Court File No. 98-CV-141369 CP00

ONTARIO
SUPERIOR COURT OF JUSTICE

BETWEEN:

DIANNA LOUISE PARSONS, deceased by her Estate Administrator, William John Forsyth,
MICHAEL HERBERT CRUICKSHANKS, DAVID TULL, MARTIN HENRY GRIFFEN, ANNA
KARDISH, ELSIE KOTYK, Executrix of the Estate of Harry Kotyk,
deceased and ELSIE KOTYK, personally

Plaintiffs

and

THE CANADIAN RED CROSS SOCIETY, HIS MAJESTY THE KING IN RIGHT OF ONTARIO and
THE ATTORNEY GENERAL OF CANADA

Defendants

and

HIS MAJESTY THE KING IN THE RIGHT OF THE PROVINCE OF ALBERTA
HIS MAJESTY THE KING IN THE RIGHT OF THE PROVINCE OF SASKATCHEWAN,
HIS MAJESTY THE KING IN THE RIGHT OF THE PROVINCE OF MANITOBA,
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THE GOVERNMENT OF THE NORTHWEST TERRITORIES,
THE GOVERNMENT OF NUNAVUT and THE GOVERNMENT OF THE YUKON TERRITORY

Intervenors

Proceeding under the *Class Proceedings Act, 1992*

Court File No. 98-CV-146405

BETWEEN:

JAMES KREPPNER, BARRY ISAAC, NORMAN LANDRY, as Executor of the Estate of the late
SERGE LANDRY, PETER FELSING, DONALD MILLIGAN, ALLAN GRUHLKE, JIM LOVE and
PAULINE FOURNIER as Executrix of the Estate of the late PIERRE FOURNIER

Plaintiffs

and

THE CANADIAN RED CROSS SOCIETY, THE ATTORNEY GENERAL OF CANADA and
HIS MAJESTY THE KING IN RIGHT OF ONTARIO

Defendants

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HIS MAJESTY THE KING IN THE RIGHT OF THE PROVINCE OF ALBERTA,
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Proceeding under the *Class Proceedings Act, 1992*

No. C965349
Vancouver Registry

In the Supreme Court of British Columbia

Between

Anita Endean, as representative plaintiff

Plaintiff

and

The Canadian Red Cross Society,
His Majesty the King in Right of the Province of
British Columbia, and The Attorney General of Canada

Defendants

and

Prince George Regional Hospital, Dr. William Galliford,
Dr. Robert Hart Dykes, Dr. Peter Houghton,
Dr. John Doe, His Majesty the King in Right of Canada, and
His Majesty the King in Right of the Province of BC

Third Parties

Proceeding under the *Class Proceedings Act*, R.S.B.C. 1996, C. 50

CANADA

PROVINCE OF QUÉBEC

DISTRICT OF MONTRÉAL

NO : 500-06-000016-960

SUPERIOR COURT

Class action

DOMINIQUE HONHON

Plaintiff

-vs-

THE ATTORNEY GENERAL OF CANADA
THE ATTORNEY GENERAL OF QUÉBEC
THE CANADIAN RED CROSS SOCIETY

Defendants

-and-

MICHEL SAVONITTO, in the capacity of the Joint Committee member for the province of Québec

PETITIONER

-and-

FONDS D'AIDE AUX RECOURS COLLECTIFS

-and-

LE CURATEUR PUBLIC DU QUÉBEC

Mis-en-cause

CANADA

PROVINCE OF QUÉBEC

DISTRICT OF MONTRÉAL

NO : 500-06-000068-987

SUPERIOR COURT

Class action

DAVID PAGE

Plaintiff

-vs-

THE ATTORNEY GENERAL OF CANADA
THE ATTORNEY GENERAL OF QUÉBEC
THE CANADIAN RED CROSS SOCIETY

Defendants

-and-

FONDS D'AIDE AUX RECOURS COLLECTIFS

-and-

LE CURATEUR PUBLIC DU QUÉBEC

Mis-en-cause

JOINT MOTION RECORD
VOLUME VI OF VIII
(Joint Committee Motion to Allocate 2019 Excess Capital)

May 8, 2023

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INDEX

VOLUME I

2019 Phase Two Financial Sufficiency - Allocation

This is the 1st Affidavit
of Chya R. Mogerman in this case
and was made on 16/Oct/2015

VANCOUVER
DEC 02 2015
SUPREME COURT SCHEDULING

Court File No. 98-CV-141369 CP00

ONTARIO
SUPERIOR COURT OF JUSTICE

BETWEEN:

DIANNA LOUISE PARSONS, MICHAEL HERBERT CRUICKSHANKS, DAVID TULL,
MARTIN HENRY GRIFFEN, ANNA KARDISH, ELSIE KOTYK, Executrix of the Estate of Harry Kotyk,
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BETWEEN:

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SERGE LANDRY, PETER FELSING, DONALD MILLIGAN, ALLAN GRUHLKE, JIM LOVE and
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No. C965349
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and:

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Proceeding under the *Class Proceedings Act*, R.S.B.C. 1996, C. 50

CANADA PROVINCE OF QUÉBEC DISTRICT OF MONTRÉAL	**SUPERIOR COURT** **Class action**
NO : 500-06-000016-960	**DOMINIQUE HONHON** Plaintiff -vs- **THE ATTORNEY GENERAL OF CANADA** **THE ATTORNEY GENERAL OF QUÉBEC** **THE CANADIAN RED CROSS SOCIETY** Defendants -and- **MICHEL SAVONITTO, in the capacity of the Joint Committee member for the province of Québec** PETITIONER -and- **FONDS D'AIDE AUX RECOURS COLLECTIFS** -and- **LE CURATEUR PUBLIC DU QUÉBEC** Mis-en-cause

CANADA PROVINCE OF QUÉBEC DISTRICT OF MONTRÉAL	**SUPERIOR COURT** **Class action**
NO : 500-06-000068-987	**DAVID PAGE** Plaintiff -vs- **THE ATTORNEY GENERAL OF CANADA** **THE ATTORNEY GENERAL OF QUÉBEC** **THE CANADIAN RED CROSS SOCIETY** Defendants -and- **FONDS D'AIDE AUX RECOURS COLLECTIFS** -and- **LE CURATEUR PUBLIC DU QUÉBEC** Mis-en-cause

AFFIDAVIT

I, CHYA R. MOGERMAN, of 400 – 856 Homer Street, Vancouver, British Columbia, Offices Services Assistant, AFFIRM THAT:

1. I am employed at Camp Fiorante Matthews Mogerman ("CFM") in office services including providing back up and assistance to the legal administrative assistants and the paralegals. I have personal knowledge of the facts to which I depose in this affidavit, except where I state them to be on information and belief, and where so stated I believe them to be true.

2. I am informed by Sharon Matthews, Q.C. that the Joint Committee sought input from Class Members and Family Class Members to assist them in identifying issues to be considering when making recommendations to the Courts on allocation of actuarially unallocated funds based on their experiences living with the hepatitis c virus ("HCV") and with persons who are infected with HCV. In this regard, CFM received written submissions from Class Members and Family Class Members and hosted consultation sessions with Class Members and Family Class Members.

3. Since August 2015, I have been involved in the 1986-1990 Hepatitis C Settlement Agreement file including the receipt, review, and recording of Class Member and Family Class Member written input (by mail and email) on the application to allocate surplus assets and in attending consultation sessions.

4. To date, CFM has received 105 written communications from Class Members and Family Class Members by and on behalf of a total of 157 Class Members and Family Class Members.

5. Attached as **Exhibit "A"** to this affidavit are the written submissions received from Class Members and Family Class Members to October 15, 2015.

6. To the extent possible, Exhibit "A" excludes those communications that Lise Carmichael-Yanish and I have identified as being communications also received by other Joint Committee members in provinces other than BC. The submissions do not include communications that were purely administrative (eg: change of address) or do not provide information, commentary or suggestions that the Joint Committee can use to inform the recommendations it makes to the Courts.

7. The communications appended at Exhibit "A" have been redacted to remove names, addresses and telephone numbers to protect the privacy of the Class Members and Family Class Members.

8. I am advised by J.J. Camp, Q.C., Sharon Matthews, Q.C., Lise Carmichael-Yanish and Catherine Polder that they have spoken on the telephone with a number of Class Members and Family Class Members. Some of those calls were for the purposes of putting the Class Members and Family Class Members in touch with the Administrator in order to address a question or issue pertaining to compensation. Other calls amounted to oral submissions made by the Class Members and Family Class Members similar to the written submissions made. On those calls, persons were encouraged to send in a written submission which could be circulated to the Joint Committee and included for submission to the Courts and many did.

9. Attached as **Exhibit "B"** to this affidavit is a written submission received from the Public Guardian and Trustee of Manitoba.

10. I attended consultation sessions held in Vancouver, Edmonton and Saskatoon arranged for Class Members and Family Class Members.

11. At the consultation sessions which I attended, Sharon Matthews presented back ground information as to why the consultations were being held and sought input on the various types of compensation available under the 1986-1990 Hepatitis C Settlement Agreement and any other comments or suggestions those in attendance wished to make. She advised those present that the Joint Committee wants to hear input on how these benefits work, whether they fall short of adequate compensation and if so, how.

12. The Vancouver consultation session was held on August 12, 2015. There were approximately 40 persons present in person. The report from the webcast indicated that approximately 69 persons signed on to the webcast throughout the 2 hours. Generally, the persons present who spoke and who sent comments via the webcast identified themselves as persons infected with hepatitis c ("HCV"), family members of persons infected with HCV, and in two cases, members of support groups including the Canadian Hemophilia Society and HepCBC.

13. At the Vancouver consultation session, the following comments were made by the persons present and in online submissions.

Loss of Income and Loss of Support

(a) One person expressed the concern that if the current therapy is successful (the virus is cleared) a person could be "kicked off" loss of income without taking into account whether they are able to go back to work.

(b) HCV infected persons who are unable to work lose pension contributions and benefits and neither of those are included in the loss of income compensation paid.

(c) Where an HCV infected person's spouse or other family member has to stop work or decrease work to care for the HCV infected person and take up the work the HCV infected person did for the household and family unit, there can be loss of income, loss of pension benefits and loss of employment benefits that are not compensated at all.

  (i) An example was given of a family business run by a husband and wife. The husband was infected with HCV and when his health deteriorated his wife was unable to run the business on her own while providing care and support for her husband. They had to shut the business down and so both livelihoods were lost.

  (ii) Another example was given where an HCV infected person's spouse had to cut back on her work hours to be able to manage the care of her HCV infected spouse needed and to pick up the slack of the household work that he could not do. This resulted in her losing her benefits (because she was working part time instead of full time) and reduced contribution to her pension, which placed the family under greater financial stress.

(d) The payment of loss of income and loss of support on the "three best years" does not take into account that they may have had an opportunity in the future to earn more based on what others in their profession or field are earning.

(e) Persons who are infected as children who do not have an established earnings history on which compensation can be based and are not compensated based on their potential.

(f) Where a person is infected as a child and is disabled as a child so does not enter the workforce, the parents will provide for the child but when they are gone, the child must subsist on the loss of income payments (based on industrial average) and will not be able to claim disability insurance, obtain a mortgage (if the child cannot get life insurance), etc. It was observed that the needs of HCV infected persons who were infected as children will increase while the financial ability of the parents decrease (due to aging and retirement).

(g) A person who has been infected for many years but not disabled from working observed that while she was able to continue working, she was not able to progress in her position because the disease prevented her from pursuing extra training she needed to advance.

(h) A hemophiliac HCV infected individual said that because he received MPTAP (which would have been deducted from loss of income payments) and because he became sick in life at a time before he had a chance to build his earnings record, he opted for loss of services which is much less than the loss of income compensation he deserves.

(i) Retraining to re-enter the workforce after successful anti-viral treatment should be made available.

(j) There was discussion from more than one person about increasing the retirement age of 65 for loss of income and loss of support claims at least for self-employed persons or industry-specific instances and given that mandatory retirement has been lifted in Canada.

(k) A successful business owner who employed 36 people could not keep it going and lost his business. The family had to get a loan to keep the family home and he could not afford to finance his daughter's post-secondary education.

(l) The daughter of a deceased HCV infected person is concerned about her mother who is getting older and her loss of income (support) payments will cease in February 2016 (due to the assumed age 65 retirement of the deceased HCV infected person).

Loss of Services

(m) The current $16.50 per hour rate does not equate to the cost of replacement services and 20 hours per week is too low. One individual indicated that she pays $37.50 per hour to hire replacement services.

(n) The burden of an HCV infected person not being able to do services around the home falls on the uninfected spouse who is also often trying to make up for the financial issues if the infected person is unable to work as well as trying to care for the infected person.

(o) It is hard to measure what a person who was infected as a child would have done around the house to make an application for loss of services based on the standard of comparison to what a person did before being infected. It is often the case that the person's spouse or parents has always done the household work for the person.

Exhaustion of Health Plans and Lack of Insurability

(p) The Canadian Hemophilia Society is aware that the cost of direct anti-viral drugs is causing some people to exhaust their annual or lifetime limits on employer sponsored or private benefits packages. The Joint Committee should investigate this issue further;

(q) An infected person advised that the costs of treatment covered by BC Pharmacare caused her to max out on the annual amount Pharmacare pays and she now as to cover the costs of her monthly thyroid prescription medication.

Cost of Care

(r) An infected person at level 6 described positively the benefits he had been able to access and how they helped.

(s) A person currently at level 6 said she needed the cost of care benefits before reaching level 6, especially when on treatment for Pegetron and when her viral load became very high. Since she was single mother, the burden of her illness fell on her daughters who did not have a functioning parent and who had to help care for her. She became isolated from her family.

(t) A man who is infected with HCV and whose wife was also infected with HCV and died talked about how when he was treated, he had severe side effects including memory loss, fatigue, pain and sleep walking. His daughter cared for him and was worried about leaving him alone, especially due to the sleep walking. He has lingering side effects which were difficult for everyone to deal with;

(u) A person said that his or her spouse (emailed comment) had to take off time work to help and because he or she was not at level 6, there was no compensation for this.

Out of Pocket Expenses

(v) A class member at level 6 is not well enough to drive himself to appointments. He receives compensation for a driver under cost of care, which he appreciates, but he does not receive compensation for the cost of the meal for the person accompanying him. In addition, he sometimes has to cancel doctor appointments when he is too ill to make the trip and those cancellation costs are not reimbursed.

(w) A person who lives outside of Vancouver had to travel to Vancouver for medical appointments was not well enough to travel on her own so her sister accompanied her. She had to pay her sister and there was no compensation for that.

Treatment

(x) A hemophiliac advised that the new treatment has caused excessive bleeding into his joints.

(y) A person raised the issue that the Plans require persons to use coverage in private health care plans but there are privacy issues to consider when making a claim and disclosing HCV infected status.

Issues Not Recognized in Compensation

(z) Those living in larger cities (including those who have made that choice in order to access the specialists in HCV) have higher cost of living than those who do not and adjustment should be considered that takes that into account.

(aa) One family had to re-locate in order to access treatment for their daughter who was infected with HCV as a young child. The costs of relocation and the disruption to their lives is not recognized in the compensation paid.

(bb) Acute illness right after infection is not recognized.

(cc) Compensation for the treatment of serious ongoing psychological issues that class members being to experience at levels 4 or 5 is not covered.

(dd) The lives of family members, especially spouses and children, of persons living with HCV are disrupted, including extreme stress requiring counselling and there is no compensation for that.

Family Member Compensation

(ee) The child of an elderly HCV infected person talked about how her father who was infected with HCV was the healthier of his two parents until he became disabled from his HCV. He has now passed away and his spouse, who has Alzheimer disease, has become the responsibility of the children to care for when previously their father played that role. The amount paid to her for her father's loss and her mother for her father's death in way matches what her father would have done for his wife had he not been infected with HCV.

(ff) The daughter of parents who were both infected with HCV (one parent passed the infection to the other) spoke of how she, as the eldest of three siblings became a "parent" to her younger sister when her mother died. The $5,000 payment she received on her mother's death was nothing compared to the loss.

Communications

(gg) A number of persons had questions about their own files and benefits. Those questions are not recorded here. Ms. Matthews spoke to some of them after the public portion of the meeting was over to assist with their individual questions or potential claims. She advised some to contact the Administrator to clarify their entitlements. I am advised by Ms. Matthews that she spoke to some of them also on the telephone after the meeting.

(hh) Persons appreciated the opportunity to voice their concerns with other persons living with the same disease and would like to have a more organized forum, perhaps through the Administrator, to continue to communicate with each other and the Joint Committee.

14. Attached as **Exhibit "C"** to this affidavit are submissions made by and issues addressed by individuals who attended the Vancouver meeting by way of webcast. The attached submissions do not include correspondence regarding the logistics with respect to attending the webcast, (for example, signing in and/or sign in difficulties), nor do they include requests for changes of address.

15. The Edmonton consultation session was held on August 27, 2015. There were approximately 25 persons present. The persons present usually prefaced their questions or comments by stating their background as either a person infected with HCV or a family members of a person infected with HCV. At the Edmonton consultation session, the following comments were made by the persons present about the compensation benefits.

Fixed Payments to Persons Who Have Died

(a) There was a question about the benefits persons who died before or after January 1, 1999 would have received and what benefits their family members were entitled to.

Loss of Income and Loss of Support

(b) The son of a deceased person commented that his father's ability to build his pension was impacted by his infection with HCV and the deceased's widow is living on a smaller pension as a result.

(c) Assumed retirement at age 65 means persons who have been receiving loss of income take a significant cut when they have to switch to loss of services;

(d) One attendee said she would like to see the age of retirement (the cutoff date for loss of income benefits and loss of support benefits) moved from age 65 to 67.

(e) The spouse of a deceased person who had his own business said that when her husband got sick, he could not run his business. She had to step in and run it instead of working at her own job. So the family lost her income and the loss of income payments he became entitled to did not compare well with what he could have earned in the real world. She cannot retire because they just do not have enough. The compensation is only enough to exist, which is not enough.

Loss of Services

(f) Concern was expressed about the end date for loss of services claims to the dependants of a deceased person which is the person's life expectancy (assuming the person did not have HCV). Cutting off benefits to an elderly person creates hardship when the person has come to rely on the payments.

(g) A second person talked about this and said she is going to be cut off loss of services at the end of the year and will have to sell her condominium.

(h) The amount for loss of services ($16.50 per hour and 20 hours per week) does not cover the costs of snow removal, house cleaning, contract costs for house maintenance.

(i) The spouse of an HCV infected man who will lose his loss of income payments this year said they cannot survive on loss of services payments at $16.50 per hour and 20 hours per week. They do not have an RSP and although he is 80% disabled, he struggles to keep working because they cannot afford him not to work.

Cost of Care

(j) The spouse of a deceased person infected with HCV said that when her husband was at level 6 they were able to have care in the home that worked for them because of the cost of care coverage.

