>4</sup>			<u> </u>	<u>.</u>					
Describe ter	ms of warrants, options or other ri	ghts Issuance of 134	,635 finder's warrants. Ea	ach finder's warrant					
	entitles the holder to acquire one additional common share at an								
exercise price of \$0.15 per share for a period of two years. Expiry date of finder's warrant is April 24, 2019.									
Other compensation <sup>5</sup>	Desc	cribe							
Total compensation paid	8,000.00								
Check box if the pers	on will or may receive any deferre	d compensation (describ	e the terms below)						
<sup>4</sup> Provide the aggregate value of	of all securities distributed as com	pensation, <u>excluding</u> option	ons, warrants or other rights o	exercisable to acquire					
additional securities of the issu	Ier. Indicate the security codes for dditional securities of the issuer.	all securities distributed	as compensation, <u>including</u> c	options, warrants or other					

a) Name of person compensated and registration status									
Indicate whether the person compensated is a registrant. No Ves									
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 name	:S								
If the person compensated is not 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 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									
<ul> <li>c) Relationship to issuer or investment fund manager</li> <li>Indicate the person's relationship with the issuer or investment fund manager (select all that apply). Refer to the meaning of "connection"</li> </ul>	octod" 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)	stment fund)								
Director or officer of the investment fund or investment fund manager Employee of the issuer or investment fu	ind 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. Prov									
Canadian dollars. Include cash commissions, securities-based compensation, gifts, discounts or other compensation. Do not report p services incidental to the distribution, such as clerical, printing, legal or accounting services. An issuer is not required to ask for deta									
on, internal allocation arrangements with the directors, officers or employees of a non-individual compensated by the issuer.	us about, or report								
Cash commissions paid 9,098.08 Security codes Security code 1 Security code 2	Security code 3								
Value of all securities     Security codes     Security code 1     Security code 2	Security code 5								
distributed as compensation <sup>4</sup>									
Describe terms of warrants, options or other rights Issuance of 121,308 finder's warrants. Each finder	ar's warrant								
entitles the holder to acquire one additional comm	non share at an								
exercise price of \$0.15 per share for a period of two years. Expiry date of finder's warrant is April 24, 2019.									
Other compensation <sup>5</sup> Describe									
Total compensation paid 9,098.08									
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 exercisab	le to acquire								
additional securities of the issuer. Indicate the security codes for all securities distributed as compensation, including options, w rights exercisable to acquire additional securities of the issuer.	arrants or other								

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 Fi	rst given name Secondary given names								
If the person compensated is not an individual, provide the following information									
Full legal name of non-individual GMP Securities L.P.									
Firm NRD number 2 1 9 8	0 (if applicable)								
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal. Ves									
b) Business contact information									
If a firm NRD number is not provided in Item 8 (a), provide the business contact in	formation 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 (sele									
B(2) of the Instructions and the meaning of "control" in section 1.4 of NI 45-106 fo	r 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 It									
Canadian dollars. Include cash commissions, securities-based compensation, gifts, or services incidental to the distribution, such as clerical, printing, legal or accounting									
on, internal allocation arrangements with the directors, officers or employees of a r									
Cash commissions paid 7,700.00 Security co	des Security code 1 Security code 2 Security code 3								
Value of all securities									
distributed as compensation <sup>4</sup>									
	e of 102 667 finder's warrants Each finder's warrant								
entitles	entitles the holder to acquire one additional common share at an								
exercise price of \$0.15 per share for a period of two years. Expiry date of finder's warrant is April 24, 2019.									
Other compensation <sup>5</sup> Describe									
Total compensation paid 7,700.00									
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>exclu</u>	ding options, warrants or other rights exercisable to acquire								
additional securities of the issuer. Indicate the security codes for all securities dis rights exercisable to acquire additional securities of the issuer.	stributed as compensation, including options, warrants or other								

a) Name of person com	pensated and re	gistration status							
Indicate whether the person compensated is a registrant. 🔽 No 🗌 Yes									
If the person compensated is	s an individual, prov	ide the name of the inc	lividual.						
Full legal name of ind	Full legal name of individual Yuck Terry								
	F	amily name	First given r	name Se	condary given names				
If the person compensated	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 perso	Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal.  Ves								
b) Business contact info	•		niougn u funding po						
If a firm NRD number is not		(a), provide the busines	s contact information	n of the person being	compensated.				
Street address	92 Christie Park	View SW							
Municipality			٦	Province/State	Alberto				
	Calgary		]		Alberta				
Country	Canada			stal code/Zip code	T3H 2Y7				
Email address	Tyuck@shaw.ca	a	F	Felephone number	4038615775				
c) Relationship to issue	er or investment fu	ind manager							
Indicate the person's relation B(2) of the Instructions and					meaning of "connected" in Part				
Connect with the iss	-				ther than an investment fund)				
		d or investment fund m			r or investment fund manager				
	the investment fun				i of investment fund manager				
None of the above	-								
d) Compensation detail		ngid to the norron id	ntified in Item 9(a) i	n connection with the	distribution Drouido all amounts in				
					e distribution. Provide all amounts in on. Do not report payments for				
services incidental to the dist on, internal allocation arran					red to ask for details about, or report				
				audi compensated by	ine issuer.				
Cash commissions p		400.00	Security codes	Security code 1	Security code 2 Security code 3				
Value of all securit distributed				W N T					
compensati									
Describe	terms of warrants,	options or other rights			s. Each finder's warrant				
	entitles the holder to acquire one additional common share at an exercise price of \$0.15 per share for a period of two years.								
	Expiry date of finder's warrant is April 24, 2019.								
Other compensati		Describe							
	Total compensation paid     400.00								
Check box if the person will or may receive any deferred compensation (describe the terms below)									
					er rights exercisable to acquire <u>cluding</u> options, warrants or other				
rights exercisable to acquir									

