



A.L.L. HARDSHIP TRUST

Benefit Application

Last Name

First Name(s)

Firm/Practice Address

Phone Number

Email Address

Legal Services Society Vendor Number

Social Insurance Number

Please Note:

References to "Legal Services Society of BC," "Legal Services Society," or "L.S.S." in this document include the entity now also known as "Legal Aid BC" or "LABC".

References to "contracts" or "L.S.S. contracts" in this document mean tariff contracts, including LABC tariff contracts, and include additions to or expansions of existing tariff contracts resulting from new matters arising on a tariff contract.

The eligibility period for the initial application will generally be the period from the date of the first identifiable loss to the date of the application.

If funds permit, applications may be made for subsequent eligibility periods if hardship continues past the period covered in this application, or if an applicant has been found not to meet the eligibility criteria for a prior eligibility period.

Certification

Eligibility Period: I am applying for a payment from the A.L.L. Hardship Trust for the following period: _____ to _____, 2020.

I certify that:

- I reside in British Columbia.
- I am a lawyer licensed to practise law in the Province of British Columbia or was a lawyer licensed to practise law in the Province of British Columbia during the eligibility period.
- I was and remained eligible during the eligibility period to accept tariff contracts from the Legal Services Society of British Columbia (L.S.S.).
- I did not voluntarily cease accepting contracts from L.S.S. before the eligibility period.
- Prior to the eligibility period I derived a minimum of 50% of my income from [or devoted a minimum of 50% of my practice to] L.S.S. contracts.
- I am not receiving nor am I eligible to receive benefits from the Canada Emergency Benefit Account, Canada Emergency Response Benefit (CERB), Employment Insurance (EI) benefits from Service Canada, the Canada Emergency Wage Subsidy (CEWS) for the same eligibility period, or any other income assistance or supplement, or if I am receiving any such benefit, I have attached statements of the income I have received or expect to receive from them for this eligibility period. If incomplete, provide explanation on the blank page at the end of this form.
- I have attached a statement of monthly income I have received from L.S.S. since January 1, 2017.
- I have attached a copy of my 2017, 2018 and 2019 income tax returns, or if my 2019 return is not complete, a statement of income and expenses in form T2125, or a statement of income and expenses in another form, for the 2019 taxation year. If incomplete, provide explanation on the blank page at the end of this form.

- I have attached a financial statement in the form provided with this application, listing all of my current income, property, and debt. If incomplete, provide explanation on the blank page at the end of this form.
- I have attached a detailed written statement as to how my situation amounts to hardship that should qualify me for benefits under the A.L.L. Hardship Trust in the space provided at the end of this form.
- I have signed the attached consent to the release of information by L.S.S.
- I will submit the above documentation with this form or, if submitting form online, by email to hardshipfund@bclegalaidlawyers.ca.

In addition, I certify that the following applies to me:

- I have experienced a reduction in the contracts I have received from L.S.S. during the eligibility period for reasons apparently related to COVID-19 measures or effects.
- I have not replaced the income I would have received from the contracts I expected to receive from L.S.S. with an alternative equivalent source of income; and
- My income from all sources in the eligibility period was less than my expected income from L.S.S. for that period by approximately \$_____.

You must certify that the information you have provided above and in any documents you provide in connection with your application is true and correct, that you meet all the requirements set out above, and that you understand that making a false declaration is a criminal offence:

I certify to the above:

Signature

Date

Consent

The undersigned hereby provides their consent to the Trustees of the A.L.L. Hardship Trust obtaining some or all of the following information from the B.C. Legal Services Society (“L.S.S.”):

- (a) The number of contracts provided to the undersigned by L.S.S. since January 1, 2017;
- (b) The monthly payments made to the undersigned by L.S.S. since January 1, 2017;
- (c) Confirmation that throughout the eligibility period, the undersigned was a lawyer whom L.S.S. deemed eligible to accept tariff contracts to perform legal services under the L.S.S. Tariffs – General Terms and Conditions; and
- (d) Verification of the undersigned’s L.S.S. Vendor Number and that it is active.

Signature

Date

L.S.S. Vendor Number

Financial Statement

For any information in this form that you are unable to provide, please write “see note” or “N” in the space provided, and give an explanation on the blank page at the end of this application.

I, _____, of _____,
Name Firm Name

by my signature at the end of this Financial Statement, certify that the information set out in this financial statement is true and complete to the best of my knowledge.

A. Information for Prior Three Taxation Years

Please provide the following income information for the taxation years 2017, 2018 and 2019:

1. For the years 2017, 2018 and 2019, I was:
 - a. a principal or partner in the law firm: _____, from _____ to _____;
 - b. employed by _____, from _____ to _____;
 - c. self employed as a sole practitioner under the firm name: _____ from _____ to _____; and/or
 - d. unemployed: ___ from _____ to _____.