(k) The son of an HCV infected person said that his parents lived in their home which cost $3,000 per year to run and then his father had to have assisted living and moved to a home that costs $3,600 per month.

Out of Pocket Expenses

(l) The wife of an HCV infected person who reached level 5 and received treatment talked about the many treatment trips and check-ups and trips which amounted to once every 2 weeks over eighteen months. He would not have been able to drive himself, she had to take him.

Treatment

(m) An individual had been advised (not clear whether by the provincial health care plan or some other entity/person) that he would not be covered for the cost of treatment because his disease is at a very low level. (Ms. Matthews advised that he should contact the Administrator because regardless of what threshhold provincial drug plans have, the Plans will pay for treatment if it is recommended by the treating doctor and not covered by a private or public plan).

(n) There was a concern about what the status of claim would be if a person was cured after treatment. One attendee reported that her husband has been cured but is still suffering flu symptons, insomnia and remains disabled.

(o) An individual who received two courses of treatment advised that he had numerous side effects. He had to leave his job as a professional driver.

Issues Not Recognized in Compensation

(p) The spouse of a deceased HCV infected person had her own losses because her husband and helped her with her mail route and could not continue to do that and they had to sell their home to move to the city to be closer to where he received treatment.

(q) The spouse of a person infected with HCV was prevented from getting a really good job and lost meaningful employment opportunities because she had to spend more time at home to help her husband when he was sick.

(r) A woman discussed her son who was infected at age 14. He is now age 40 and has been successfully treated. But his whole life has been disrupted. He has no loss of income claim but she is concerned that this type of circumstance will be lost in the conversation. His loss is hard to quantify but is very real.

(s) An HCV infected person who is a single mother expressed concerns about the fact that she cannot get life insurance.

Family Member Compensation

(t) The child of a deceased HCV infected person spoke about how his mother has Alzheimers and his father would have cared for her had he not died of HCV prematurely. The children now both bear the financial burden of their mother's care costs.

(u) An attendee commented that the distinction between payments for children over and under age 21 did not make sense to her. She observed that the payments do not help with education of children who have lost a parent. She commented that the disease destroys families and she knows that there is an upper limit on claims of around $300,000 and it seems to her that family member compensation compares poorly to that.

(v) Another attendee commented negatively on the under 21 over 21 distinction for family member benefits and said that compensation should cover a child to age 24 and cover education costs to pursue post secondary education.

(w) A woman who received $6,700 (likely $5,000 in 1999 dollars) when her father died said the amount "doesn't cut it".

Late Claims

(x) A person reported that she was diagnosed in 2007 but did not learn about the class action until 2015.

(y) There was a question about whether persons who did not know they were infected before the deadline are allowed to claim.

Lump Sum Benefits vs. Ongoing Payments

(z) Persons who are older and in the retirement range need the stability of ongoing payments so they can make ends meet. Lump sum benefits may be beneficial for other people.

(aa) One person who receives an annual payment for loss of income says that semi-annual would be better for financial management issues.

(bb) One person questioned whether paying out the monies now in a lump sum would be better than paying legal fees and administrative expenses.

Allocation to Persons Other Than Class Members

(cc) The wife of an HCV infected person said that her husband had researched and been distressed by the facts underlying how he was infected. The last thing she wants to see if the money going back to the government.

Communications

(dd) A person asked about the ability to talk to the courts directly about the allocation process.

(ee) A number of persons had questions about their own files and benefits. Those questions are not recorded here. Ms. Matthews spoke to some of them after the public portion of the meeting was over to assist with their individual questions or potential claims. She advised some to contact the Administrator to clarify their entitlements.

16. The Saskatoon consultation session was held on September 2, 2015. There were 15 persons present in person. The persons present identified themselves as persons infected with HCV and family members of persons infected with HCV.

17. At the Saskatoon consultation session, the following comments and suggestions were made by the persons present:

Loss of Income and Loss of Support

(a) A man was self-employed as a realtor and had 5-6 years when his earnings were not what they should have been. He was over the age of 65 and so did not qualify for loss of income.

(b) A woman whose husband died of HCV said that she has benefited from the compensation which has allowed her to realize some of the dreams that she and her husband had. She also appreciated that the Administrator followed up with her about the type of compensation she was entitled to.

Loss of Services

(c) A woman whose mother died of HCV described how her father lost his caregiver (because he developed dementia). The couple's daughter is now playing that role. She is applying for loss of services for her father as a dependant but $16.50 per hour and 20 hours per week does not even begin to cover what he needs and what her mother would have provided had she not been sick with HCV.

(d) An elderly man says the fatigue and medical appointments he undergoes are overwhelming him and he needs help around the house. He sees the doctor every two weeks.

Exhaustion of Health Plans and Lack of Insurability

(e) A woman reported that her HCV infected mother was denied life insurance which would have really helped her father who has dementia.

(f) Another individual commented that travel insurance is not available to persons with HCV.

Cost of Care

(g) A woman whose son was infected with HCV and died of liver failure moved home as an adult when he became too sick to care for himself. They received cost of care payments but he needed care "24/7" and so the cost of care did not cover what she was providing.

Issues Not Recognized in Compensation

(h) The adult daughter of an HCV infected mother described how her mother's deterioration from HCV coincided with her father's onset of dementia. Her mother was not able to care for her father because of her HCV infection and so she, their daughter, had to move to be closer to her parents and become their caregivers. Her mother has now passed away and so her father was completely deprived of having his wife care for him (which she would have done) and the children have to step in and play that role.

Family Member Compensation

(i) A woman described how she was 13 years old when her father, a hemophiliac, passed away from HCV. She, the daughter, looked after the family as her mother was back and forth to the hospital with her father. She, the daughter, now has 4 children, 2 of whom are hemophiliacs. She is terrified that they will be infected (with a blood borne illness) through the treatments they need to stay alive. She wishes her father were here to help her hemophiliac children with their situation. The money she received as the child of a deceased person did not compensate for this loss.

(j) A man advised that his nephew had died of HCV and his mother has spent 4 years caring for him as he died. He described the compensation she received, $5,000, as embarrassing.

(k) A woman whose husband died from HCV infection said the $25,000 payment she received was a “slap in the face”. She cared for him while trying to hold down and job and went back and forth between work and home and worked in the evenings when he was sleeping and did not need her.

(l) A woman described how she lost two sons and a brother to HCV. All were hemophiliacs. She describes the compensation as a “spit in the bucket” compared to the loss.

(m) Two separate family members said that the categories of family members who are paid can be “wrong” if those family members had nothing to do with the HCV infected person, especially during the illness.

Funeral Expenses

(n) A woman whose mother passed away from HCV infection said they had a minimal a funeral as possible and the compensation fell about $2500 short of the cost.

Lump Sum Benefits versus Ongoing Benefits

(o) One person pointed out that aging people need the money before they die and so a lump sum is best.

(p) Several persons expressed the view that paperwork and filling out forms needs to be minimized. One person said that it seems like a “whole new job” and she has to summon the energy to sit down and do the work to complete the forms.

(q) Ongoing benefits and communication bring the pain of losing family members back – it is like reliving it all over again. So a lump sum is better than having to keep applying for benefits and filling out forms.

Allocation to Persons Other Than Class Members

(r) One woman expressed that she didn't understand why the government would even be able to make a claim for the surplus. She compared the fund to a bank account. If one invests wisely, they will reap the benefits of interest. The surplus is not government money, it is for the class members and therefore the government should not be entitled to receive the benefit of the surplus.

Communications

18. A number of persons had questions about their own files and benefits. Those questions are not recorded here. Ms. Matthews spoke to some of them after the public portion of the meeting was over to assist with their individual questions or potential claims. She advised some to contact the Administrator to clarify their entitlements.

AFFIRMED BEFORE ME at Vancouver, British Columbia, on 16/Oct/2015.

A Commissioner for taking Affidavits for British Columbia

CHYA R. MOGERMAN

SHARON D. MATTHEWS, QC
BARRISTER & SOLICITOR
856 Homer Street, 4th Floor
Vancouver, BC V6B 2W5
Tel: 604-689-7555 Fax: 604-689-7554

This is Exhibit" A "referred to in the
affidavit of CHYA R. MOGERMAN
sworn before me at VANCOUVER, BC
this 16 day of OCTOBER 2015

A Commissioner for taking Affidavits
for British Columbia

J. J. CAMP Q.C.

400-856 HOMER ST

VANCOUVER BC V6B 2W5

August 05, 2015

TO JOINT COMMITTEE MEMBERS

Re: Federal Government Surplus for the Hep C 1986-1990 Victims

I am writing to you in regards to the surplus of the monies put assigned for the Hep C victims from the blood transfusions from 1996 to 1990. It should be disbursed evenly to the hep c victims.

First I would like to thank you for my earlier settlement. It helped with things I needed prior, during and after my Hep C treatment.

1. I had to purchase a new bed so I could sleep more than one hour at a time.
    a. Which helped with my time during my hep c treatment as my body was in extreme pain from the shots I had to take for the treatment. As well as losing 3\4's of my hair.
    b. The treatment made me feel like I had a severe flue for 5 months out of the 6 month treatment.
    c. I had to leave work after the second dose of treatment as I could not focus on my job. As I need to have a clear mind and energy for the physical aspect of it.

2. Before the treatment I had a lot of running around to do prior to my treatment. I did not own a vehicle. I had to walk or bus everywhere. When I was diagnosed with Hep C
    a. I purchased an electric scooter so I could go from work to my appointments without having to take off more time by using the bus saving up to several hours.
    b. Which in turn I didn't lose money from my salary due to all the appointments.
    c. After my hep c treatment I developed fibromyalgia due to not being able to sleep.
    d. I could hardly walk. The scooter helped big time. I had to attend a fibromyalgia class for 3 months. To learn how to cope with this new disease.
    e. Again missing work.
3. I tried to put money aside but during my treatment I developed a gambling issue. Once the treatment stopped I started to go less and less. Went to counselling, Then I stopped.
4. It's been over six years since the treatment and no sign of an addiction issue. Which has been great?
5. The remainder of the money was supposed to be put aside just in case I developed more health issue due to the hep c and treatment.

I have been working since after the end of my treatment. I've had several health issues that took some time to get under control.

1. I have suffered from chronic kidney infections due to the immune system being compromised from treatment.
2. The infections were so bad I ended up at the hospital 4 times in one year. Now I got them under control.
3. My crohn's has been stable.
4. My fibromyalgia is painful. I go to the gym twice a week to try and relieve some of the pain. I also look after my diet.
5. I can't take meds because since my hep c treatment my body does not respond well to pain medication. Even over the counter pain relievers like Tylenol, Advil.
6. I have started to sleep walking during and after treatment which I have never done in the past.
7. Have been working with my family doctor to get it under control, nothing has been working at this point. I've even tried meditation, natural path. It doesn't work
8. For a while I had a low kidney function after my hep c treatment. Which I get checked every year. I never had this problem before the treatment.
9. I still can't sleep more than 2 hours at a time due to the soreness and pain.
10. My liver has a scar on it due to the Hep C, which will never go away.

The scar and chronic pain are what making me write this letter. I feel the surplus monies should be spread amongst all the hep c victims that had approved cases. I am 53 years old. I know I could get liver cancer due to the scaring on my liver. It could happen any time. I did not ask for the tainted blood, they know who donated the blood, and that he died from hep c. I had no choice.

1. The monies would make it easier to be able to retire a little earlier.
2. Instead of me having to wait until I'm 67 I could retire at 60. As I have a retirement plan through work. But don't quite have the number of years for a larger pension.
3. Retiring earlier would make a big difference for me.
   a. Have a better quality of life while I can. Not having to worry about my body being so sore that I have to call in sick again. It would take the added stress off. Less stress makes for a much healthier better body.
4. I love my job, but my stiip is high due to my fibromyalgia. I'm off work more than the average employee. Every year I have had to get a doctor's certificate for being off.
5. I can't afford much now due to the amount of time I have to take off.
6. I walk back and forth to work every day as well. I do everything I can to help to relieve my pain and keep my body healthy.
7. I have had to raise two sons through all this. They are both adults now and doing great.

The Hep C took a while to be diagnosed for me. Over the years prior to treatment they couldn't figure out why I was in so much and why I had very little energy. I went though many blood tests, MIR's, Cat Scans, Ultra Sounds, Bowels test them thinking it was my crohns, it was by fluke that Dr. Buckley decided to do a Hep C test. Since I never used drugs in my life or knew of anyone that had it.

When he told me I was in shock. How could I afford the treatment? I was lucking because I worked for the Provincial Government who allowed me to take the time off for treatment. At 75% of my salary. I had great support at home and through my doctors.

Even though they say I was cured. There are days where I get that feeling in my head and body I felt during my treatment. My energy has never gotten back to normal. This has caused me weight issues. I will never be 80% ever again due to the Hep C and treatment. And I live in fear that one day it could come back or I get cancer from the scaring.

That money was put aside for us victims and it should be given to us. Not given back to the government. Have us sign a waiver no matter what level we are at. That we cannot receive any more compensation after this. I would accept that.

I did not feel the compensation was enough. The Hep C destroyed my energy and my health. My crohn's attach were always sporadic not like what I feel every day now. It's every day. Some days it feels like hell. But I keep going because I have to. Even if I had the money. It would just make things a little easier. Supplement my income when I can't work some days. I have never asked for disability. I kept working. Some individuals have gotten millions from class action suits each. I do not feel we are being unreasonable or greedy.

Again I did not get his way on my own. I went for surgery to save my life and came out with tainted blood that could have ended my life and for my unborn child. Because my younger son also had to be tested. Which thank fully he did not have it. That hep c took away my sons mom for a long time with health issues from it. I will never get that time back.

Please really consider. Dividing that money up evenly would give me a piece of mind in case one day I do develop liver cancer. It's only fair. **The government didn't get the hep c we did.**

Signed By:

From:
Sent: August-06-15 2:00 PM
To: J.J. Camp
Subject: 8690classaction

hi received letter about 86-90 settlement as a survivor thus far and living in fear of liver damage but not knowing the extent and won't know till its too late as a biopsy is not possible as iam a hemopheliac factor nine defficient this disease has altered my life dramaticly and its impact is severe and symptoms are many i believe members should enjoy money while they are alive and not dead which step 4 thru 6 are designed for on the claim so further compensation for people with this deadly disease should be warranted and not held back after they are dead i will be attending august 12th at 7pm UBC

From:
Sent: August-06-15 4:33 PM
To: J.J. Camp
Subject: Joint Committee - Hep C settlement '86-'90

JJ Camp,

I received a notice from Joint Committee asking for input regarding the surplus in the 86-90 fund. I am a Hep C victim who has benefitted from this settlement.

As you are likely aware, new and very successful treatments are now available for Hep C in Canada. These treatments are also very expensive. The Trust Fund requires members to first access their private insurance before asking for funds for treatment from the Fund. This also includes government health plans, such as Pharmacare in BC.

I think that it is right to ask members to access private insurance first for these new treatments, but I question the inclusion of public health care, which we all know is financially strained to say the least, in the definition of "private". Perhaps the Settlement Fund with its surplus should consider full funding of treatment for qualifying members who only have public insurance, which really isn't true "private insurance". This might help others who are seeking treatment for Hep C or some other expensive disease. Also, I don't believe that pharmacare or the like is equal in all provinces, so this condition may be taxing some provinces more than others.

Respectfully,

From:
Sent: August-06-15 4:36 PM
To: J.J. Camp
Subject: hepc8690

Good day

I received the letter today regarding the surplus of funds. I don't really know what input you want from me other than the fact that my mother died 1998 from liver failure caused from the tainted blood transfusion she received. She was taken far too early from us. We should of had a lot more years together with her. We were somewhat compensated for her death but how much is a life worth and all that she could of brought to my life and my childrens lives. It took almost five years to fill out all the paperwork properly at that time and she died before we even settled. I will always be somewhat bitter about how and why she died. So unnecessary.

I don't know if this information is what you were looking for but if you have any further questions you may contact me.

From:
Sent: August-07-15 8:23 AM
To: J.J. Camp
Subject: Hep C response

Death impacts all that knew the individual during the grieving process. Money does not replace that individual.
After time the impact is less on many, most people move on with their lives.
I think if you are going to distribute any money it should go to the Living Spouse (or their estate) and if no spouse the living parents (or their estate).
Those are the people who have been impacted the most and they will know in their heart how to distribute it.
Because of the time, many of the recipients could have passed away themselves and distributing money to them will have no value, this might even be money passed on to individuals thru an estate who didn't even know the individual.
Please give this some thought.

Thanks

8th Aug 2015

Dear Sirs
Thank you for your letter re
"Hepatits" class action suit. I wont
be at the meetings as their in Vancouver
but I shall look forward to the outcome

My Mother Mrs. has
been dead since 2000, I
received one payment of $10,728.78.
after her death. Hope you are able
to distribute $236. million in a fair
way. Please find the file number
with all information
have all information in my file.

Thank you.

Sincerely.

of the above address.

Hepatitis ‘C’ Joint Committee August 9, 2015
P O Box 2370, Station D,
Ottawa, Ontario K1P 5W5

It is with much interest that I wish to make contact with you regarding the recent informative communication respecting families of those whose relative was diagnosed with Hepatitis ‘C ‘as a result of a blood transfusion..

My brother, ’, received such a blood transfusion... The Hepatitis ‘C’ diagnosis was a crucial diagnosis in life - it came as a tremendous shock to the family and, we believe, helped bring about his early demise.

The thought that there now exists a possibility of helping determine a course of action that should, or could, be taken with <u>surplus funds</u> held in the Joint Committee’s Trust Account, is overwhelming indeed, and I would, as brother wish to be a part of that planning process.

There are factors of course that will determine how I might in any way be a part of the decision. It is my view that the first consideration of course should be for those people who were a part of that time frame, contracted the illness through blood transfusion, and who may still be living. Further thought I believe could and should then be directed to the families of those now deceased.

The decision made by this Joint Committee to give consideration to the views of Family Class Members is indeed to be commended, as there is prevalent thought that there were some means of testing for Hepatitis ‘C’ virus, prior to the Joint Committee time frame. I am a resident of Halifax , have been a resident all my life, as was my brother , and the tragic results of his blood transfusion are still with us. It will be costly to attempt to attend some of the meetings planned by the Committee, and I am unable at this moment to state that it will be possible. We look forward however to further communication from the Committee and appreciate this opportunity to convey thoughts of the Family.

Sincerely,

August 9, 2015

Attention: Joint Committee
Specifically, J.J. Camp Q.C.
Camp Fiorante Matthews Mogerman
400-856 Homer st
Vancouver, BC

RE: Estate of (deceased) & (widowed wife)

I thank the committee for the recent letter advising its intention in regards to the Hepatitis C settlement and the notice of surplus funds. I value the committee's effort and engagement in ensuring that the surplus is handled correctly and have confidence that due diligence will be exercised on behalf of the victims and families of the Hep C settlement.