a) Name of person com	pensated and reg	gistration status					
Indicate whether the perso	on compensated is a	registrant.	✓ No	Yes			
If the person compensated is	s an individual, prov	ide the name of the inc	dividual.				
Full legal name of individual Watson Peter							
	F	amily name	First given r	name See	condary given names		
If the person compensated	is not an individual,	provide the following	information.				
Full legal name	e of non-individua	1					
I	Firm NRD numbe	r S		(if ap	plicable)		
Indicate whether the person	n compensated facil	itated the distribution	through a funding po	ortal or an internet-ba	sed portal. 🗸	No 🗌 Yes	
b) Business contact info	ormation						
If a firm NRD number is not	provided in Item 8 (	a), provide the busines	s contact information	n of the person being	compensated.		
Street address	Suite 1400, 110	0 W. Georgia Stree	t				
Municipality	Vancouver			Province/State	British Colum	nbia	
Country	Canada		_ Pc	stal code/Zip code	V6E 2M3		
Email address	pwaone@gmail.	com	-	Telephone number	6048801784		
c) Relationship to issue	r or investment fu	ind manager					
Indicate the person's relation						cted" in Part	
B(2) of the Instructions and a	-						
Connect with the iss	uer or investment fu	und manager	lr	nsider of the issuer (o	ther than an inves	tment fund)	
Director or officer of	the investment fund	d or investment fund n	nanager 🗌 E	mployee of the issue	r or investment fur	nd manager	
✓ None of the above							
d) Compensation detail	S						
Provide details of all comper Canadian dollars. Include ca services incidental to the dist on, internal allocation arrang	sh commissions, sec ribution, such as cle	urities-based compens rical, printing, legal or	ation, gifts, discounts accounting services.	or other compensation An issuer is not requi	on. Do not report po red to ask for detai	ayments for	
Cash commissions p	oaid 5,	600.00	Security codes	Security code 1	Security code 2	Security code 3	
Value of all securit				W N T			
distributed compensati							
compensation*							
Other compensation	on⁵	Describe					
Total compensation p	aid 5,	600.00					
Check box if the p	erson will or may re	ceive any deferred co	mpensation (describ	be the terms below)			
<sup>4</sup> Provide the aggregate value							
additional securities of the rights exercisable to acquir			ecurities distributed	as compensation, <u>in</u>	<u>cluding</u> options, wa	arrants or other	

a) Name of person com	pensated and reg	istration status					
Indicate whether the perso	on compensated is a	registrant.	V No	Yes			
If the person compensated is	s an individual, provi	de the name of the ind	lividual.				
Full legal name of individual Yuck Richard							
	Fa	amily name	First given r	name Sec	ondary given names		
If the person compensated	is not an individual,	provide the following i	nformation.				
Full legal name	e of non-individual						
	Firm NRD number			(if apr	plicable)		
Indicate whether the perso			hrough a funding po				
b) Business contact info			nrough a funaing po	intat of an internet-bas			
If a firm NRD number is not		a), provide the busines	s contact information	n of the person being o	compensated.		
Street address	49 Inverness Pa			, , , ,	,		
	[			Province/State			
Municipality	Calgary		]		Alberta		
Country	Canada		Po	stal code/Zip code	T2Z 3E3		
Email address	rcowboypi@gma	il.com	Ţ	Telephone number	4038315505		
c) Relationship to issue	r or investment fu	nd manager					
Indicate the person's relation B(2) of the Instructions and					neaning of "connected" in Part		
Connect with the iss	-				her than an investment fund)		
		or investment fund m					
				inployee of the issuer	or investment fund manager		
✓   None of the above							
d) Compensation detail		· · · · · · · · · · · · · · · · · · ·					
					distribution. Provide all amounts in n. Do not report payments for		
services incidental to the dist	tribution, such as clei	ical, printing, legal or	accounting services.	An issuer is not requir	ed to ask for details about, or report		
on, internal allocation arrang	- 		oyees of a non-inaivi	iauai compensatea by	the issuer.		
Cash commissions p	- ,	020.00	Security codes	Security code 1	Security code 2 Security code 3		
Value of all securit distributed							
compensati	on <sup>4</sup>						
Describe	terms of warrants, o	options or other rights			ts. Each finder's warrant		
					dditional common share at an or a period of two years.		
				nder's warrant is A			
Other compensation	on⁵	Describe					
Total compensation p	aid 6,0	020.00					
Check box if the p	erson will or may re	ceive any deferred co	mpensation (describ	e the terms below)			
<sup>4</sup> Provide the aggregate value	ue of all securities di	stributed as compense	ation, <u>excluding</u> opti	ions, warrants or othe	r rights exercisable to acquire		
additional securities of the rights exercisable to acquir			ecurities distributed	as compensation, <u>inc</u>	<u>cluding</u> options, warrants or other		