2. Total Income [Line 150] from every personal income tax return that you have filed (or summary, if 2019 not filed):

_____	_____	_____
2017	2018	2019

Copies of returns (or T2125 and/or summary for 2019) are attached: _____;

or

Copies will be sent separately: _____

3. *If you are self-employed:* for the 3 most recent taxation years:

I have attached ____ or will forward to AHT _____ the financial statements of my business or professional practice, and

I have attached ____ or will forward to AHT _____ a statement showing a breakdown of all salaries, wages, management fees or other payments or benefits paid to, or on behalf of, persons or corporations with whom I do not deal at arm's length;

4. *If you are in a partnership:* for the 3 most recent taxation years, my income and draws from, and capital in, the partnership was _____, _____, and _____;

Documentation attached: _____;

or

Documentation will be sent separately: _____.

5. *If you control a corporation:* for the corporation's 3 most recent taxation years, please provide:

a. the financial statements of the corporation and its subsidiaries, and

b. a statement showing a breakdown of all salaries, wages, management fees or other payments or benefits paid to, or on behalf of, persons or corporations with whom the corporation and every related corporation does not deal at arm's length;

Copies attached: _____

or

Copies will be sent separately: _____

6. *If you are a beneficiary under a trust:*

a. confirm that any income from the trust is included in your income as disclosed in this financial statement _____; and

b. provide the trust settlement agreement and the trust's 3 most recent financial statements.

Copies attached: _____

or

Copies will be sent separately: _____

B. 2020 Income

Please provide the following information about your total income for the 2020 taxation year:

- 1. Total Income to date for 2020: \$_____.
- 2. Total income expected for the remainder of the year: \$_____.
- 3. List all 2020 sources of income and amounts received from each to date, including practice income, employment income, partnership income, income from closely held corporations, rental income, income from trusts, Unemployment Insurance, Workers' Compensation, Social Assistance and all other benefits or sources of income:

_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____

For all of above:

Copies of statements attached: _____

or

Copies will be sent separately: _____

- 4. For all of the above or any other anticipated sources of income, list the amount of income you expect to receive for the remainder of the year. (Continue on page provided at end of application if necessary.)

_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____

_____ \$ _____

5. The total income to date for the 2020 taxation year of all other members of your household is approximately: \$ _____.

6. (If not listed above) The total child support you have received within the 2020 taxation year is: \$ _____. Amount expected during remainder of year: \$ _____.

7. (If not listed above) The total spousal support you have received within the 2020 taxation year is: \$ _____. Amount expected during remainder of year: \$ _____.

8. The total number of contracts and payments I received from L.S.S. in the last three years is:

2017: No. of contracts _____ Total payments: \$ _____

2018: No. of contracts _____ Total payments: \$ _____

2019: No. of contracts _____ Total payments: \$ _____

9. Total number of contracts you have received from L.S.S. in 2020 to date is: _____.

10. Total of payments you have received from L.S.S. in 2020 to date is: \$ _____.

11. I have attached or will forward a statement of income received from L.S.S. each year from January 1, 2017 to December 31, 2019:

Copies attached: _____;

Copies will be sent separately: _____; or

See note: _____.

12. I have attached or will forward a statement of income received from L.S.S. in 2020, to date:

Copies attached: _____;

Copies will be sent separately: _____; or

See note: _____.

C. Summary of Assets & Liabilities

- 1. List 2019 BC Assessment amounts for each property registered in your name solely or with others. (Continue on page provided at end of application if necessary.)

_____	_____
Property Address	Assessed value

_____	_____
Property Address	Assessed value

_____	_____
Property Address	Assessed value

_____	_____
Property Address	Assessed value

- 2. List all vehicles owned by you or members of your household and current values:

_____	_____
Year, make, model	Current value

_____	_____
Year, make, model	Current value

_____	_____
Year, make, model	Current value

_____	_____
Year, make, model	Current value

- 3. List all financial assets you own, including bank accounts, investments, pensions, insurance policies, and retirement savings accounts. (Continue on page provided at end of application if necessary.)

_____	_____
Name of Institution and type of account	Balance and date

Name of Institution and type of account

Balance and date

Name of Institution and type of account

Balance and date

Name of Institution and type of account

Balance and date

Name of Institution and type of account

Balance and date

4. List all other significant property owned, including personal effects, shares in private companies, art, jewellery. (Continue on page provided at end of application if necessary.)

Item

Current value

Item

Current value

Item

Current value

Item

Current value

Item

Current value

Item

Current value

- 5. List your debts and other liabilities, whether arising from personal or business dealings, by category, such as mortgages, charges, liens, notes, credit cards, accounts payable and tax arrears. Include contingent liabilities such as guarantees and indicate that they are contingent. (Continue on page provided at end of application if necessary.)

Institution/Description of Debt	Balance and date
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Institution/Description of Debt	Balance and date
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Institution/Description of Debt	Balance and date
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Institution/Description of Debt	Balance and date
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Institution/Description of Debt	Balance and date
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Institution/Description of Debt	Balance and date
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- 6. List all real and personal property disposed of during the 2 years preceding this statement. (Continue on page provided at end of application if necessary.)

Description of property	Date sold	Net proceeds
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Description of property	Date sold	Net proceeds
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Description of property	Date sold	Net proceeds
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D. Certification

I certify that the information set out in this financial statement and any additional information provided in the space provided is true and complete to the best of my knowledge:

Signed by the applicant, _____,

this _____ day of _____, 2020:

Signature