In regards to your request for input on the topic of "areas of the settlement you feel fell short" I would like to offer that my deceased husband was diagnosed in early 2000 at the age of 74 years and was refused trial drugs for treatment to extend his life due to his age. Unfortunately he passed in 2003 after a long and painful fight and succumbed to his disease. The original settlement took far too long and in doing so the funds were not available to my husband for quality of care during his last few years of his fight. This placed undue stress on both and our family both financially and mentally for something that he was a victim of due to improper care and screening at the time.

In regards to the area of "how you think the surplus should be used" I am shocked at the amount of surplus and feel that the funds should be dispersed to the victims and families affected by Hep C contamination. A comment was made that the courts have the rights to put all or a portion of the surplus into a trust fund but it does not clarify what that trust fund would be for and its future intentions. I wish to understand this concept as I feel that this settlement was originally established and fought for those who were affected and not for the federal government to misuse or to use for their established inadequacies.

I trust this is all you require,

From:
Sent: August-09-15 11:50 AM
To: Lise Y. Carmichael; J.J. Camp
Subject: The day life changed for a loving normal family

Work had been busy, putting in 12 hour days was taking its toll on me, being in Fort McMurry is a harsh environment. Very tired, coughing and run down I headed to the local hospital emergency room late in the evening around 10pm on April 6,2001. (Strange how one remembers the time and date) My name was called and the Dr. said he wanted to do some routine blood work, after what seemed an eternity, he and a nurse entered my exam room, cloaked in gowns and gloves and masks, it was very unnerving to say the least. The shock on my face was apparent as the Nurse look at me with sorrowful eyes, putting her gloved hand on my shoulder while the Dr. told me ever so gently that I was infected with Hep C. Hep C????????? what is that I asked, Aides????
Where did I get it????? Why would I get it, How long had I had it?????? what is it??? what do you give me to get over it???? So many questions I had, but they had questions of there own that took precedence over mine. Was I a drug user? if so had I ever shared needles with anyone? how many partners had I had unprotected sex with? Had I ever had a blood transfusion? My answers I remember clearly were, NO! NO! I was divorced from a police officer and am a very hard working family orientated woman! YES I DID HAVE MANY BLOOD TRANSFUSIONS!

With that the Dr. made arrangements for me to see a specialist the next day at his office.
Again!!! when he came into the room he was wearing a gown, gloves and mask, to be honest I do not remember anything he told me all I know is I was scared to death, that I had infected my children, my boyfriend, the people I worked with unknowingly! I told a co worker and she immediately told the rest of my staff, from that point on I was alienated form everyone one of my staff was pregnant she quit as she said she had to protect her unborn child from possibly being infected from being in contact with me. I endured the isolation,and alienation, finishing my contract on July 15,2001.
I headed home to Spruce Grove Alberta and waited for my children to come home so I could tell them the terrible news. My son came home from Kansas, my daughter from boarding school.
As gently as I could I reiterated what the Dr. Had told me and I will never forget the reaction!
As much as (17) and (14)tried they recoiled and were repulsed.
From that point on they kept their drinking cups in their rooms did not want to eat off the plates asked I keep my eating and personal utensils and razors and tooth brushes and towels in my room. It was HORRIBLE!!!!!!!!!
My Dr. Jeff Moss, had been a friend for many years we traveled together and spent the holidays together, he suggested that the children be tested for their own level of comfort and mine, after testing them he made the arrangements to come to the house and explain to them first hand on how I contracted Hep C and what we needed to do.They tested negative and that gave them some sense of being not contaminated.
He tried to take the terror we had, and make it liveable. After what happened to me in Fort Mac, I never never told anyone, nor did my children as it would mean they would be austersized from friends and community, that their mother must have been or is a drug user or was dirty, promiscuous, doing things she shouldn't have.
It didn't matter that they didn't have it, parents wouldn't have let my children's friends come over or hang around because maybe just maybe their children would catch it! It was the worst time of my young children's

life, first the divorce then this, this terrible dirty secret! No young child should have ever had to carry this horrible burden! .My son got into to drugs and was angry he said it was my fault I ruined his life, my young daughter pulled away from me, hating me she asked to move out and stay with a family friend agreed and for a year made the mother she felt safe with and not scared of the secret she had to carry being exposed.

She could have her friends over and not worry I would infect them. was gone he went back to the States and on to Brazil he did not want to be around, he didn't call or want me in his life as I had already done (in his mind) enough damage.

Dr Moss (Jeff) told me of a compensation package and I moved forward with it. I was awarded $10,000.00, at the time I used it for the children I felt no amount of money would EVER or COULD EVER REPAIR THE DAMAGE THAT THE TAINTED BLOOD SCANDAL WOULD FIX.

In December of 2001 I had been working in Vancouver for a company and was let go from my job in April of 2002, they found out I had Hep C and let me go, they gave me a shining recommendation, but said they felt it was in everyone's best interests. I did not fight it I headed back home to Alberta and upon getting home got a call from Jeff he was happy and excited

, he asked if I had taken interferon while in Vancouver, because the test results from Dr. Vincent Bain were back and that I had cleared the virus!!!! He said he would come over and I was to collect and bring her home, and could I reach , he would tell them, it would change things so much for them!

I call and asked if she could drop off on the Tuesday evening, we contacted at his dad's he agreed to come, it seemed like an eternity since we had seen each other and this was a very very uncomfortable meeting.

Jeff walked in all smiles and in his English accent saying "hello hello wonderful news"

He told the children and reassured them that the nightmare was over no more worries, no more stigma, no more hiding this secret, could move home and have friends over, could be normal and go back to school. moved home, did for awhile but due to his drug use we had another horror to deal with, we ,with the help of Jeff we start to help try and put my children back together, to try to heal them! rides bulls for a living the dream of being an Engineer was lost! today still lives at home with me she is now 29, 34 he has quit using drugs, and still has self destructive behaviors and at times is lost. He is not in a relationship and drifts from one place to another. is a property Manager and is not in a relationship, both are very damaged from the day our lives changed from Hep C! Both are compulsive cleaners and still cannot and will not s hare ANYTHING! hair brush, toothpaste they bleach the bathroom steady, its so sad, both have had counseling, since that time my dear friend Dr.Jeff Moss passed away and we miss him very much, he could always make things better. My relationship with my children is wonderful today we love each other, and as they have gotten older they have been able to put things into prospective and understand what happened through adult eyes.

My health never got better, since the evening around 10pm on April 6,2001 my health challenges have gotten life threatening, I now have had to date 4 massive blood clots, one which bisected my femoral artery and I am on blood thinners and ASA and in constant pain from the damage. The hematologist try's to figure things out but is at a loss, the surgeon states the damage cant be fixed due to the blood disorder. The government denies me CPP disability so that I could maybe stay home or maybe work part time. Each day I drag myself to work and do the best I can, my children have had to live with my medical emergencies, no young child and then into adult hood should a child have had to deal with this!

If the government of Canada does anything they should pay the surplus to those that have endured the pain and suffering that has been heaped on the families of unsuspecting HEP C victims.The life of myself and my children were forever changed because of this horrible disease

for you see from my letter so many more events transpired.

Would my son have become an Engineer, would my children have maybe married and had happy healthy relationships, would they not been compulsive, would I have maybe not lost the time with them that I did,

the jobs I lost and the friends I lost, would I still have had them as friends, would I have had excellent health and gone on to remarry and be happy?
To this day I am still alone and on ,2015 I turned 58 alone.

I Thank Canada for addressing this horrible scandal and I thank all those that have been involved in making or trying to make things right in regards to the misinformation that this disease comes with, the rights of Hep C survivors and their families.
This is such a small part of my story and I Thank you Lise for asking me to write it, for I am grateful for the first time to be heard. I pray that is some small way my story like many makes a difference and that should the Government do anything the residual monies are divided up between those of us that have suffered. I would give it to my children for they have paid the ultimate price, their childhoods!

08-11-15 P03:55 -IN

August 9, 2015

J.J. Camp Q.C.
Camp Fiorante Matthews Mogerman
400 – 856 Homer Street
Vancouver, B.C.
V6B 2W5

Dear Sir/Madam:

I am one of the Hep C 1988-1990 Settlement Class Members. When receiving this letter it occurred to me that it would be nice to attend a session in Alberta if not Calgary. However with less than 4 days to make arrangements it would be nearly impossible to attend consultation sessions in Vancouver, or Eastern Canada even if I could afford it. I would dearly love to have 10 minutes of the Committee's time to describe my life with Hep C, the hardships and ongoing lack of wellness in my health the ongoing frustrations of never having enough energy to do the things I used to or to play with the grandsons.

Prior to 1988 I had started my own business in Trucking & Excavating and was doing pretty well, after 1988 I had to scale back by more than half as the pain and suffering from the Hep C was overwhelming. Now more than 27 years later we are still trying to operate our business. , my wife had to learn how to drive my gravel truck and work alongside of me to make the company succeed. Every year we face the possibility of not making ends meet as I'm handicapped by headaches, stomach cramps and overall feeling sick. The $20,000 Hep C Loss of Income tax free pension barley pays the overdraft at the bank for the shortfall in our income.

My wife and I have been living below the poverty line since the 1988 infection of Hep C. That is on less than 32,000.00 taxable incomes for the two of us. When we had a review many years ago we indicated that since Hep C was acting as my employer we should be given aT4A so that income tax withheld and CPP withheld should be given the same benefit as any other taxpayer in that we would have the ability to have that portion refunded if qualified. Since the loss of Income does not allow for that provision and it would have made a great deal of difference in our daily lives we feel that part of that should now be returned. Since that money does not go to the general revenue for taxes nor does it appear to be in the CPP fund to top up any of my neither CPP retirement pension nor death benefit.

Now that we see a surplus we feel that perhaps all of the Class Members of the Hep C fund should be re-evaluated and share in that surplus. Facing a decision of retirement for both my wife and myself we would not have enough money from the fund, OAS and CPP to pay our mortgage or any other unexpected emergencies which are bound to come up in the next years of our lives.

I'm hoping that you will have a session in Alberta so that more of Western Canada can be part of the process and have a say in this consultation.

Thanking you in advance for your time and consideration.

08-12-15 P12:50 IN

[redacted]

August 9, 2015

J.J. Camp Q.C.
Camp Fiorante Matthews Mogerman
400 - 856 Homer Street
Vancouver, B.C.
V6B 2W5

Re: 1986 - 1990 Hepatitis C Settlement Agreement

It was a devastating experience after dealing with a serious cancer surgery to learn that I had received tainted blood transfusions from a trusted blood service. Months of dealing with treatment and uncertainty was mentally and physically exhausting.

In view of this I believe that the surplus money should be divided evenly among all Persons affected by tainted blood during this time frame.

Thank you for your consideration.

Sincerely,

E-mail:

August 9/15

1986-1990 Hepatitis C Settlement Agreement

In August 2012 my husband was diagnosed with hep c from a blood transfusion in 1987. This has been the worst journey we have ever been on. The medication (peginterferon alfa-2a & ribavirin) that they gave him left him with alot of side effects that he never had before. He got a little lose of hearing, memory and now has blood in his stool. It seems everytime we turn around something else pops up. The docter told him not to drive the car or his motorcycle. This has been going on for 4 years now, and basically been a nightmare. is very depressed and was a good provider. He now feels like his life is useless and has no purpose in life anymore. He worked for the shipyard as a firewatch chargehand on the submarines, and loved his job. Now he doesn't even know if he will ever be able to go back. I don't believe that the monies that he has received comes close to what we have already put out for lose of work & lose of services. All we would like is for this nightmare to be over, and compensated for what it is worth for him & his caregiver (his wife) So please take this into consideration.

Thank You :-

Claim #

(2

To Whom it May Concern

My name is , I was infected with Hep C in 1989, from a blood transfusion at Vancouver Generale I received the tainted blood after a Cancer operation.

I did not know I had the disease for 10 years. But was given a call from Vancouver generole in 1999

I was told by my doctor I should hot drink Alcohol, and should not use pain killers. (Both hard on a taxed liver)

I quit drinking & taking any drugs. TO prevent my liver from further damage.

(3)

Many times I could have used pain killers or even had a drink, But I did not.

Over the years I was told that if a cure was developed. I would be on the short list for Cure.

Now that a cure is availible, they tell me that I can not be cured because my levels are low (Because I looked after my self) and the cure is $90,000xx

So in my ~~opoinion~~ opinion the surplus millions should be used to cure me from the disease, and every other patient that was infected. This should be done before any of the surplus is realocated.

Phon

August 11, 2015

J.J. Camp Q.C.
Camp Fiorante Matthews Mogerman
400-856 Homer Street
Vancouver BC V6B 2W5

Harvey Strosberg Q.C.
Sutts Strosberg LLP
600-251 Goyeau Street
Windsor On N9A 6V4

Michel Savonitto
SAVONITTO & ASS. INC.
468, rue St-Jean
Suite 400
Montreal QC H2Y 2S1

Kathryn Podrebarac
Podrebarac Barristers Professional Corporation
Suite 701 151 Bloor Street West
Toronto On M5S 1S4

Dear Sirs:

Re: 1986-1990 Hepatitis C Settlement Agreement Application to Allocate All or a Portion of the Monies in the Trust Fund Deemed to be Surplus in Favour of Class Members and Family Class Members

I am Class Member of the 1986-1990 Hepatitis C Settlement Agreement. As such my input has been requested on the areas of the settlement that I feel fall short and how I think the surplus should be used. I am unable to attend any of the consultation sessions so I am writing to the Joint Committee Members to voice my input.

The area I feel falls short is the coverage of drug costs directly related to the treatment of Hepatitis C. The costs must first be recovered from extended medical coverage before they can be submitted for coverage by the Trust Fund. This means lifetime limits must be exhausted from extended medical plans before coverage can begin from the Trust Fund. To ensure coverage for other potential medical conditions I had the very difficult task of arranging alternate funding for the extremely expensive drug that was prescribed. All drug costs related to Hepatitis C should be covered by the Trust Fund before any other sources.

Other than this one area I feel very strongly that the supposed surplus should <u>not</u> be removed from the Trust Fund. I do not want the Fund to be depleted in this manner. As we have seen in recent years the financial climate can quickly and easily change. This could significantly reduce funds in the Trust and compromise its ability to support the Class Members and Family Class Members.

Sincerely,

Mr. J. J. Camp Q. C.
Camp Fiorante Matthews Mogerman
400 - 856 Homer Street
Vancouver, BC V6B 2W5
Telephone: 604-331-9520
jjcamp@cfmlawyers.ca

August 11, 2015

Re: Input from Class Members and Family Class Members
Hepatitis C January 1, 1986 – July 1, 1990 Class Actions Settlement
Claim # , , d. , 2010

Further to the Notice to Class Members which I received on August 4, 2015, I would like to submit the following comments for consideration by the Joint Committee in determining how best to allocate the surplus in the Trust Fund.

I am a Family Class Member. My dear wife , a former schoolteacher, died in 2010 after long and terrible illness, the victim of a Hepatitis C transfusion. She was blessed for many years with quality of life, able to travel and enjoy good times with family and friends, but her steady decline in recent years made it impossible to take part in normal daily activity. She required constant care. In 2008, our son gave up his contract work with the Government of BC in order to help me. The last few years in particular can fairly be described as the defining period of our lives. Nothing in my prior career with the Calgary Police Service prepared me for all the emergencies and trials and tribulations. It was isolating, as other people do not want to be around such illness. My son and I formed a routine, day and night, that I think could be compared to that of a soldier under the most stressful and exhausting circumstances. We cared for my beloved in our home to the end.

To this day, I can be doing something unrelated and some incident hits with a jolt, and I wonder what I could have done differently or how I could have made some things easier. There is this constant second-guessing of yourself. The feeling of helplessness is indescribable. It is impossible to discuss openly, and anyway, nobody wants to hear about it. My son and I remember, and that's what matters.

My understanding is that new medication is available and/or undergoing clinical trials that could make a real difference for others whose disease has not progressed to the same extent, especially among those who are younger. I would expect the cost for such treatment to be considerable, but in time would expect such cost to go down and amount to less in comparison to all the things that were required to care for a situation such as that experienced by my wife.

I mention these things to make a point. Each patient is at a different stage in coping with their infection. Each case has its own costs and horrors. Furthermore, each family is different. Some of those infected have smaller or larger immediate families, different caregivers, different coping strategies, and require different services. Existing procedures for Loss of Services and Cost of Care are sufficiently responsive and do not require any revision. (In that regard, I want to acknowledge the great care and compassion that I received from a nurse named Joan Fortier at the Claim Centre when I needed help with the required forms.)

I submit that the only fair way to deliver the surplus to all Class Members and Family Class Members is to do so on a "household" basis, i.e., the Class Member and Family Class Members as a single unit, with each "household" unit receiving an equal allocation across the entire Class, divided equally. That way, "households" where the infected person has already passed away will receive exactly the same portion of the surplus as those where the infected person is still battling.

I understand that the "financial sufficiency review" for the Class Action is held every three years. This should also be when any future surpluses are identified and distributed in like manner.

I trust that my suggestion is clear, and hope it is helpful. Please let me know if I can help in any other way.

Respectfully,

Submitted by email and regular mail

CLAIM # –

1986-1990 Hepatitis C Settlement Agreement

Hello, my name is

On Dec. 26, 1986 I became ill with Bacterial Meningitis. I was taken to Lion's Gate Hospital where *I was transfused with more than 100 units of tainted blood*.

At the time of my illness, I was a nursing supervisor at St. Mary's Hospital in New Westminster. I was 42 years old. My healthy life ended. I was permanently disabled and I have been unable to work or take care of myself properly for the last 29 years.

I am now 71 years old and will soon require full time assisted living. My pensions will not cover the cost of assisted living. The financial sufficiency of the Trust Fund falls short of meeting my day-to-day cost of living expenses.

I request that the Committee disburse the surplus of Trust Funds as soon as possible to the remaining Class Members to ensure we will have the opportunity to survive our remaining years without further fear and humiliation.

____

Signed

From:
Sent: August-12-15 12:04 PM
To: J.J. Camp
Cc:
Subject: 1986 - 1990 Hepatitis C Settlement Agreement

Dear Sir:

I am responding via email to the correspondence that was forwarded to me (personally and as the widow of my husband's estate who died as a result of receiving contaminated blood during open heart surgery) and to both of my daughters as we are all currently outside of Vancouver and cannot attend the meeting scheduled today at Robson Square.

After a family discussion, we feel that the surplus monies that were invested in trust from the class action suit should be completely paid out to the victims of the tainted blood scandal and to their families or heirs, as the case may be.

Sincerely,

From:
Sent: August-12-15 2:21 PM
To: J.J. Camp
Cc: info@hepc8690.ca
Subject: 1986-1990 Hepatitis C Settlement Agreement

To Whom it May Concern:

I recently received a package requesting input for the Joint Committee regarding how the surplus should be used.

I will explain briefly how this experience has effected me without going into too much detail as it is still painful to recall.

