SEC Form 3 FORM 3

UNITED STATES SECURITIES AND EXCHANGE

COMMISSION

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPROVAL 3235-

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0.5

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Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person [*] Johnson Paul D	Requiring S (Month/Day	2. Date of Event Requiring Statement (Month/Day/Year) 01/10/2022 3. Issuer Name and Ticker or Trading Symbol MedAvail Holdings, Inc. [MDVL]						
(Last) (First) (Middle) C/O MEDAVAIL HOLDINGS, INC. 6665 MILLCREEK DR. UNIT 1 (Street) MISSISSAUGA L5N 5M4 (City) (State) (Zip)			lssuer (Check X	tionship of Reporting all applicable) Director Officer (give title below)	10% C	wner (specify	A Person	Year) int/Group Filing ∋ Line) by One Reporting by More than One
Table I - Non-Derivative Securities Beneficially Owned								
1. Title of Security (Instr. 4)				nt of Securities ally Owned (Instr.			4. Nature of Indirect Beneficial Ownership (Instr. 5)	
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)								
Title of Derivative Security (Instr. 4) 2. Date Exercisable an Expiration Date (Month/Day/Year)		ate	3. Title and Amount of Sec Underlying Derivative Sec (Instr. 4)			4. Conversio or Exercis	se Form:	6. Nature of Indirect Beneficial Ownership (Instr.
	Date Exercisable	Expiration Date	ration Amount Deriv or Secu Number of of		Price of Derivative Security	Direct (D) or Indirect (I) (Instr. 5)	5)	

Explanation of Responses:

Remarks:

No securities are beneficially owned.

Ramona Seabaugh, 01/19/2022 attorney-in-fact for Paul Jo<u>hnson</u> ** Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

* If the form is filed by more than one reporting person, see Instruction 5 (b)(v).

** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.