a) Name of person compe	ensated and registration status			
Indicate whether the person	compensated is a registrant.	No No	✓ Yes	
If the person compensated is ar	n individual, provide the name of th	ne individual.		
Full legal name of individ	Jual			
	Family name	First given	name Second	dary given names
If the person compensated is r	not an individual, provide the follow	ving information.		
Full legal name o	f non-individual Foremost Ca	pital Inc.		
Firr	m NRD number 4 3	3 9 0	(if applic	able)
Indicate whether the person co	ompensated facilitated the distribut	tion through a funding p	ortal or an internet-based	portal. 🗹 No 🗌 Yes
b) Business contact inform	nation			
If a firm NRD number is not pro	ovided in Item 8 (a), provide the bu	siness contact informatio	on of the person being con	npensated.
Street address				
Municipality			Province/State	
Country		 Pc	ostal code/Zip code	
Email address			Telephone number	
c) Relationship to issuer o	r investment fund manager		L	
· ·	ip with the issuer or investment fur	nd manager (select all the	at apply). Refer to the med	aning of "connected" in Part
B(2) of the Instructions and the	meaning of "control" in section 1.4	4 of NI 45-106 for the pu	rposes of completing this s	section.
Connect with the issuer	r or investment fund manager		nsider of the issuer (othe	r than an investment fund)
Director or officer of the	e investment fund or investment fu	ind manager 🛛 🗌 E	Employee of the issuer or	investment fund manager
None of the above				
d) Compensation details				
Canadian dollars. Include cash o	tion paid, or to be paid, to the perso commissions, securities-based comp ution, such as clerical, printing, lego	pensation, gifts, discounts	s or other compensation. I	Do not report payments for
	nents with the directors, officers or			
Cash commissions paid	3,200.00	Security codes	Security code 1	Security code 2 Security code 3
Value of all securities			W N T	
distributed as compensation <sup>4</sup>				
Describe ter	rms of warrants, options or other ri	ights Issuance of 42	,666 finder's warrants.	Each finder's warrant
		entitles the hold		litional common share at an
		Expiry date of f	finder's warrant is April	24, 2019.
Other compensation <sup>5</sup>	Desc	cribe		
Total compensation paid	3,200.00			
Check box if the pers	on will or may receive any deferre	ed compensation (descril	be the terms below)	
	of all securities distributed as com			
	uer. Indicate the security codes for additional securities of the issuer.	r all securities distributed	l as compensation, <u>includ</u>	<u>ling</u> options, warrants or other

ITEM 9 - DIRECTC	RS, EXECUTI	VE OFFICERS A	ND PROMO	TERS OF THE I	SSUER				
If the issuer is an in	vestment fund,	do not complete It	em 9. Procced to	o Item 10.					
Indicate whether the	issuer is any of th	e following (select a	ll that apply).						
Reporting issu	ier in any jurisdio	ction 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	oreign public issue	r <sup>6</sup>						
Pro	ovide name of fo	reign public issuer							
Issuer distribu	ting eligible forei	gn securities only to	o permitted clien	ts <sup>7</sup>					
If the issuer is at lea	ist one of the al	oove, do not compl	ete Item 9(a) –	(c). Proceed to Ite	<i>m 10</i> .				
<sup>6</sup> An issuer is a wholly securities that are req <sup>7</sup> Check this box if it ap clients. Refer to the de	uired by law to b plies to the curre finitions of "eligi	e owned by its direc ent distribution even	ctors, are benefic of the issuer ma and "permitted	cially owned by the de previous distrib client" in Part B(1)	reporting issuer utions of other ty	or the foreig pes of secu	n publ	ic issue	er, respectively.
a) Directors, exe	cutive officers a	and promoters of	the issuer						
Provide the following territory; otherwise s							da, stai	te the p	province or
Organization or	company name	Family name	First given name	Secondary give names					that
					Province o	r country	D	0	Р
b) Promoter infor	mation								
If the promoter listed above is not an individual, provide the following information for each director and executive officer of the promoter. For locations within Canada, state the province or territory; otherwise state the country. For "Relationship to promoter", "D" – Director, "O" – Executive Officer.									
Organization or	Organization or company name Family name Family name Residential name name name Family nam								
					Province or country	D		C	)
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 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	Skeith	D.		Richard		
	Family name	First given name		Secondary given names		
Title	Director					
Name of issuer/underwriter/ investment fund manager	QuikFlo Health Inc.					
Telephone number	4032678165	Email address	rick.skeith m	@nortonrose	fulbright.co	
Signature	(s) "D. Richard Skeith"	Date	2017	04	28	
			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 indivi	dual certifying the rep	oort			
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.