My Common-law husband was informed in about 1996 that he may be infected with Hep-C through a blood transfusion. In that same year I had just started working for Public Transit in Vancouver and was looking forward to a long and secure career with them. I was 31. decided to opt for the treatment being offered at that time which was a combination of Interferon and Ribavirin.

Within a very short time he fell quite ill, and was very lethargic.

Months later he was diagnosed with non-hodgkin's Lymphoma and began treatment with many set backs.

I no longer can remember the length of time that all of the different symptoms and effects went on for. He was terminal for months and in palliative care. Eventually, he went into remission and his health improved somewhat.

In the years to follow we had to deal with his constant pain, mainly in his feet and legs, an after effect from chemo. He became dependant on prescription pain medication: Demerol, Fentanyl patches, oxycodone....to name a few.

I had applied for a job as a relief Control Operator for Skytrain and started in 1997. I remained relief for the years to come as I could not manage the 12 hour rotating shifts on a full time basis. health fluctuated from week to week and his dependency on the meds became worse. He had overdosed a few times and also broke bones from falls and brittle bones due to the medication.

passed away June 30, 2007 after a month on life-support at Royal Columbian's ICU. I was a widow at 42.

I was grateful for the settlement from the Hep-C claim. I continue to receive a yearly payment for "loss of Services in the Home" about 16000.00.

I believe my benefit will cease in the year 2017 as this is when would have met his average life expectancy.

I am currently sharing a Control Operator position at Skytrain with an employee with health problems so I work a half schedule. I am able to get by

on this income but my career potential was never fully realized.

Even though the pain of those years with has dissipated with time. I am still experiencing the effects. I have blocked out the miserable parts and choose

to think only of the good times with him and our lives together. I still think about him every day.

I have a very low tolerance for stressful situations or large social events, which effects my personal relationships.

I tend to spend much of my time alone, walking my dog and working in the garden and am very protective of my mental well being.

I am 51 now.

I feel that the surplus should be used to continue some support of the families and survivors of the transfusion victims. Either in the form of continued yearly payments

or a lump sum payment. I do not believe that these funds should be held for some future catastrophe as this money was awarded to all of us who suffered dearly and

paid the ultimate price.....in so many different ways.

I thank you for your time and I hope this is helpful in some way.

From:
Sent: August-12-15 7:08 PM
To: J.J. Camp
Subject: Hep c 86/90 - Joint Committee

Dear Sir/Madame.

My name is i and my Claim # is :.

Briefly, the facts of my case are as follows. My mother, i, died on , 2000 from liver cancer caused by the hepatitis c virus. She was infected during a surgery at Mount Sinai Hospital in the early 1990's. At the time of her death, and some years before, I was disabled from lyme disease and totally dependent on my mother's care and services. I am still disabled and receive CPP disability payments of a little over $600 every month. It is my only source of income now and over the last few years I have spent almost all my savings as it impossible to exist on $7,300 per year. Previously I had been receiving supplements of approximately $13,000-14,000 annually from the fund created by the Settlement Agreement. These payments were terminated on October 1, 2012 which would have been my mother's life expectancy.

Soon after that determination I had appealed but my claim was dismissed by the Referee, Mr. C. Michael Mitchell, on November 14, 2013. I understand that Mr. Mitchell could not rule otherwise as the Settlement Agreement appears not to anticipate circumstances like mine. Mr. Mitchell however recognizes that some remedy should be found and he put his, and my, concerns to Justice Perell. Justice Perell then in his decision of December 16, 2013 considering my predicament invited the Joint Committee to make submissions to his court.

Therefore, I respectfully ask the Joint Committee to consider and contemplate my case and include it in its agenda. The original intent as set out in the Settlement Agreement was, as far as possible, to compensate for the tragedy and devastation caused by the tainted blood supply. Close to three years now that intent and spirit have not been fulfilled in my case. So, again, I ask you to help me to advocate on my behalf in the proceedings. I am, of course, willing and available to cooperate and work with the Joint Committee in any manner to advance my case.

Lastly, I have the following questions: Is there a "friend of the court" in the proceedings now? If not, is there a plan to name one?

Yours truly,

J.J. Camp Q.C.,
Camp Fiorante Matthews Mogerman,
400 - 856 Homer Street,
Vancouver, BC, V6B 2W5
604-331-9520

August 12, 2015

To whom it may concern: (J.J. Camp Q.C.)

YES the Joint Committee MUST apply to the Courts to keep ALL of the surplus and that it be allocated in favour of Class Members and Family Class Members! Please insure our well being, now and in the future as we age! Our lives are in your hands

Areas of the settlement that I feel fall short and the surplus should be used for? Some things that come to my mind are

- TRANSPORTATION. I know you have a claim form but wouldn't a yearly bus pass be easier. More consideration for the fact that we are ill and yet still have to get ourselves through life IE. busses, gas, taxies, parking, ferries, shelter etc And we have to find the money first then fill out the form and wait to be reimbursed. Who can afford to be well, see doctors, get therapies etc. Make it easier more inclusive
- PERSONAL CARE AND HOME CARE/CLEANING More support in getting and paying for these services. Quality of life should be for everyone. If you are being evaluated by LTC the result can be devistating. IE I'm only qualified for ONE shower a week. Can you feel clean and presentable at ONE shower a week? LTC no longer covers home cleaning So NO support with floor washing, toilet cleaning, fridg/oven/appliance cleaning. Long Term Care personal care costs me $300.00 a month which is the ceiling. If I paid for 2 hrs a day for 5 days a week per month it would be over $300.00. But No home cleaning is covered by LTC. Finding a qualified, reliable, affordable (minimum wage is going up to $15.50 per hour, but most cleaners want $20-30.00 per hour), with training, english speaking cleaner is very difficult and expensive. More concern and financial helps is

needed in this area. Cleanlyness and Quality of life are important to sick and ageing people. Homecare, personal care, cleaning are a big problem.

– HEALTH/HEALTH CARE PLANS/HEP C. How to get healthy and stay healthy? Who pays for what or NOT. HealthCare Plans only cover 6/8 visits to physio therapists, massage, accupuncture etc. They don't pay for exersise classes, gymses, community center classes for exersise, yoga, dance, any thing that would help keep you strong. HealthCare Plans only pay 80% of allowable Rx or treatment the rest is up to me to pay. My 30 thousand Wheelchair is covered 80% but the outstanding amount is approx 6 Thousand dollars. Who covers maintenance, service, new tires, new batteries? What about, teeth, CPAP masks, eye glasses, hearing aids, podiatrists, exercise equipment, etc. These all effect my health, well being, stress level and finances. not to mention food and shelter. I think these areas deserve a closer look before surplus is given away.

– FORMS, FORMS; RECORD KEEPING, PLEASE keep it simple after all some of use have health issues. GEN 12 FORM I find hard to understand and fill out. (I have mentioned 2 yrs in a row but no response, or change). What about the things I can't do, that my PAID LTC ~~Pers~~ Personal care worker does or no one does? How to account for that time? I often combine a number of tasks like bills, banking, hair cut, groceries, Rx etc in one outing because they are close together. How do I break them down especially if I stopped for a break and lunch or people stopped me to talk? Somethings just never get done like floor cleaning, furniture dusting, oven, fridge, appliance cleaning, window washing because I can't do them, LTC don't do them and I can't afford to pay to have a cleaning service do them. Why does this form not cover Wheelchair (POWER) service and maintenance or Walker maintenance? OUT OF POCKET AND UNINSURED TREATMENT/MEDICATION EXPENSES FORM. I forget what it covers or what isn't. I forget to keep the receipts and put them in a safe place I'll remember. Cross reference with my Health Care Plan. It gets too confusing and complicated. I get tired, foggy headed and just don't remember.

I have no suport in this area. Could reporting be made easier? Or done differently? If forms are not filled out accuratly or not at all then Class Members and Family Class Members are not being served. No claims being made should tell you something.

- QUESTION - Why is there a surplus? Are we dieing at a rate faster than expected? Are families being covered adaquately? Are Hep C 1986-1990 Claimants being covered adaquately? Does the 1986-1990 Hepatitis C Settlement Agreement need to be revisited, reviewed, revised, updated?

- QUESTION - The statement, in item 4, states: that it is agreed that assets exceed liabilities .... for these applications. I don't find this document Phase 2 Sufficiency Schedual very specific in stating what the Federal Government wants to use the mony ($236 million) for or what the Provintial and Territorial government wants to use the mony for. This surplus mony should be used for Class Members and Family Class Members before it is given to any Government. Give sufficient concern to our future as we age with Hep C. I am worried about my future. I am worried about surviving in the community or surviving in a facility. Who is going to manage my Hep C Claim paper. Who is going to advocate for me. Everyone has their own agenda, they have to work with in the various ministries or organization mandate or they lose their job. So were does that leave me. The whole system is not working. May be you need to help more!

- SHELTER/FOOD Costs are going up. What happens when I can't buy what I need. No matter were you live if you can't pay your rent, housing charge, morgage you are asked to vacate. But were do you go. I live in one of the Government subsidized Co op in a handicapped unit. Because we were a lady Coop there is NO subsidy available. So if I can't keep up with raising rent I'm out. Were will I find another handicapped unit. Basic needs are becoming a problem for everyone how much more for sick, fixed income people. There will be more poor. Perhaps Shelter and basic needs need to be looked at and the money (surplus) be used to elleviate some of these problems for Hep C Claimants.

What about burial costs? Widows pensions?

I am a single woman living on a fixed income retired early due to illness I can best describe my issues but how much worse must it be for families, the spouse/caregiver and the children.

The cost of living is up, shelter is up, food costs are astronomical. Wages are going up to $15.50 per hour for minimum wage. Do I earn (pention) at $15.50 per hour? How will I cover health & food services. My ability to maintain my current lifestyle is being challenged as never befor and this has an effect on my health. The ability to provide myself with home care, house cleaning (cleaners) window washers, delivery services, exercise and transportation is challenged as never befor. This all add stress which inturn effects my life and health. At the same time I am aging as if being sick wasn't enough. And the Gov. is of no mind to help.

I am also being left behind and out of the circle because I don't have a computer. That makes me feel disenfranchised. One of the reasons I don't have a computer is the cost of internet. The reason I don't have a good exercise program is cost to get physiotherapy, cost to join a gym ~~is~~ a barrier. The other reasons ~~that~~ are concerns for me, how to take care of myself when Im tired/exhausted, and were is my voice when I'm too tired and sick to advocate for myself and all Hep C 1986-1990 Claimants Class Members and Family Class Members.

A line from a song goes "Look around all you see are sympathetic eyes" I don't want sympathetic eyes. I want a voice, I want help, I want problems solved, I want improvement, I want quality of life, for me and all 1986-1990 Class Members and Family Class Members Claiments/Victimes.

Thank you for this opportunity to have a voice.

COPY "IMPACT STATEMENT"

Joint Committee
UBC Robson St
HSBC Hall Rm C680

Aug 12 2015

To accurately answer the question: "How has being infected with Hep C impacted my life?" I must disclose how I was infected in the first place.

In 1984, I was 17 and diagnosed with Stage 3 b, nodular sclerosing Hodgekin's Disease, cancer of the Immune System, 12 tumors, spleen involved. Between the ages of 17 3/4 and 20 years old, I would under go a multitude of tests, surgical procedures, and torturous treatments.

Four treatments to be exact;
first course, MOPP/ABVD chemotherapy
9 months bi weekly, the cancer
came back! Second course, 6 weeks
~~Ra~~ Radiation therapy, the cancer
came back! Third course, An
Autologous Bone Marrow Transplant
(now called Stem Cell transplant)
I was the 9th person in BC to recieve
that treatment for cancer. Highly
expermental at the time. Basically
they stop the body and re start
it. Hopefully shocking the
cancer OUT of the body.
It was at this point I was
infected as it was the only

time during my cancer battle I needed blood transfusions. I would not find out until years later of the infection. Fourth course, was another 6 weeks radiation therapy, front and back as much as they could dose me with, without killing me! Nov. 18, 1986 Was my last cancer treatment I have been cancer free ever since.

Even though the doctors told me I'd recieved so much cancer treatment, I would be unable to have children! Five years out of treatment I got pregnant and naturally gave birth to a daughter. Five and a half years Later I would naturally carry & give birth to a second daughter! I have been very ~~bed~~ Blessed with life although hard fought. Unfortunately when my youngest was a year old I got a "Letter" from Red Cross Blood Services requesting I get my blood tested as I may have be in contact with the Hepatitis C Virus.

The wind completely knocked out of me! Numbness enveloped my concicousness. It felt as if I had been given another "Death Sentance."

I was a struggling single mother, raising two little girls, alone, living below the line of poverty, barely existing on Social Assistance, trying to negociate undiagnosed medically induced PTSD (Diagnosed Nov 2014)

Knowing my potential greater than my lot in life. I busied myself raising my girls, being a good mother. My little family started to suffer the more symptomatic I became...
My girls struggled as I got sicker and less able to run after them. They got older and

more stressed the sicker I became.

Then came along Pegatron/ Ribavirin treatment. Jumping at the hope I sign up! I had EVERY REACTION other than Kidney failure and heart failure! My girls watched, helpless as I suffered and my health declined. I was not able to get out of bed Some times or get off the couch... Never mind socialize with the girls, clean house, or cook. I suffered just as I had suffered back in the day during cancer treatment. I looked and FELT like I had one foot in the grave!

After the required weeks of treatment with out successful viral load change, I was taken off of it. The only HOPE... Failed! It would take me a full year to bounce back after that failed treatment. It was NOT an easy road isolated, discouraged, sick & depressed... it was one of the lowest times of my life! We struggled as a family, financially emotionally, mentally, physically. I had resolved myself that I was damaged goods, less of a person some how... certianlly infectious and unwanted. My life's blood forever a thing to be terrified of. I lived, existed, isolating my self from relationships so I would never infect Someone! any one! My girls well versed to Keep away from my blood ALWAYS! I would panick at the sight of my blood. Eventually I found a job I could enjoy, living secretly, under the wire to protect my girls and my self from the stigma and discrimination that comes along with "Infected blood."

For 17 years that's how I lived waiting for the bottom to fall out or the other boot to drop.
The Short falls in the system are silently too great to measure! Words alone can never lend truth to the experience or lend voice to the internal fear of not being alive for my girls! The words "Terrified of my blood" can not take into account the full measure of the experience. It has been isolating and exhausting to protect "everyone" from my blood!

When a compromised family lives below the line of poverty in Canada. The financial hard ships prevented obtaining well rounded care and support for a single mother. Or the children of singles do not get the wrap around support, councilling or community services to keep struggling families healthy and complete. The stress of the lack of ~~support~~ my health & my being the sole provider, support, nurturer, cheif cook and bottle washer in house. The compounded

Stress has taken it's toll on my family this past couple of years. Last winter, I almost bled out and died of liver failure and it was too much for my girls to endure. They both moved out with in 6 ~~weeks~~ months of each other. The eldest got married and my youngest prefers to couch surf rather than live with me. They are both suffering with mental health issues, depression and a life time of having a sick mother. This has been the biggest challenge I have faced!

January 2015, I sprang an esophogeal leak! It took 9 units of blood, 3 endoscope banding, 1 gluing, 1 fluid draining of infectous ascities off my belly and facing PTSD triggers being in the hospital for three weeks. My beloved companion cat got depressed, got sick and I think she gave me her last 9th ~~lives~~ life. She passed away three days after I got out of the hospital! Mourning the loss of my health, my cat, my girls, trying to recover. Understanding any amount of trauma, anxiety, stress or being upset could send me bleeding out again ~~Jan,~~ Feb,/March 2015, I was in liver failure. It's a miracle I am still here! I was put on Harvoni beginning of April by the end of April I was Hep C free! My viral load went from the 200 thousands to no ~~RNA~~ virus detected! I no longer have to live in fear of my blood! I have beaten cancer, battling PTSD, beaten Hep C virus, still battling liver failure but my levels are ~~getting better.~~ improving.

Each day I define my existance and checking items off my bucket list! I will enjoy each day I am given! I may still bleed out I may still die befor I get a liver if mine gives up the ghost, or hepatic cancer can set in. I have to learn to redirect my thoughts, re learn how to deal with stress. I am still not well, I have good days and I have bad days but each day I have Hope!

The short falls in the system?
A lack of effective
wrap around community
or support services for
an incredibally sick person who
requires assistance with day
to day struggles be they mental
physical or emotional. If in
crisis a person needs support
they are out of luck unless
they have family close by.
When children are overwhelmed
and the only parent too sick to
be effective in daily parenting.
There is a lack, that lack was
not my fault, I was infected with

blood that should have been tested. If my daughters had received financial support from the claim centre to help them through this virus progression, maybe we would not be estranged today!

The HepC has damaged the relationships with my daughters and any potential for a companion for myself. The damage done to me and my family, ~~can~~ no financial compensation is great enough to repair what I have lost in this battle w/ HepC.

It has cost me self esteem, relationships, health to be more than I am now!

It has damaged not only my physical body, but my heart mind and spirit. It has routed me into 17 years of isolation and fear of my blood!

Words can not effectively express the berevity of the experience!

The estimated overage surplus I feel should be paid out to those poor souls unfort-unate enough to have been infected with this long suffering, horrible virus just because they we needed blood product due to illness or past treatment. The suffering and cost to the family MUST be compensated as well as the loss of health or damage done to the body and the need for services for daily living. Trauma, illness, and everything this virus does to the body I feel requires a MUCH Larger compensation sum of money. The overage should be given to all the souls who have to endure and suffer through every day with this upon them / us. The symptoms, treatments, trauma PTSD triggered dealing w/ hospital the cost to my children and my self, having to move my Father 365 K to move in with me because I'm too scared to be alone now! I can still bleed out or my liver can still fail. We have altered our lives dramatically because of this virus. We pay the price with our blood sweat and tears and deserve to be compensated handsomly for our suffering. Especially seeing as though there is such an overage, it is the Right thing to do for those infected!

Thank-You!

P.S. I feel all should get a lump some. Those who have suffered for a Long Time w/ much treatment and health crisis should also recieve more over and above those infected w/ little effect from disease.

