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### **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 not meet the eligibility criteria for a prior eligibility period.

# Certification

Eligibility Period: I	am applying for a payment fr	om the A.L.L. H	ardship Trust for	the
following period: _		to		-

# I reside in British Columbia.

I certify that:

- 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 2019, 2020 and 2021 income tax returns, or if my
  returns are not complete, a statement of income and expenses in form T2125,
  or a statement of income and expenses in another form, for the 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 <a href="mailto:hardshipfund@bclegalaidlawyers.ca">hardshipfund@bclegalaidlawyers.ca</a>.

#### 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					
ou provide in connection with your application is true and correct, that you meet all						
ne requirements set out above, and that you understand that making a false						
eclaration 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, 2019;
- (b) The monthly payments made to the undersigned by L.S.S. since January 1, 2019;
- (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 the taxation years 2018, 2019, & 2020: :, from, from, under the firm name: from; to;	Name				,
the best of my knowledge.  In s  for the taxation years 2018, 2019, & 2020:		Firm Name			
rs for the taxation years 2018, 2019, & 2020: :, from, from under the firm name: from; to			-		on set out
for the taxation years 2018, 2019, & 2020: :, from, from  under the firm name: from; to	in this finan	cial statement is true and complete t	o the best of my k	nowledge.	
:, from , from under the firm name: from to; to	A. Infor	mation for Prior Three Taxation Ye	ears		
, from, under the firm name: from; to	Please provi	ide the following income information	າ for the taxation y	ears 2018, 201	9, & 2020:
, from, under the firm name: from; to	1 Forth	ne years 2019, 2020 and 2021, I was:			
, from, under the firm name: from; to					from
under the firm name: from to; to	a.	to;			, 110111
under the firm name: from to; to	b.			, from	າ
from to; to		to;			
to	c.	self employed as a sole practitione	r under the firm na	me:	
			from	to	;
		and/or			
al income tay return that you have filed	٦.	unemployed: from	to	·	
ai income tax return that you have med	u.	Income [Line 150] from every perso immary, if not filed):	nal income tax retu	ırn that you h	ave filed
2021	2. Total	//			
	a.	Income [Line 150] from every perso			iav

3.	If you are self-employed: for the 3 most recent taxation years:
	I have attached or will forward to AHTthe financial statements of my
	business or professional practice, and
	I have attachedor will forward to AHTa 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:
_	If we want to be a superior of a the composition in 2 went we continue to write a
Э.	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 conticoparately:
6	Copies will be sent separately:  If you are a beneficiary under a trust:
0.	
	a. confirm that any income from the trust is included in your income as disclosed in this financial statement.
	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:
	copies will be selfe separately

# B. Income For the Year of the Eligibility Period

	e provide the following information about your total inco hich you are applying.	me for the year of the eligibility period
2.	Total Income to date: \$  Total income expected for the remainder of the year: \$  List all sources of income and amounts received from ear practice income, employment income, partnership inco corporations, rental income, income from trusts, Unem Workers' Compensation, Social Assistance and all other income:	nch to date, including me, income from closely held ployment Insurance,
		\$
		\$
		\$
		\$
		\$
		\$
	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 you expect to receive for the remainder of the y provided at end of application if necessary.)	
		\$
		\$
		\$

	\$
5.	The total income to date for the 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
	taxation year is: \$ Amount expected during remainder of year:
	\$
7.	(If not listed above) The total spousal support you have received within the
	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:
	No. of contracts Total payments: \$
	No. of contracts Total payments. \$
	2018: No. of contracts Total payments: \$
	No. of contracts Total payments: \$
9.	Total number of contracts you have received from L.S.S. in 2021 to date is:
10	.Total of payments you have received from L.S.S. in 2021 to date is: \$
11	.I have attached or will forward a statement of income received from L.S.S. each year since January 1, 2017:
	Copies attached:;
	Copies will be sent separately:; or
	See note:
12	In lave attached or will forward a statement of income received from L.S.S. in the year of the eligibility period, to date:
	Copies attached:;
	Copies will be sent separately:; or
	See note:

# C. Summary of Assets & Liabilities

Assessed value
Assessed value
Assessed value
our household and current value
Current value
Current value
Current value
Current value
accounts, investments, pension unts. (Continue on page provide

	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, incompanies, art, jewellery. (Continue on page necessary.)		ate
	Item	Current value	

5.		nortgages, charges e contingent liabili	, liens, notes, credit cards, accou ties such as guarantees and indic	
	Institution/Description of Debt		Balance and date	
	Institution/Description of Debt	Balance and date		
	Institution/Description of Debt		Balance and date	
	Institution/Description of Debt		Balance and date	
	Institution/Description of Debt		Balance and date	
	Institution/Description of Debt		Balance and date	
6.	List all real and personal proper statement. (Continue on page p			
	Description of property	Date sold	Net proceeds	
	Description of property	Date sold	Net proceeds	
	Description of property	Date sold	Net proceeds	

# 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, 2022:		
Signature		
0.0		

# **Additional Information**

In this space you may provide additional information relating to financial hardship experienced during the eligibility period due to loss of L.S.S. contracts, supplementa information relating to the financial statement or other parts of your application, or explanations for missing information:

Additional Information, Cntd			
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