E-mailed copy Aug 13/

ATTENTION J.J. Camp Q.C
Re:

Compiled February 17, 2010.
Statement of funds spent specifically to improve the quality of life for our Mother, dob ,1905

Most of these were expenses I never realized would ever require proof, so although some receipts are here, most are seldom available, but you will agree that they were things necessary for my Mom to have made available to her, during the times she lived with our family, and in Senior Facilities... when she became unable to live on her own.
-in our home, Campbell River, BC July 1987- November 15, 1989!
-at Selby Place in Nanaimo, BC November 1989- October 3, 1992
-in our home again, on Quadra Island, BC October, 1992- May 18,1994
-at Sunshine Lodge in Campbell River, BC May 18,1994- July 12,1994
My husband, in both of our homes, equipped the bathroom with safety bars to help Mom in and out of tubs/ off toilets/ initially railings for up and down stairs. We bought walkers and rented some equipment that was not on loan from Red Cross... such things as hospital bed, commodes, wheelchair, bedpans, etc needed to be picked up and returned via Ferry, at our expense .
We purchased flannel sheets, rubber mattress savers, liners, special sheep skin mats to reduce bedsores, surgical gloves for ourselves and homemakers etc.. straws, coolers, over the counter medicines, bandages, and prescription drugs, as well as diapers .We purchased numerous electrical gadgets, buzzers,lamps and automatic lights so we could come when needed! Things we NEVER thought would require verification 15-23 years later. Mom was eligible because of low income, for certain home care help... if we wanted an evening away I hired a nurse to sit with her... on one occasion it cost $75 (5x $15) for us to enjoy a $65 restaurant Gift Certificate, a gift from our kids. Holidays (respite care) required family and friends to sleep in (eg: our 3 week Hawaiian Trip in 1993). Not allowable because it was done by family members. When mom became bedridden she could not be left alone, so any extra Home care not eligible, we would pay for, up to 3 and 4 hours a weekday. Weekends were not a problem as I was home and my sister visited some weekends at our place.
My job as a Teacher was needed to a) pay for these things and b) put three of my four children through University (Victoria) during this time. Finally in 1993 my husband took early retirement not only because Home care people needed help, BUT that helped make the decision. I never did ,and still do NOT begrudge these costs in any way (after all she was MOM) but becoming accepted for the Hep C claim ... and your request for out of pocket expenses we are listing these to the best of our ability. Nurses who came in and out of the home/ Home Doctor visits would (could) verify this. We drove Mom to and from appointments and Hospital discharges. Ambulance trips. We kept at best , few or no financial records. Burial Costs were borne by my sister and I, as Mom did not qualify for CPP. She died with very little. She had sold her home at a low economic time but perhaps could have waited for an upturn if health allowed. This itemization in no way covers everything, nor reflects the out of pocket expenses we all bore to keep Mom comfortable and well cared for...but it will indicate to what extent we did carry the financial cost for our Mom's ill-health! The help would have been appreciated MORE while she was here! Her poor quality of life in latter years, caused by Hepatitis C, can not be measured by any amount of money. The humiliation in the Care Facility hurt her and the family the most!

Costs incurred during the process of seeking this claim, such as several Notary visits, travel expenses up and down the Island from Victoria to Quadra, forms to be filled out ... revisiting appointments with Doctors on Mom's behalf (our medical), visiting Hospitals for Charts and records, costs for registered mail, stamps, original copies from Vital Statistics and duplicate copies at a per page cost, and telephone calls between my sister and I are more accessible, as by this time we realized it was becoming a cost issue! We realize there is a ceiling for these expenses, but feel we would have incurred the maximum at the VERY LEAST! Very STRESSFUL!

Yours truly, the daughter of

PS: August 06, 2015 Attention J.J. CAMP
Having received the letter regarding the surplus funds for Hep C Claims and requesting what could be done with these funds... I suggest informing the Courts to keep them as is, and to address expenses not initially allowed in previous or future claims. As the excess money was not anticipated at the time of reimbursement, why not increase the previous claims by a "percentage". If one was eligible initially, then it would just be a matter of course with stamped approval! Monies for counseling, screening, education for families suffering the loss of a loved one and further research may also serve as a basis for such funds.

06-15-15 P01:20 IN

To: J.J. Camp Q.C.

Camp Fiorante Matthews Management

400-856 Homer St.,

Vancouver, British Columbia V6B 2W5

Re: Trust Fund Surplus.

Please be advised that I would like all of the Trust Fund Surplus be allocated in favor of Class Members and Family Class Members as opposed to keeping it in the Trust Fund.

What is the value of creating another level of beaurocracy to deplete benefits which all Class Members, regardless of their financial situation are entitled to.

The psychological and physical damage caused by this dilemma should be compensated as long as possible, and in some way the Surplus would help by using these funds to ease our predicament.

Thank for looking into this matter for all of us.

J.J Camp Q. C.

Camp Fiorante Matthews Mogerman

400-856 Homer Street

Telephone: 604-331-9520

email: jjcamp@cfmlayers.ca

Telephone:

email:

August 13, 2015

Dear Sir(s)

I received a letter in the mail requesting input regarding the disposition of a surplus of $236-$256 million being held in a trust fund for the implementation of the 1986-1990 Hepatitis C Settlement Agreement.

My father passed away on July 07, 1992. His health had been compromized partly by being infected with Hepititis C from Blood transfussions he received during operations that were performed between 1986-1990.

It is my view in an application to the courts, that any surplus remaining from the settlement agreement currently held in trust be distrubuted amoung all Class Members and Family Class Members who had filed and established a validated claim to which some compensation was awarded to date.

Validated claiment's who may or has passed on should have any amount that maybe be awarded from the disposition of the surplus, simply have any award distributed through or via the Executor of their estate.

Should any funds that remain in the trust after awards have been made and dealt with, such funds could be donated to say, "Children's Hospitials" across Canada.

I personally have as of this date received a $5000.00 award relative to my validated claim. . Should I be entitled to further compensation as a result of the disposition of the surplus, I just cannot easily answer that question. I do know for the last 23 years I've missed my Father....can you say what is that worth.

Regards

J.J Camp Q. C.

Camp Fiorante Matthews Mogerman

400-856 Homer Street

Telephone: 604-331-9520

email: jjcamp@cfmlayers.ca

Telephone:

August 13, 2015

Dear Mr Camp

I understand from reading a letter sent to me from Ottawa, Ont., that you are 1 of 4 members of a Joint Committee mandated to implement the 1986-1990 Hepatitis C Settlement Agreement.

I also gather that the commitee wishes input from Class Members and Family Class Members in regard to the Committee's application to the courts regarding what I assume to be the disposition of some or all of the surplus funds to be allocated in favor of Class Members and Family Class Members.

I am please to be informed that there is a surplus of $236-$265 Million held in a trust fund.

It is my view that the joint committe procede with the application they wish to make, as noted in the letter when they apply to the courts regarding the disposition of the funds in the trust account.

My husband of 47 years was infected with Hepatitis C, from blood transfussions required during a triple bypass surgery between 1986-1990. He was doing well up untill about 6 weeks after this surgery when the Hepatitis C started to affect his health. He was not well after this. He passed away , 1992

I have always felt that the monies I have received to date, while grateful have been an inadequate amount for my hushands life and the lost I experienced.

All of my husbands family members, brothers and sister, his children and his grandchildren eligible up to a certain date who were deprived of a cherished family memeber, and because of the Hepatitis C infection, received some monies after tendering the required paperwork.

I hope that the Committee will be able to help all of the Hep C claiments involved in this matter receive more compensation for their lost.

I realize that some of the Hep C Claiments may have passed away by this time. If there are none of their family left, perhaps some funds from the trust can be in their memory, be put into a fund for donation to charities that help others.

I am not in good enough health to travel far and or have the means to be involved with monitoring the joint hearings.

I leave it up to you, my joint committee member to convey my input as to my views in what to do with the trust fund, and look out for my interests.

Please note: My son is composing this letter as per my draft copy, and has been instructed to email it to you as I do not have an internet connection. Should you wish to contact me about this, please write or call.

Your Truly

From:
Sent: August-13-15 6:04 PM
To: J.J. Camp
Cc:
Subject: regarding Hep CSir/Madame: , Phase 2

Dear Sir/ Madame:

I am not entirely sure whether you are the person who made the presentation at Robson Square last night, but I think you may be. In any case, I think a difficult and painful subject was covered admirably.

I write to explain my position as a family class member. I note the present suffering of many class members, and it moves me to compassion and revives painful memories.

My son, a severe hemophiliac, died on , 1994 of HIV AIDS and Hepatitis C. That was 20 years ago, but the memories are as painful as ever. It was a long, slow, agonizing process, which left deep scars.

I write to you in a state of no small desperation. Although I do not not have the immediate medical situation of many of those poor people last night, I have been through my own Hell, which to me justifies a plea for some further compensation.

was born , and so died at 30 years old, in his last year leading up to his B.A. at UBC, with a view to teaching, hopefully at University, like his grandfather. Admittedly, it was a slow start, but this is in the midst of constant transfusions, occasional bouts on crutches, and, finally, the combination of AIDS and Hep.C which took his strength and his life.

I brought up, mostly alone, without his father, who was quite unable to cope with his condition, and withdrew from the family while was between 5 and 7, and made his final departure when was 7. He never fully engaged with while he was in the household, and sent NO funds to support or his 3 sisters. He made bold promises at the divorce proceedings, but did not follow through, and at that time there was no enforcement. I realized that it was up to me to make a life for my family, and so went back to college and then UBC, where I earned my BSW and MSW, through a combination of loans and scholarships, and became a social worker.

When condition was diagnosed, after considerable delay since there was no family history and we were living in a small town, I determined that he was going to have every opportunity I could give him to lead as normal a life as possible. There was the momentous day he joined the Cubs in the hospital, and then went on to Scouts and Venturers, and to camp (where they insisted I must be a counsellor, which was all right with me!), and even to an international jamboree in Sweden and Denmark, which he yearned for and I told him,"You can do it if you really want to!", and we, with others behind us, managed to raise the necessary amount of money. He was a member of the Nelson Boys' Choir, and did very well. He was a member of the St. John Ambulance Corps. He took swimming lessons, and even participated in the Lord Byng Swim Club as long as he was physically able. Yes, and he had a paper route, which I often enough had to perform for him. We went camping as a family, and travelling, mostly by car. He lived a full life, and I strongly encouraged him in a CAN DO attitide.

Until we moved to Vancouver when he was 10, there were many, many medical trips back and forth to Vancouver (mostly 3 or 4 a year), and nobody else was paying for them. And it meant the other kids were left with friends, not an ideal arrangement. Of course, there were many variations on living a normal life, having to be on call, making special arrangements for him, trips to hospital, etc.

Finally, the point I hoped to make. All this is behind me, and yet it has marked my life. I am immensely proud of the young man he became, and will cherish him always. AND YET, I went through all this to raise him and then lose him. I am now living in a state of poverty, just a little more than $2000 a mo., of which over half goes to pay my rent in the off-balance market of Vancouver, so that I BARELY MAKE IT from one month to the next, the result mainly of going back to University to make a better life for my kids and the fact that I was in a car accident, for which I had no responsibility, which meant I had to retire early (at age 60) on a reduced pension. The result is that I HAVE STRUGGLED EVER SINCE, and DO wonder whether I might be eligible for some recognition in that surplus, which does touch on his life.

Thank you.

Sincerely,

From:
Sent: August-13-15 8:49 PM
To: J.J. Camp
Subject: Hepc class action surlpus

Greetings. My name is , and I am writing to give my input as to what I feel should be done with the surplus of monies from the class action suit.

I was given two pints of blood after the birth of my daughter in 1987. I, as well as my family were devastated when we later learned that I had contracted Hepc from the blood that I received. I tried treatment twice and am happy to say the second try was successful.

While I am appreciative of the fact that the cost of the meds were covered and I received $1000 for every month I was on treatment, this is a drop in the bucket compared to what I had to endure while on treatment. It was very difficult for my family to watch.

It is my opinion that the surplus of monies should be divided EQUALLY among those who contracted Hepc as a result of tainted blood received between 1986-1990.

Sincerely,

Sent from my Samsung device

Aug 13 / 2015

To the Joint Committee

My name is
And Personal Representator and Executor
Of the deceased

My Loving Wife HAD a Lot on
Her Plate. She was a Handicap "Person"
From a car accident. To Pile MORE ON Her PLATE
She got tainted Blood in Hospital. And on
Her JOURNEY in Life. She got KIDNEY DEASE
Pat on Dyalis. She Had a great Son
. My Son and HEIR. to ME
" We WERE A Family UNIT. DEPENDANTS
ON EACH other. I put my Job on Hold to.
Watch and Care for Her.
her Son and mine. Was a great Help

In Her Passing Left us Empty!!

What Brings Us to this Hearing
The Surplus should Go to Class Members
And Family Class Members Dependants
OF the Deceased
And All Family Members of the Deceased

Re Hepatitis C Settlement

In reply to your paper received 5' August 2015 I agree that the application to the Courts regarding disbursement of the surplus that it be distributed in favour of Class Members & Family Class Members as recommended by the Joint Committee,

I look forward to hearing the result

10 August 2015

To The Joint Committee, Hepatitis C Settlement
Po Box 2370 Station D
Ottawa
Ontario K1P 5W5

C C.

RECEIVED
AUG 13 2015

From:
Sent: August-14-15 3:02 PM
To: J.J. Camp
Subject: Joint Committee Request for info on Hep C Settlement

To Whom it may concern:

My father died from Hep C several years ago but I still miss him. I saw how my dad and mothers aspect of life was taken from them little by little. Although I am only a man that lost his dad to Hep C I feel the following might help others .

I would suggest that any surplus amount in the settlement account be divided the following. Those spouses still alive following the death of their spouse should get half the surplus. My reasoning for this is as I saw my Dad's life taken away little by little he couldn't' even walk around the block with his Grandson anymore. Toward the end he spent more time in the hospital than at home which deeply played upon my mom's relationship with him as well as her one love in life losing the battle little by little.

The remaining half surplus I would like to see go toward the research towards the cure or eradication of diseases like Hepatitis C. As only a person who has gone though it can see, know and feel money will never truly make up for the early loss of life of someone who you grew up with and learned to love . But maybe if more research was done on diseases like Hep C it could save another son or daughters grief and loss of a father or mother or spouse. Thank you for your patience with this email.

Sincerely Yours

Home: __________
Cell: __________

August 14, 2015 (1)
HepC 8690. Settlement
From.

Primary Infected Person (alive).
Claim #

Personal History.

Family has history of Von Willbrand's disease. Acquried HepC as a complication of his treatment for Von Willbrand's disease.

Family members infected with HepC.; (1) older brother, , who was 69 at time diagnosed with HepC and passed away 2004 at age 73 from liver cancer.) (2) niece s , daughter of . (3) , daughter of

I was diagnosed in 1999 at age 57 with HCV associated cerrohis (chronic Hepatitis with piecemeal necroses). I participated in two separate drug therapy trials under Dr. Vince Bain at the University of Alberta Hospital. The first was 12 months from July 2000 - June 2001 and was not successful. The second was 12 months from July 2002 - July 2003 and I was treated with Pegylated interferon and ribavirin combination therapy. The second treatment was succesfu in ~~not~~ achieving a sustained viral response.

Payments I recived from HepC Settlement:

(1) 1,000 per month for every month of completed drug therapy (paid after each 6 mos. of completed therapy)

(2) Level 1-4 compensation payments set in 1999 @ 10,000 + 20,000 + 30,000 + 65,000.

(3). out of pocket expenses for travel, parking for medical appointments - submitted each 6 months.

(4) loss of service in the home.

not covered by Hep C Settlement

(1) actual cost of drugs - 894 biweekly for the two years of drug therapies. This was eventually recovered from my health plan and a second Provincial Health plan that we had to take out to cover the portion 30% not covered by Manulife (my health plan.)

(2). My primary Drug Plan with Manulife only covered 70% of the drug cost which required us to take out a second Health Insurance Plan with Alberta Blue Cross (extended coverage) from 2000-2004 at which time my wife secured group coverage through her work. The cost incurred to have the second drug plan coverage for 48 months at approx $120 month premiums was approx $5760. The settlement did not cover this cost.

(3) Due to the severity of the side effects from the second drug treatments and the emotional stress of watching my older brother slowly die from the same disease I was battling I had to stop working in March 2003, and go on medical disability & benefits through Manulife, until August 2003. I was paid approximatly 70% of my normal wages. No contributions were made to my company pension plan for these 6 months. I not only lost my normal income, I also lost these months pensionable earnings contributions to my pension plan.

(4) After completion of my drug treatment I never regained my pre-drug therapy or pre-Hep C mental or physical health back. I continued to experience fatigue, memory and concentration problems. This resulted in my retiring from my inter-city bus driver job in 2005 at age 63. This early leaving from work impacted my and my families retirement dreams/plans/income

— My 2 youngest children were 12 + 14 years of age when

I was diagnosed with Hep C. This disease impacted their teen years
my ~~still~~ ability to be involved in many of their activities.
my ability to set aside sufficient money to assist them financially with post-secondary education choices they pursued. This resulted in both of them having to take out substantial student loans ~~and~~ a Royal Line of credit to complete their education goals. I believe that if I had worked until 65 and had not had health issues from the Hep C for 5 years before I quit my job in 2005 that my contributions to their education would have been ~~greater~~ significantly higher. This would have allowed them to have graduated with less debt to repay.

— Before taking early retirement in 2005 I was averaging about 70,000 year employment income Had I retired at age 65 as was my plan I would have earned an additional 140,000 - 200,0 income, contributed an additional 2½ years into my pension fund and then been eligible for maximum CPP pension. I lost(1) 2½ years of CPP ~~and~~ company pension plans which would have been 35,000 - 40,000 for my company pension plan. (2) 140-200,000 in employment earnings before deductions (3) If I had worked to 65 and then applied for CPP I would have received 828.75 month. I had to apply for early CPP resulting in a loss of .5% for each month before 65 that I apply for CPP. My CPP retirement was adjusted to 741.73 because of early retirement. I lost 87.02 a month CPP pension income or 1044 24 a year. So for the 10 years since I quit work I have lost $10,442.00 pension income from CPP and I will continue to lose $1,044.24 a year (plus cost of living index every year) until I die

5) Out of Pocket expenses:

During drug therapy I travelled to city at least 4-8 times month to see regular GP, specialist, drug therapy nurses, to get drugs, ~~from~~

(4)

fr blood work etc. Costs re-imbursed did not cover wear and tear or depreciation on our vehicle. Nor did we recive compensation for my wife to cover loss time at work.

(6) Your Question:

Does the payment under any particular payment category seem out of line with the loss or expense it is intended to compensate?

Once ~~the virus~~ I had achieved a sustained Viral Response after drug therapy there did not seem to be any compensation (ongoing) for the symptoms of fatigue, anxiety, depression, memory loss and poor concentration issues that I continued to experience. Could/Should this be addressed under the loss guidance, loss service section of the settlement with a set monthly/yearly compensation payment for Primary Infected Persons who have been cleared of the active virus but still experience emotional/physical effects.

(7) Your Question:

If you could change one thing about the Plan or the payments you ~~[illegible]~~ recive under them, what would you change?

I would like it to address the impact this disease has on family members - especially spouse + dependent children

(A) address spouse interruption of earnings + also how this impacts retirement income (CPP + private.) My wife's CPP will be impacted as ~~(B)~~ result of my disease.

(B) Children who are minors when primary infected person (their parent). How does this impact their education plans, costs etc. Should fund be set aside to compensate in form of scholarships, bursaries for dependents of primary Infected HCV persons. from the HepC 8690 settlement to assist with University, College, Educational needs @ age 18 if the wish to pursue further education.

(8) In answer to the general questions:

Should the surplus be a lump sum payment

Should the amount be set for each infected class member or should the desiase level, loss of employment, and/or other identified factors be consedired in sitting the amount?

Should the surplus be an increase in the ongoing re-curring payments?

Yes it should be a lump sum payment. My direction would be to have the surplus equally distributed in one lump sum payment to each of the $5,299 approved claims for (1) approved Primary Infected Persons (alive)

(2) The spouse/estate of all Deceased Primary Infected Persons

(3) All approved secondary infected persons (alive)

(4) The spouse/estate of all Deceased secondary infected persons

This would eliminate need for new documents to be submitted, more forms to be submitted. The monies would allow each approved claim the funds to compensate for any areas that the initial settlement overlooked, fell short of anticipating the impact on those infected with HepC and their families. I understand that this would be approximatly $45,000 for each of these 5,299 claims

Sincerely

[illegible]

08-20-15 P1297-M1

07:159049-[illegible]PM

August 15, 2015

J.J. Camp, Q.C.
Camp Fiorante Matthews Morgerman
400 – 856 Homer Street
Vancouver, B.C. V6B 2W5

Re: 1986-1990 Hepatitis C Settlement agreement surplus.

My name is and I contracted Hepatitis C from an operation I received in the late 1980's at the University of Alberta Hospital in Edmonton, Alberta. I received a settlement as a result of the Class Action Lawsuit, claimant I.D. number . After reading the letter that was sent to me with respect to a surplus, I have the following comments to make.

In my particular case, I have never been able to work at steady job and thus have been deprived of income. There are extenuating circumstances in addition to the Hepatitis C that have prevented me from doing so. I have Chron's disease and have had a number of bowel operations over the years that have resulted with me having a complete colectomy. I have arthritis throughout my body from having had to take large doses of cortisone to relieve the pain and swelling in my bowel. This has led to further operations to replace both of my hips and other ailments too numerous to mention.

I have outlined some of my physical problems for a reason. Although there have been advances in the treatment of Hepatitis C, I have been told by my family doctor that I cannot be treated because of the medication that I take in order to live with a minimum or pain.

I am of the opinion that a healthy portion of the **surplus** should be allocated to those that were Class Members and Family Class Members to improve their quality of life and that a minor portion of the surplus should be allocated to a Trust Fund.

Yours sincerely,

August 18, 2015

To Whom It May Concern,

Re:

Hepatitis C Compensation of blood products between Jan 1, 1986 and July 1, 1990

I received your notice that the Joint Committee requests my input for the disbursement of the surplus funds. I feel that due to the loss of family that the funds should be disbursed to family members.

The funds were dispersed once the Canadian blood service was found at fault with the class action suit, due to inflation and the economy the surplus should be divided among families of loved one who became ill and or deceased.

Sincerely,

(Spouse)

August 18, 2015

To Whom It May Concern,

Re:

Hepatitis C Compensation of blood products between Jan 1, 1986 and July 1, 1990

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Sincerelv.

(Son)

August 18, 2015

To Whom It May Concern,

Re:

Hepatitis C Compensation of blood products between Jan 1, 1986 and July 1, 1990

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The funds were dispersed once the Canadian blood service was found at fault with the class action suit, due to inflation and the economy the surplus should be divided among families of loved one who became ill and or deceased.

Sincerely,

(Son)

Attention: J.J. Camp Q.C.

August 18, 2015

Joint committee members, for Hep C 1986-1990

From:

Email:

Claim ID #

My name is wife I will be corresponding with you on behalf of my husband. was assaulted on October 17,1987 as a result he has a brain injury. If you need to speak with at any time please don't hesitate to call him, verbally works best. Thank you.

Thank you for the opportunity for us to explain the circumstances regarding the late submission of claim.

We initially registered with the 1986 – 1990 Hep C in or around 2002 when was diagnosed. I received the package to fill out from the claim centre (I still have all original forms and people I spoke with to gain records). Unfortunately, I was completely blindsided when it came to retrieving medical records.

On October 17,1987 around the 9pm hour, was assaulted with a baseball bat on the left side of his head. He was thought to be DOA by the Port Alberni RCMP. This is the only information I was given. The Port Alberni Ambulance attended had lost a lot of blood but was still with us, I have been told he was taken to Port Alberni Hospital where shortly after his arrival it was clear they were not equipped to deal with his injury. was then transported to Nanaimo Hospital where again I was told he was stabilized and transferred yet again to the Royal Jubilee Hospital in Victoria via Helicopter I was told. The problem with this is that the Port Alberni RCMP, did not check for ID nor did they run the plates on our car that they conveniently had towed at the scene. My husband ( ) was sent as John Doe throughout this whole horrifying ordeal. It was not until the next day on Oct 18, at around 12pm when I received a phone call from the Royal Jubilee Hospital asking if I was . had been rumbling my name and saying what seemed to be a phone number the nurse in ICU took a chance and called me. I was frantic as my husband had been missing since approximately 7Pm the night before. mother ( ) resides in Victoria, I naturally called her right away so she could get to him as I was in Parksville, 2 hours away with our two small children and of course I had no car as it had been towed I had no idea where or who had our car. I did eventually find our car at a tow yard in Port Alberni, I did have a lot of questions for the tow company, ex ..why was I not contacted that you had my car among many other things. The owner told me that the RCMP said tow it and leave it, it was all very hush hush. I suppose I was a bit naive to think that the RCMP could be so ignorant in such a serious matter. The owner, felt very bad and offered to tow my car and deliver it to me in Parksville for free so that I was able to get to Victoria to my husband. My mother in Law ( ) kept in touch with me while I was trying to get down to Victoria, she was very worried and was told ıad lost a lot of blood and that he had received blood. The plan was to stabilize as he needed brain surgery. Where or when we do not know, again he was sent as John Doe through 3 Hospitals. When I arrived in Victoria later that afternoon, I was told that would need surgery, they were hopeful that he would be stable enough through the evening or early morning hour. I was told he had been given blood, I remember this because it was so surreal and I was so scared that this was happening to us to ı, I was only 21 years old at the time, was 23.

I tried for a very long period of time to complete these forms. I would wait for return calls and sent multiple letters asking for records on these dates, I received nothing no one was willing to help me what so ever. I didn't plan to stop trying I just was not getting anywhere. I was not aware that there was a dead line at that time.

condition was monitored through blood work regularly throughout the years, in 2012 David's condition was becoming more serious. He was seen by a specialist in Vancouver and it was decided through tests and scans that was a good candidate for Interferon treatment. We were sent to the Hep C Clinic in Nanaimo BC, nurse for the next 7 months would be Fran Falconer. It was then Fran asked us if was part of the Hep C 1986-1990 claim. I then told Fran what had happened she told me to start again, not to give up. I contacted the Hep C claims centre. I was asked to submit a letter in hopes that would be considered in the late claims process.

started treatment on January 6, 2013 and finished July 19,2013. Thousands of pills an injection once a week throughout this period of time. also had weekly blood monitoring during this time. and I kept a journal of his daily treatment, the sickness and side effects that accompanied his treatment. This was very hard to watch my husband go through, his quality of life was gone for the better part of a year, it was a life changing experience. But with good news, Hep C has been non detected since July 2013. has blood work done regularly, he still suffers with low energy due to the treatment along with very dry skin and headaches. But we are grateful that so far the Hep C is non detectable.

I hope we haven't taken too much of your time, we felt it was important to send as clear of a picture as possible as to why claim had been submitted late.

l and I thank you very much for your time, if you require any further information, please call or email us at any time.

Sincerely,

Lise Y. Carmichael

From: [redacted]
Sent: August-18-15 9:42 AM
To: J.J. Camp
Subject: re:Hepatitis C Settlement letter

Received a letter from P.O. Box 2370,StationD, Ottawa re Surplus on 1986-1990 Hepatitis C Settlement which my brother [redacted] was a victim of. I am his sister, and did receive a cheque back in 2002 (I think it was), now you would like my input as what should be done with his portion of the surplus.
I suggest my brothers wife [redacted], I ([redacted]) andy my two brothers Plus [redacted] six children should received equal perportions of the settlement. If it is done equally there should be no problem and all should be satisfied.
If you have any questions for me to answer, please let me know at y mailing address- [redacted]
my email address [redacted]
Hoping to hear from you soon and I think a form sent out would be a good suggestion then all information would be so much easier to follow.

From:
Sent: August-18-15 1:44 PM
To: J.J. Camp
Subject: Hepatitis C Settlement

To: J.J. Camp Q.C.
Camp Foirante Matthews Mogerman

Vancouver, B.C V6B2W5
403-604-689-7554

FROM:

400-856 Homer

August 18, 2015

Dear Sir,

In regards, to the letter I received on The Hepatitis C Settlement, I feel the complete surplus should be dispensed to family members. However I feel the family members that should be considered should be the spouse and surviving children.

PLEASE NOTE: The reason I answered so late is I have moved and have a new address. If your assistant could change my address in the program or let me know how to go about it. NEW ADDRESS:

Regards.

To the joint comittee

J.J. camp Q.C. 604-689-7554
Fax #

I , is a class member. Claim # I Think that the moneys That is being Held Should be split up and given To the People That are in the class Action Suit. I dont Know How meney People are in the claim center settlment but The money some people Have goten isent enoff to Live of of. I am (41) Got Hep C when I was (12) so the money I get is Pethetic. I am a Level (4) on the claime center and Have Lots ove Helth Proplems becuse I got Lots of (cryl) that was tainted with Hep C. multipal Bag's. I'm strugleing to Live and to get back into good Helth. I never got to be a kid and being a adult is even Harder. what I'm Trying to say is that we didnt ask for Hep c and we should all benifit from the 256, millon dollor surplus the governmen should not be allowd to touch it becuse it is not theirs. We need to win one for the Little guys. 10, millon or more a [illegible]
[illegible] would

PHONE #

From:
Sent: August-18-15 11:03 PM
To: J.J. Camp
Subject: input on the 1986/1990 Hepatitis C settlement for the joint committee

August 19, 2015

To: J.J. Camp Q.C.

In response to the remaining money from the 1986/90 claim, I believe the money should go to the victims. The only reason the first allocation of money was so limited was in case people needed it as the disease progresses. Although the disease did not seriously progress, the stress and fear it cause for my son and myself was a lot to live with. While compiling the letter I find myself emotional, remembering many of the distresses that this diagnosis caused.

I was diagnosed with Hepatitis C 18 years ago in 1997. I received a blood transfusion a few days after delivering my second child in 1989. I was very reluctant to receive the blood because of fear that it might be HIV infected. The nurse assured me all blood was tested, it would be fine. Eight years later and three more children I received a letter advising me to be tested for Hepatitis C virus

I had to take my four children into the lab to test for the virus . At that time, I understood that there would be a chance one or more of my children might be infected. I was nursing the baby who did prove positive with the virus. During the months before testing positive, I went to the hospital with stomach pain which I later believed it to be gastral or stress from the hepatitis c. Doctors never acknowledge that the virus has any effect on your physical health . The medical professionals now (since taking the havoni) say you must be feeling less fatigue and your liver test have all come down.

The emotional stress and anxiety it caused me was something that effected every medical decision I had to make in regards to my children and myself. Sometimes causing them stress, pain and discomfort

My trust has never restored.

The feeling of shame and been unclean every time I visited the Doctor or dentist.

Some friends who knew would ask if certain thing would contaminate them. While working in the health professional I learned how nurse ostracized and discriminated against people with Hepatitis C .

It effected my intimacy with my husband for fear he would get the virus. I could not work a full day without experiencing pain and fatigue thus adding financial stress on the family.

I could give examples on the emotional and physically, psychological effects of receiving the tainted blood but will keep it short. At any time, you would like more info I would be glad to give it to you.

Sincerely

Dear J.J. Camp Q.C. August, 18, 2015

My name is ; and I am a Class member of the 1986-1990 Hepatitis C settlement Agreement. After a major surgery for Necrotising Fasciitis in 1990 which left me with multiple amputations I was contacted by the Centre for Disease Control. On three separate occasions I was informed that my blood had tested positive for three different diseases as a result of the blood transfusions I received in 1990. I was told that I had tested positive for Hepatitis C, Mad cow disease and a very nasty strain of Cancer.

I was married with two young boys when I had my life altering surgery in 1990 and living with the fear that will eventual die from one or more of the diseases I have listed has been a living hell. My wife died from lung Cancer seven years ago and I have always believed that living with the stress was a contributing factor. My Doctor has advised me to exercise and maintain a healthy life style. I believe that the Joint Committee should award surviving class members and their families additional funding for the pain and suffering for which I have no words.

Respectfully submitted,

From:
Sent: August-19-15 10:04 AM
To: J.J. Camp; info@hepc8690.ca
Subject: Class Action law suit

Hello,
My name is and I started to file a claim years ago but after the blood testing came back inconclusive I stopped the procedure. Now I am wondering if I should have continued.
I received a blood transfusion after I gave birth to my daughter on and had a transfusion a few days later due to lose of blood. This was done in Williams Lake, B.C. Much later, around 1996/97 I went into the Health Unit in Prince George, B.C. where I was living at the time and was tested for Hep C and it came back positive.
I have since gone through a yearlong research treatment process with Dr. Yoshida in Vancouver which proved to be unsuccessful in clearing the virus from my system. I am going to see Dr. Yoshida on to begin treatment. I assume there will be costs involved so perhaps the settlement could help with that.
Please let me know how to proceed or whom I can discuss this with. I did have lots of paperwork from the past that I just recently shredded as I am moving.
Thanks so much,

August 19, 2015

08-24-15P03:05 RCVD

08-24-15P929 4-ARNV

J.J. Camp Q.C.
Camp Fiorante Matthews Mogerman
400 – 856 Homer Street
Vancouver, B.C. V6B 2W5

Attention to Member – Joint Committee – 1986-1990 Hepatitis C Settlement Agreement

Thank You for contacting us in reference to the surplus in the Trust Fund for Class Members and Family Class Members.
Class Members: CLAIM NUMBER

Family Class Members: CLAIM NUMBER

Mother of the Class Members and sister of the Family Class Members is sadly missed. She was always a support system to all of us until she contacted Hep C from tainted blood in 1986 during her heart surgery and henceforth became ill with liver cancer and passed in 2004. is handicapped and needed her support in all aspects, cooking, cleaning and everyday activities so was undeniably a shock that she was no longer close by for her help and assistance. It also is a great loss to and and her sisters and brothers.

The loss of was traumatic and can never be replaced. The surplus in the Trust Fund should be released to the Class Members and Family Members as the Courts and The Joint Committee decide as to each claim individually analyzed and deemed appropriate.

We greatly appreciate the support of The Joint Committee in this and look forward to hearing from you regarding our claim.

Sincerely,

Email:

INFECTED HEP C.

1 9 9 0

Wife

Dear Sirs.

Had to sell home in Ardrossan
to move to Edmonton 1999 to be
near the hospitals.

died June 27-2004

I was recieving pension
(as he was not able to help
me with house work. I took
care of him the last 4 years of
his life at home and drove him
to hospital on many occasions.
I was informed that the money
I recieve for this year will be

My last cheques due in Feb 19 2016.

I am now 83 yrs. old and I own my own condo. But by loosing this money I could loose my condo.

I am only asking for a 5 year extension of my money.

This past year I have got macular degeneration (Dry type): Which means I can't read. but my prefeula is fine. Other wise my health is very good.

My family had Son Willabrand desease, So they had to rely on blood products as well as full blood. My 2 daughters also got H-C. My one daughter still has the H-C in her body, the other one no longer has it in her body.

This was very sad for my family.

Yours Truly

From: >
Sent: August-20-15 9:06 AM
To: J.J. Camp
Subject: Trust Fund Surplus

Claim Number

I would like this surplus divided up between those infected with the Hep C virus between 1986 and 1990.
Thank you

From:
Sent: August-20-15 1:42 PM
To: Catherine A. Polder
Subject: FW: 1986-1990 Hepatitis C Settlement Agreement Surplus

From:
To: jjcamp@cfmlawyers.ca
CC:
Subject: 1986-1990 Hepatitis C Settlement Agreement Surplus
Date: Thu, 20 Aug 2015 11:55:53 -0700

Dear J.J. Camp Q.C.,

RE: 1986-1990 Hepatitis C Settlement Agreement, Claim (my mother, deceased), Claim (granddaughter), Claim (son), as well as claims for (son) and (daughter) and their children, and (daughter).

The 1986-1990 Hepatitis C Settlement Agreement of 1.18 was approved and awarded by the courts to provide compensation for individuals, like my mother, who truly suffered with the disease for a long time and passed away far too early due to gross negligence on the part of health care providers and various government regulatory bodies. In addition, compensation was intended to help family members who experienced tremendous loss and grief, let alone loss of guidance, care, and companionship.

I, for one, do not want to see the federal government, provincial governments, or any interest groups get theirs hands on these compensatory funds even if there is a surplus. I trust that the Joint Committee will represent the best interests of class members and argue forcefully that all of the remaining funds will go directly to Hep C survivors and/or their family members as it was intended. I know the final decision will be made by the courts, but I do not want to see this money clawed back by governments as it would be grossly unfair.

Time is also a concern since Hep C is a killer. I believe the surplus should be paid out in a lump sum as quickly as possible to Hep C survivors, as well as to family members who were also impacted by the illness and untimely death of their loved ones, such as my mother. I feel that if there is a surplus, then all rates of compensation should increase, that is, 1. compensation paid out to my mom mother should be increased fairly given all of the complex factors and that money should be paid to her surviving children, 2. additional compensation should be paid to her surviving sons and daughters for loss of care, guidance, and companionship, and 3. additional compensation should be paid to her surviving grandchildren for the immeasurable loss of their grandparent. I particularly feel that the amount of compensation the grandchildren received was wholly insufficient. My daughter, who in now 10, lost her grandmother when she was 4 years old. She received only $600 in compensation. That works out to be $100 per year for every year that she has missed the love and guidance of her grandmother. I am sorry, but how can that be justified as proper compensation for losing your grandmother when you're only 4 years old! Lastly, I feel that the $6000 my siblings and I each received is wholly insufficient to compensate us for all we went through before and after our dear mother passed away. I feel the money doesn't even compensate me properly for organizing care for my mother, planning her funeral, and executing her will, let alone the crisis, grief, loss, mourning, and ultimately loss of companionship.

In closing, I know you will do your best to make sure that the compensation surplus is paid out as quickly as possible to those it was intended for, that is, to help Hep C survivors and their family members who were also impacted by their illness and/or untimely death. I wish to let you know that I am also writing this letter on behalf of my siblings, , and . Thank you for all of your efforts on behalf of all Hepatitis C victims, including our dear mother, and all other victims and family members across Canada. I know you will do your best.

Best regards,

From:
Sent: August-21-15 6:35 AM
To: J.J. Camp
Subject: Hep C letter

Mr JJ Camp, I sit hear starting to write this letter to you and sadness and anger starts creeping back. I still miss my father (badly) and it's been over 22 years and be-leave me when I say this , there has not been a day that I have not thought of my Dad. Sir, I could say a lot more but you are a busy man so I'll get to the point.. I gather from this letter that there is a surplus and what I think should be done with it , if I'm correct. Well there really no compensation that could cover the loss of my father and how it's effected me in the years past. The $ 5,000.oo compensation I got before was like a slap in the face at the time. No I'm not greedy but I did loose my father over some body's incompitance. So to end this letter I will be in favor of every body still effected by this to get as much as they possibly can and end this reminder of sadness . I MISS MY DAD.

....

....P.S. Thank you for your time in taking on this task on and wish you the best . Sign Telephone #

To the Joint Committee PH-

Find enclosed my written submission in regards to the 1986 claims settlement I do not have a computer, my claim no is and was assigned to me by the fund years ago. I think we can all agree that anyone unfortunate enough to have contacted this medical condition their final days will not be pleasant. I cannot speak for everyone only my own situation. Basically all I have been able to do is just exist, having sufficient money to meet your daily needs has always been a top priority. I live alone so it is mandatory to have a vehicle to get around on a year round basis is very important, like Doctor appts and shopping for daily essentials. However it is the unforseen expenses that blind side you that are the most stressful. The large expense for vehicle and home repair must come first. Everything gets prioritised and some →

just never seem to get done like new steps, porchs or yard fences. Therefor I respectivly make the submission that another payment be paid to the clients. However a balance should be left in the fund to keep it active and provide for the future needs of the clients. This new payment should be done as soon as possible so it can help the older people who will need it most. My home phone no is made avaible if you wish to contact myself for further consultation

Yours Truly

AUG. 21/ 2015

ATTENTION LISE

RE: HEPC869

I

AT

CLAIMANT: LOST HER LIFE BEFORE SETTLEMENT.

OUR MOTHER/GRANDMOTHER AND GREATH GRANDMOTHER.

ON BEHALF OF CLAIMANTS= DAUGHTER
HUSBAND
GRANDDAUGTHER

GRANDDAUGTHER

IO GRANDSON

GREAT GRAND CHILDREN

RE: HEPC8690

WE ARE IN FAVOUR OF THE DISBURSAMENT OF FUNDS

SINCERLEY YOURS

Phone:
Cell:
Email:

J. J. Camp Q. C.
Camp Fiorante Matthews Mogerman
400 - 856 Homer Street
Vancouver, British Columbia V6B 2W5

Re: In response to the request for input on the use of fund surplus

Dear Mr. Camp,

I can only speak from my perspective but perhaps I can offer some insights that may not have occurred to the Joint Committee.

I was diagnosed with Hepatitis C after I received a letter advising me that I may have been exposed due to the blood products I received while suffering from an episode of TTP (Thrombotic thrombocytopenic Purpura).

Before the letter came I had just finished a ten month Cook Training course and had plans to start my own high-end catering business. I had taken an on-call job cooking in an intermediate care home while I built up my clientele but I was starting to have trouble keeping up in a very physically demanding profession and did not know why. I was young and healthy (or so I thought). I became depressed and at one point my doctor prescribed anti-depressants.

Then the letter and the diagnosis came and the fatigue, the muscle and joint pain, and the depressingly isolating feeling that comes with brain fog suddenly made sense. No cure, they told me.

I realized that I would need to change my lifestyle if I was going to survive. No catering business. I needed to find work that would minimize the symptoms. At the time, computers were becoming more prevalent in the workplace and I retrained myself to take advantage of this.

At first I could work 5 days a week in an office setting, but eventually the symptoms accelerated and I was down to 4 days a week, then 3.

At some point along the way interferon treatments became possible, but after testing, my doctor told me my chances of it working was not high. So I continued on, pruning back my life until working at a computer 3 days a week was pretty much all I could do.

I wasn't thinking about life after Hep C. I was just trying to maintain what life I had with Hep C.

Then came the Direct Acting Anti-Virals. And the possibility of gaining back my life. I am 3 weeks into treatment with Harvoni. I am already starting to feel an improvement. To say I am happy about this is the understatement of the century. I feel like someone who has spent 20 years on death row and has suddenly been given a pardon.

But therein lies the crux of the matter. You asked me to give you input on what should be done with the surplus funds. Well, like that person who's been captive for over 20 years - I am going to need help acclimating to my freedom. I am now 58 years old and, thanks to this new medication, I hope to have many productive years ahead of me. I am going to need help with that.

I suggest that the mandate used when the fund was put into place needs to be re-assessed in the light of these new anti-virals and the changes they are going to make in the lives of people who have been in Hep C limbo for so many years.

Counselling

Wrapping my head around the new freedom is pretty overwhelming. Don't get me wrong - I'm loving the possibilities ahead that I'd given up on so many years ago. But it's a LOT to take in and some assistance dealing with it would be very helpful.

Training

I have trained myself to an ever narrowing field of ability. Now that my abilities are increasing - I need training to achieve their potential.

Long Term Effects of Symptoms

Although it may be possible to halt the Hep C virus now, 20+ years of symptoms wracking a body will leave scars and problems that may not just disappear. We need to be prepared to deal with these residual effects.

Security

The short-term contract and part time nature of my employment history has not lent itself to pension plans or retirement savings. I have worked as hard as this disability has allowed me to, but it has definitely had a negative impact on my ability to plan for financial security in my declining years. Quite honestly, living long enough to need that security wasn't uppermost in my mind over the last 20 years. Short term survival was.

I believe that the plan has been well managed and it's original mandate followed, but I think that in light of these new treatments, the mandate may need updating.

I believe it is pre-mature to assume that the formulae previously used to judge the robustness of the fund are appropriate today, when the state of treating and dealing with Hep C is undergoing such ground-breaking changes.

To summarize, these are the suggestions I believe should be taken into consideration when planning for the use of the surplus.

1. Counselling: Both psychological and employment/training.
2. Training: Class action members whose health improves and who want to retrain should be assisted.
3. Lasting Damage Compensation: the DAA are still new, allowing a buffer for possible continued compensation for residual health issues might be wise.
4. Retirement Security: The equivalent of a pension plan that has been contributed to for the number of years the member has been in the plan.

I have put a great deal of thought into your appeal for input. I hope you find it helpful. I would welcome any questions you may have on my input and would be happy to clarify anything that I may not have explained adequately.

Thank you for the opportunity to contribute.

FAX- 1-604-689-7554 1/2

August 21/2015

'HEPATITIS C' CLASS ACTIONS SETTLEMENT-CANADA

J.J. Camp Q.C./Camp Fiorante Mattews Mogerman/Vancouver.BC

Atten: Lise Y.Charmichael

/ claim / [/2004]

/claim # /2012]

How awesome to receive a letter from 1986-1990 Hepatitis C Joint Committee; finally a group that cares to hear how my brother-in-law, and my sister suffered as a result of receiving not one, but two tainted blood transfusions during this time period!

I, , sister and sister-in-law, and the esecutrix of will and testiment at her passing; will share the following struggles they encountered. I witnessed the sickening process of loss of strength to his entire body, and as his organs were attacked one by one as the Hepatitis C destroyed his body until death. Located on the beautiful Milk River Ridge, AB, was their homeplace consisting of a large and smaller home, a huge shop for welding and storing equiptment and a two storey cattle barn and strong corrals. As health diminished he was no longer able to farm, manage his cattle or upkeep his equipment as before. He was given no money upfront from Hepatitis C, as it should've been; so he couldn't hire help; and us family members helped in between our jobs; but that wasn't enough. His doctor visits and hospital stays were tremendous!! Fuel, medical bills, and motel expenses were on-going. worked so very hard all his life to maintain what they had, but he slowly had to sell all his cattle, and most of his land; leaving them with only the following-

1. Home place/ house, shop, corrals, situated on a few (20) acres of land/ valued at approx.$300,00.00

2. 350 acres of land @ $1200.00/acre /valued at $420,000.00 [at years 2004-2005]

***This is the most terrible part of their story---Because had no resources to maintain his farm or to maintain the little they had left for him and his wife, in their DESPERATION they sold all they had left to an unkind farmer for a megar $50,000.00!!!!!

*****In addition to this, when passed away in /2004; was promised $155,000.00 from 2005-2020/ payments of $16,356.88/yr./ to survive. When she passed away in /2012 the goverment told me in unkind words that the estate would not receive the balance of $130,000.00!! This should've absolutely been paid and should be the first thing to be paid back to each person and their families and estates!! Why should the government decide to keep with interest what is not theirs???

How sad that our family could not have the funerals that I and deserved because their were not enough funds!! How sad and embarrassing for them that they were not able to pay our family for all the numerous, ongoing bills, [food, telephone, power, gas expenses] they could not afford because of these 2 blood transfusions I received. I recall his constant pain, on-going weakness, when his kidneys starting shutting down how his legs and stomach woud retain gallons of fluid, [yes, gallons that the doctors had to drain off on an ongoing basis], and lastly when his bowels were uncontrolable; our hearts broke for him. Who deserves this?? No-one.

May the committee do the right and honorable thing; repay to their estate what is true and right!!

Thank-you for letting me be a voice for my dearest brother-in-law, FAXED- 1-604-689-7554

Send I [redacted] is sending more detailed submission 2015

1986-1990 M

B I U Aa A A ☰ ☰ ☰ ☰ ☰ ☰ ☰

To Cc Bcc

jjcamp@cfmlayers.ca

email failed

I received the government letter concerning a reply to the joint committee concerning the surplus for Hepatitis C 1986-1990. I only received this letter a few days ago and I have lots of important information I want to share with you; but how much time do I really have to obtain accurate information for you? the letter stated August 26/2015.

claim # / [
/2004]

claim # [
2012]

I, , am a sister to r; and the executrix of her will and testament, at her passing. I witnessed the sickening process of my brother-in-laws,[ ] struggle with the loss of his strength and organs as the Hepatitis C destroyed his body until death. When he really needed financial help for his ongoing physical health; and loss of his cattle, and farmland and eventually their home; his small amount of money was given too late, [almost on his deathbead]! My sister could not survive on what was given to them; she couldn't even repay what they owed family and friends during these years; she didn't even own her own home at passing; her last hepatitis cheque wasn't even enough to have a proper funeral; gravesite only etc..

I would love to share so may things, if given the chance! Where do I go from here?

Sincerely,

/FAX

TO: **Hepatitis C Settlement**
Joint Committee Class Member Consultation Sessions

FROM:
Date: August 22, 2015

I like to say that:

1. I do not get any money for my wife to bury me with or for her to go on without me at present.
2. Since I was one with haemophiliacs who was hurt and not working on the time of the package. I was unable to get a dime for income for living as worker as had knee replacements at 19 and two ankle fusions two years in a row. I had to take a lot factor viii and blood products for surgeries as haemophiliac. That is why I was not working as I couldn't be able to at the time this package was done before. I should get at least fair share what I could earned say 40 000.00 year for employment income.
3. I believe the surplus should be used to compensate all with a lump sum like done with the hiv when they back dated it and we received around 60000.00 I think be closer to 100 000 each but something.
4. Anyone with has kids should get compensation of something for loss of the spouse that presently have not one I had 20 or so when I sign this as I have had no contact with ex wife in over 20 years. In kind of one lump insure policy I cannot get life insurance. So, there should be a package of between 50, 000each child to 500, 000 for surviving present spouse to take care funeral and as a life insurance package.

I have survived a long time and not sure with getting told I got cirrhosis and almost 90 pesrent in my liver mess and my energy level not in any way what was when I was kid I get weak fast and it is frustrating.
I just like fair amount not asking for the moon and would appreciate if my words help understand the frustrating position I am in. As haemophiliac patient, a hep c and positive to A and B as well, so I could not and would not have any kids of my own as I would not like to infect anyone or pass on the gen.

Thank you.

Sincerely Yours.

Hepc8690 Joint committee August 22, 2015

Claim ID:

To the Joint Committee in response to your newsletter received August 4, 2015.

My name is , I am one member of the family that was directly affected with Hep C from the blood supply that was tainted.

As you could imagine it has left me terrified that I was going to die not knowing what it was. I had already had Von Wildebrand's disease, then I was told 4 of my brothers had the same thing and 2 of my sisters. That's 6 out of 11 of my family.

My poor mother, what she must have thought! My dad died before he even knew any of this, God bless him, and leaving my mother with 11 children we grew up poor not knowing that maybe my Dad was the one who had Hep C to begin with?

She had to get a job in 1969 working as a waitress not making much money for all of us kids. Going back and forth to the hospital with one of the other of us always bleeding. Not knowing her sweet children were going to be affected with the horrible disease hepatitis C.

She did not get any kind of compensation for this horrible disease for herself, WHY???

How could they let this happen, she of all of us should have received something for her children, I know she would have wanted us to have something for all the pain and suffering.

If she were alive today she would be on the forefront of this fight!! After all it was not her fault that this happened, it was the fault of the Red Cross, whom she volunteered for many times over the years.

She would have wanted her children to have something, do you not think it was worth it to her, after all you are giving us money after a long wait! What about the mother that we loved and the money she deserved! Do you not think this is right??? It is not her fault because she died believing that you owed her this money to give to her children!

I got married in 1978, I moved to Ottawa with my new wife of 5 years, I got a job with Shopper's Drugmart in 1983 and after our divorce I went back to Winnipeg.

I got another job with Shopper's once again for one year. Missing Ottawa I went back in 1984 and worked for Ottawa Neighbourhood Services. I lived in a very old Hotel room it was very small because that's all I could afford at the time, I worked hard, and everyone at work liked me. I did all the window displays and ran the furniture department, and after a while I started to sort clothes.

I then met a co-worker and we got along really well, he was living in a basement apartment at the time, so we decided to get an apartment together to make ends meet. We stayed there at that apartment for 2 years, then we decided to move in 1986.

We found a nice house to rent and things were going well until I found out I had Hep C and HIV, I kept on working and I went to the Health Science Center to do voluntary drug treatment for HIV. They kept me on this for 2 years and in 1989 my friend and roommate was told he had cancer.

He only had a few months to live. At this time they treated him like a guinea pig, he was very sick and before he died the doctor told me he had HIV also. He died not knowing.

The doctor gave him a spinal tap which was very painful, the only way you could enter his room was with a gown, gloves and a mask. On the door they had a RED sign Do Not Enter!

I was very upset and I asked the Dr, Why, He told me it was necessary because it was an infectious disease. The Dr. told me he wanted to give him another spinal tap, I said NO he suffered enough, and I said to the Dr you are treating him like a leper!!!

In that year of 1990 that was how they treated people!

Then I told the Dr I was bringing him home to die with dignity. He told me I couldn't do that. I said I would be able to let this happen and called the VON's, the Christian Brother's, I got him a hospital bed and a commode at the home that he loved. The VON took good care of him and the Brother's stayed up with him to allow me to sleep.

His family and friends, co-workers came to see him however he lasted only one week at home and passed away peacefully. I went into a very big depression, I could not work for a couple of weeks and when I went back to work I needed money to survive so I rented out his room to another person at work.

This did not work out so I had to tell that person to leave. So one night when I got back home from work he set my bedroom on fire while I was sleeping. I jumped out of the window of a second story house and woke up in the hospital with 3 degree burns and cuts on my arms and legs. I was given lots of blood transfusions and went into a deep depression. The priest that was there took me to a doctor friend of his that Doctor's name was Dr Donna Bowers.

While I was there at the clinic the nurses changed my bandages and they wanted me to have a blood test because I would not get out of my depression and stayed in bed for three months!

That is when she told me I had gotten HIV in 1990 and it turned out negative, but in December 1991 she gave me another blood test that was positive, she said I could have contacted it from my friend helping him when he was dying, and that's why EAP declined my request!

I have been fighting this since 1991, so far, all I have is the money that I have received from the Hep C claim and it is not enough to survive! Now I have to make seventeen thousand dollars a year last!

After that I got a call from Winnipeg telling me that my brother had died from complication's from Hep C, I was devastated once again, I thought to myself, how can this happen again. Not being able to sleep, I went into another depression and the Dr. gave me more pills!

I was already on all kinds of pills for HIV. I decided to become a volunteer for testing drugs for HIV so I could help other people with the same disease.

After that I did the Pegatron treatment and almost died. They told me my red blood cells were going to low and the Dr. wanted me to stop. I said no because I only had one month to go so I finished the treatment and the doctors congratulated me!

Two years after that I developed cancer, I had colon cancer and I was very depressed once again. I had to go through chemo radiation and became so weak I couldn't lift anything over 5 lbs. So I made Cancer quilted blankets for people in the unit. I lost a lot of weight but I thanked the volunteer people who came every day to bring me to the hospital for my treatments.

Hepc8690 Joint committee August 22, 2015

Now I am a 57 year old man who had cancer, suffered from shingles, have Hep C, liver damage and HIV!

How am I supposed to get a job!

I have to take pills for my depression, HIV and sleeping deprivation. My bowels movements have not worked ever since I have had cancer because they have taken out so much of my intestines and now I wonder how I will be able to pay my bills not to mention food because I have to make 17 thousand a year last.

I am down to 3 thousand dollars until the next 17 thousand come in and I don't know how I am going to make it. The 236 or 256 million would help!

I came to Winnipeg in hopes of seeing my brother Guy before he died of complications from Hep C but was too late, he died in July 2014.

Another depression made me decide to stay in Winnipeg with my family and I went to the Disability Department out here in Winnipeg.

They said I do not qualify for disability because Ontario would not send my files to Winnipeg.

I have to pay out $400 dollars out of my pocket for medications, I can't afford dental or eye glasses.

I hope you read this letter and understand how Hep C has made me feel and left me helpless!

It would be kind of you to help me.

HepC8690 Joint Committee August 22, 2015

To the Joint Committee in response to your newsletter received August 4, 2015.

My name is . I come from a family of 11 children, my father died in 1968 leaving my mother to raise 11 children on her own. He had Von Willebrand's disease.

Of the 11 children, 2 have died as a result of tainted blood, and I still have 4 living family members who are receiving compensation for Hep C.

I am fighting for my brother to be accepted by the EAP for his HIV that was declined in July 1991.

It is 2015 and we are still providing proof he was tainted prior to 1990, that is another story.

I have read and reread this letter you sent and I am appalled that the Joint committee has the audacity to even admit to having a surplus that is only estimated with a difference of 20 million? First what kind of accounting firm did you hire? Where is the 20 million and why did you even let this be known?

So I concluded that you are asking what areas of the settlement fall short and how should the surplus be used.

I went to the website and tried to look at the 91 page document of the settlement and when I first started reading I was shocked by the monetary value of administering and working for this settlement.

Really GST and PST is paid in the millions, people are dying from this so called tainted blood and they never saw anything close to this kind of money? Why is this? Why is the fund only paying $17 thousand a year to a person like my brother, who is unable to work and he gets a letter from you asking what to do with 236 or 256 million, do you see what is wrong with that?

I am going to suggest you first of all increase the pay out to those already receiving this claim to at least include the cost of living or has much of the 236 or 256 million you can spare for that!

Second the settlement falls short in the fact that the government not the people affected are the ones making the most money of this settlement. By that I mean don't add how much you pay out, add how much it costs in court, committee's and accounting fees!

I'm going to pray now to God to provide you all with the wisdom and trust that you will do the right thing and help those affected!

Yours truly,

From:
Sent: August-23-15 10:35 AM
To:
Subject: Re-Edmonton Meeting- August 27,2015

I am very interested in this meeting & still hoping to attend.

Re:Hepatitis C Settlement - referring to (my brother)
As mentioned before - there is his widow , 3 siblings, my self , 2 brothers- and his 6 children = 10 people.
I firmly believe the allocation of portion of the administration of the Surplus should be divided up equally. My suggestion is made with honestly, integrity and without any influence from anyone. To me, it makes total sense in this matter.
Contact me at any time.
Yours truly (maiden name)

Aug 24 /15

Dear Sirs OR madames!

my name is , I was infected with tainted Blood in 1986. I was asked for input on the surplus for the HEPC fund. I will be 69 years old this DEC. As I was unable to work, my pension I.E. CPPETC, is minimal. I struggle to make ends meet with the compensation I am receiving now. I would like to see the compensation increased, for care and home support. struggling financially was not what I had hoped for my "GOLDEN YEARS"

Yours truly

Claim #

August 24, 2015

J.J. Camp Q.C.
Camp Fiorante Mathews Mogerman
400 – 856 Homer Street
Vancouver, BC V6B 2W5

Re: Hepatitis C Settlement Agreement

We fail to understand that all of a sudden that there is a large surplus of funds, when we were told in 2003 that the small amount of funds we received was the end of our settlement to the Class Members and Family Class Members.

Our parents who were never compensated, due to their death prior to any settlement being dispersed we feel was not fair. Our parents got nothing and suffered more than anyone can imagine watching their son slowly die. We all suffered immensely watching our son/brother slowly die of a death sentence due to the negligence of wrong decisions that were covered up for years. We feel as sisters that the compensation we received was not a fair settlement.

We feel that the funds should be dispersed equally among all the survivors and family members that have passed on prior to the first settlement. One of our concerns is, what happens to any funds left over once the infected people and families have all passed. The funds should be dispersed while all infected people and families that have suffered are still alive.

The Courts have no idea the hardships, pain and suffering we all have endured in the loss of a son/brother. We watched him wither away for 10 years in pain suffering from Hep C and the side effects of drugs. Why, because of the neglect of blood products were not being checked and the whole scandal being covered up.

We find it hard to understand why this has dragged on for so long without proper settlement to the families of the one who was infected. It seems that we will never have closure to this situation.

Yours truly,

To Whom It May Concern,

[illegible]-[illegible]-15P03:00-ARNV

My name is . I contracted Hepatitis C in 1986 via a blood transfusion due to a perforated ulcer. I am a Class Member.

Recently, I received a letter in the mail regarding a surplus in the Trust Fund for Class Members and Family Class Members; requesting an opinion of what I think should be done with that surplus. I have chosen to write this letter in response.

Since I have contracted Hepatitis C, I have had many difficulties in not only my health, but in my family life as well. I have been unable to obtain any kind of Life Insurance, I have suffered many health problems, which have placed me in the hospital, and forced me to sit by and watch my children and grandchildren grow; without being able to participate in most of the family activities. I used to be a very active man. Now, I have also developed lung problems, and I will be on oxygen for the rest of my life. I am required to have medical testing done regarding my Hepatitis C, which include, but are not limited to, MRI's and CT Scans. Unfortunately, I have great difficulty having some of these tests performed because they require me to have them done without my oxygen, which I am unable to operate without....at all. The last MRI that I had, shows that I now have a spot on my liver, which my doctor is keeping an eye on. The only way this can be observed, is through an MRI; again, which is almost impossible for me to handle due to my oxygen requirements. To say the least, I think that I, and anyone else who contracted this disease, have suffered enough. It has been a rough road to travel.

We, as a group, won our lawsuit. But, have yet to see our full settlements. Quality of life has significantly reduced, and there's little chance to have anything to help pay future medical expenses (Including travel expenses) or expenses for my family, after I pass. In my personal opinion, this surplus should be used to pay towards the Class Members and Family Class Members, before it's too late. Because we all know what happens when all of the victims of this unfortunate mistake are gone; their families will not see any of the remaining settlement owed, and the government will reabsorb it. Holding the funds in Trust also creates another bureaucracy, costing taxpayers more money.

Please realize, I am not trying to be bitter, I just want what is already owed to me. And I'm sure other Members feel the same way. So in my humble opinion, please pay the surplus out to the Members, to help them to possibly have a chance to get caught up financially, to help raise their quality of life, or to set something up for their families.

Thank you for giving me the chance to voice my opinion, I look forward to observing the result of the Joint Hearing.

Sincerely

To: whom it may Concern: Aug 25th/2015
From: Claim #.

(Hep C 86-90 Joint Committee)

To the Joint Committee in response to your newsletter recieved Aug 4th/2015. First + fore-most I would like to Thank this commitee for this opportunity of rerreviving our claims.

My name is as you may already know I am another member of the family which our The ~~the~~ first transfused, Hemophiliac Von Willerbrand's decease VIII who has been infected and affected directly with the Hep C Virus, from the blood supply which was tainted, by the Red Cross + the F.P.T. government. I come from a family of 11 children, 6 hemophiliacs (4 Boys + 2 girls). Growing up and and surviving with all the complcations of just being a Von Willerbrand's VIII. Example: Nose bleeds, ears, mouth, G.I. bleeds + Menstration. Not to say less than just plain hard life. This standard of life has also been like being burnt, Leaving scarring + affecting every possible phase of my life! Through-out these times my family + I have suffered more then our share of hardships. My poor Mother had no choice but to resort to using Rags to stop + cover or bleeds. The amount of towels + sheets my mother not only had to rinse in cold water to get the blood out to re-use this materail was very disappointing + very hard on my mother + other family members. My brothers + sisters were just plain scared, not knowing if we were going to live or die, how awful.

→

HepC 86-90 Joint Committee

a)

Aug. 25/2015

My Mother passed away with out a penny. Her telephone bill was not even paid at the time of her death. Although being sick with the Hep C. Virus, I took a job waitressing at the St. Boniface Hotel so I could pay for her head stone. It said,
loving wife of and her 11 loving children Rest in Peace Mother. Sorry to say the amount of Money 17,000 a year is not nearly enough to live on when your out bleeding losing jobs, going to the hospital, liver problems. Even trying to pay for my personel material ex: Kotex, Tampon's, Band-aids. Not to mention hospital trips, rent, bills & food. I still tried to hold my head high, but this is not easy when your living on welfare. I would please ask the committee for a fair Compensation (35,000 - 50,000 a year) would bring our lives back up to the living standards of our complacated lives. That's not meuch for a family the got wronged by the Red Cross & the FTP Governments is it?? I have already lost my father, Mother & 3 brothers Guy, Raymond & Eugene from this tainted blood scandel. Do we not deserve a better healther standard of life before death comes for the surving of my family. Futhermore, I been put down, denied, Harrased, beat up, just for the fact they thought I was a dirty Junky with HepC. & HIV virus. For this I'd have to say thank's alot for making my life feel lower than a dog's life. If I did not receive this tainted Blood, I would of had a better chance of getting a better job & education (which was my →

Hep C 86-90 Joint Committee

Aug 25/15 ②

a legal-aid lawyer or some kind of job that would not discriminate me for being infected with Hep C. I have recently been diagnosed with Cancer. So this makes everything even more intense then ever. I have been so depressed & broke I almost wanted to end my life. Thank-god I've got the support and strength of my family; which seems to make the pain of all this a little easier. If something or someone doesn't help us with a better quality & standard of life then I would have to say I'd feel a very huge mistrust from the people like this committee for not doing the right thing for my family & me. I hope you can read this & understand we still need help & support.

Thank-you very much

PH # , or

My Brother

Ph. #

W:

From:
Sent: August-25-15 9:32 AM
To: J.J. Camp
Subject: hepc settlement agreement

To Whom it may concern: Thank you so much for giving me this chance to give my concerns and response. I am the daughter of a recipient of hepc through a blood transfusion. We were compensated in the past for the loss and illness of our Dad but I in no way feel it was sufficient for many reasons. The first one being the loss of our father and secondary the risk it put us all at as a family for we were not told by the any medical authority or hospital or doctor involved that he had contacted Hep C. I was caring for both my Mom and Dad thru their respected illnesses and then many falls where my dad would be bleeding and I of coarse would help clean him up simply because that is what you do for you parents, but if we as a family were informed about this illness we could have and would have put precautions in place. I was also caring for many foster children through our Dads illness and they were exposed to him so much and had any of these foster children caught hep C I would have been in a very unfavourable situation which would very likely ended my fostering career and these children who had already suffered from many difficulties in their past would have very likely been removed from my home not only to be sick but to have their home here where they were loved and protected taken from them.. For this money to go back to the government would be a travesty of injustice. They are not the ones who have suffered the loss and should not have the right to decide what they want to do with our entitlement compensation. Thank you for letting me voice my opinion. I hope in some small way this helps others who have also gone through what this family has been through.

With much respect

[illegible]-31-15P[illegible]4:1[illegible] RCVD

Home Phone:
Cell:

To Whom It May Concern,

Re: Communication mailed July 31, 2015 for the) Hepatitis C Claim Input

Please consider the following as my Input to the Joint Committee on how I think the Trust Fund surplus should be distributed.

As per my original letter requesting a late claim due to the fact my dad had passed away and going through all my mom's paperwork I came across the 1986-1990 Hepatitis C Claim letter from the Blood Services Department informing dad of the tainted blood and possible Class Action Suite. The reason I was going through mom's paperwork is because she had developed Dementia/Alzheimer's, sadly she passed away on , 2012.

I fully agree with the application that the Joint Committee will be making and feel that family members who have gone through the pain and suffering of watching loved ones suffering from this disease that was caused by no fault of their own should be entitled to whatever is appropriate, as there is a surplus I feel that this money should be divided among those that qualify.

Concerning claim I feel that the fact that the forms were not received by the dead line should not be held against it as I had never heard of it and had no idea that my mom had received correspondence concerning the above claim.

Warmest regards,

From:
Sent: August-25-15 8:58 PM
To: J.J. Camp
Subject: 1986-1990 Hepatitis C Settlement Agreement Surplus

Importance: High

Hello,

I am writing in response to a letter I received and webcast I watched regarding the joint committee for the 1986-1990 Hepatitis C Settlement Agreement Surplus.

My grandmother, had a liver transplant and needed a blood transfusion which resulted in her receiving tainted blood. Unfortunately she died prior to the first settlement being paid.

Having her taken from us while I was a young adult was difficult as we were very close and she missed out on many family milestones. Since she was a young grandmother she could have been at many of these events. We miss her deeply and would have loved to have her involved in each one. The most recent milestone that she missed out on was the birth of her great granddaughter, .

It is of my opinion that the monies in surplus should be paid out.

Best regards,

Please note my address has changed. My current address is:

August 25th, 2015
J.J Camp Q.C
Camp Fiorante Matthews Mogerman,
400-856 Homer Street,
Vancouver B.C
V6B 2W5

RE: Hep C 86-90

To Whom It May Concern,
Please accept (and use) the following letter toward the ongoing court decision for the Hep C 86-90 class action surplus.

To start, I would like to acknowledge and thank the committee and the courts for encouraging input from everyone affected by this tragedy. I did log onto two webinars and was amazed at how well they were facilitated. The panel was understanding, kind, knowledgeable and open minded. Leading up to, and during the time of my sisters' death, I was often very frustrated by the medical system and the direct dealings with the hepc 86-90 processes. However, being asked now for input restores my faith a bit. I do understand that the final decisions about the compensation surplus will be made by the courts. My family and I appreciate being asked to give our deceased sister a voice.

While watching the webinars, it was immediately obvious to me how big this situation is and how deep it goes. Everyone has their story, and even though the specific details may vary, the end result is the same. The same for those infected with this disease, and the same for the loved ones left behind.

Our family lost my sister She was the second daughter (of six girls) born to our (then diseased) parents. needed blood transfusion during the birth of her only child in 1986, and left the hospital with a terrifying future ahead of her. was a single mother to her one and only son. Our family has never been the same since her death.

I listened to the webinars and as they went on I became a bit anxious at the enormity of the situation....seemingly impossible to dig deep enough.

My first thought was that there would need to be way more compensation put into the (existing) surplus in order to cover the depths of the damage done. The medications alone must be available at no cost, for everyone who needs it.

was at the top of the transplant list for her blood type. We were told that being on that list meant she needed to have a support system in place before, during and after receiving a liver. So when my sisters' health took the final bad turn, that's what I did. I took an unpaid leave from my job (and life) in a town hours away, to come tc residence to help her. I was here for six months. Sadly fell into a coma during that time, and was considered too sick to receive a transplant. She was removed from the list. passed away in June 2006. I helped transition through her death, closed up her life and I was the one filling out all the forms for the Hep-C 86-90 class action.

As a family member who went to help my sister within an already 'stressed' healthcare system, I can tell you that the process, rules and restrictions made that attempt difficult at best.

My thoughts and opinions about the surplus are as follows:
From the beginning, there was obviously a process for the division of the compensation. Amounts of compensation put in place for available drugs & treatments, compensation for each level of infection and various amounts set to cover personal and daily needs (ie: Cost of Care). The compensation also included those left behind (ie: children, spouses, siblings).

I would suggest that the surplus be used in the same way. Using the same formulas, make the drugs readily available. Divide the surplus (accordingly) between everyone who has already put in a claim within the various areas. Those infected, and those who have already died (for their estate). Family members left behind, and those who offered direct care to their infected loved ones when the health care system and hepc 86-90 system did not provide.

Please accept this letter with all sincerity. I look forward to hearing from you.

AND

August 25, 2015

Dear J.J. Camp,

My grandmother contracted Hep C from a blood transfusion. Her file # is and she was born on . She lived with us for a few years until she lived at for awhile but was not able to live independently. Before moving in my mother drove over an hour each way to Nanaimo every weekend to see my grandmother and help with shopping, etc. My family had my grandmother live with us as she kept having bleeding and hospitalizations. My mother had to be on duty 24/7 to look after my grandmother as she was weak and unable to look after herself. While at work my mom had to have homecare nurses in to help with care. If my mom wanted to go away the family had to make sure someone was home to look after my grandmother. My grandmother did not like for myself or my sisters to have to look after her as it was often not pleasant for her to feel a loss of dignity at needing support with private matters. She did not enjoy the loss of control and being dependant on us for care, as she was bed ridden. Her quality of life was greatly affected by Hep C. Eventually, she needed to be in long term care with a sign above her bed indicating she had Hep C.

My grandmother passed away before being able to attend any family milestones like University Graduations, weddings and grandchildren. We toasted her at all our weddings knowing she would have wanted to a part of these family events.

Years of pain and discomfort, and loss of independence is not anything you want family to go through. The memories of my grandmother watching family BBQ's from her window as she was unable to get out of bed to join the family is sad. The many worried hospital visits as she had major bleeding and ambulance call was hard on family.

I wish to see the surplus money divided among those that lived with or were impacted by Hep C. My mother was dedicated to looking after my grandmother for years. We were all emotionally impacted by the Hep C, but my mother more so as she was responsible for and often the sounding board of frustration when my grandmother was in pain and unable to care for herself. It was very hard for my mom to handle the emotional stress of caring for my Grandmother. The cost of caring for her was also left to family. My mom had to pay 15 dollars an hour for homecare for 4 hours a day each week, plus anytime she needed to leave the house without a family member available to watch my grandmother. It was very difficult to watch a loved one struggle with being bed ridden and in pain. The emotional, financial and time invested in to caring for my grandmother is hard to measure, but if they have set aside money to compensate families, I think that is where the money should go.

Sincerely,

From:
Sent: August-26-15 10:52 AM
To: nfo@savonitto.com; kp@toughcounsel.com; hepc@strosbergco.com; J.J. Camp
Subject: Fw: Submission to Joint Committee Members Hep C Settlement Agreement
Attachments: Submission to the Joint Committee 2.docx

Sorry, I missed the attachment on my original e-mail.

Attached is my written submission to the Joint Committee members expressing my views on the 1986-1990 Hepatitis C Settlement Agreement.

I will give you a quick overview of my background.

- I had blood transfusions in 1986 following surgery for a hysterectomy. Up until that time I was a reasonably healthy woman. In 1986 I was 46 years old.
- Soon after surgery I was very ill and at that time it was determined that I had non A non B Hepatitis.
- With rest, diet changes etc. I recovered rather quickly and resumed all my normal activities.
- Around the latter part of the eighties I got sick again. Interestingly enough my doctor and subsequently other doctors could not find the cause of my illness.
- In late 1994 I was finally diagnosed with Hep C and referred to a gastroenterologist.
- In between 1989 and 1994 I went through very trying times hence some of the comments in my submission.
- I was treated with alpha interferon for a 30 month period during which time I had symptoms very similar to the flu, in other words, not good.
- After treatment I started a slow recovery & am still feeling the effects of the virus/treatment to this day.
- I will be 75 in November.

08-31-15P04:17 RCVD

26 AUG 2015

J.J. Camp Q.C.
Camp Fiorante Matthews Mogerman
400-856 Homer Street
Vancouver, BC
V6B 2W5

To Whom it May Concern:

As one who was affected by the failure in our medical system second hand, I feel adequate financial compensation has been made: nothing can make up for the suffering of my father before he died.

Instead of dispersing funds widely, why not establish a trust fund or foundation in the name of , to support efforts to ensure such deficiencies in our health system are less likely to occur.

Yours sincerely,

Submission to the Joint Committee

1986 – 1990 Settlement Agreement

My Recommendations (based on personal experience)

- I am in agreement with the joint committee's recommendation to use the surplus monies from the trust fund for the benefit of the class members.
- The surplus monies or whatever portion the courts deem to be given to the claimants should be distributed in accordance with the most recent level the claimant was assessed. A percentage calculation would be best as it would then be an accounting issue rather than an eligibility issue.
- A lump sum payment would be the best avenue to pursue as many of the claimant's are in advance years and are in need of assistance at the present time. They are not looking to enhance their estates to benefit their beneficiaries.
- Families whose relatives have succumbed to the virus should be included in the distribution of funds. Money cannot replace a deceased family member but with the loss of that member addition expenses incurred should be compensated.
- The hourly rate for loss of services in the home should be upgraded to correspond with the "going rate" for comparable services in the home.

Considerations/Key Points

- The monies from the fund should benefit the claimants that were affected by the unconscionable decision not to test blood for Hep C even though an accurate test was available. The hardships that were suffered by the claimant's and their families vary according to their own situation but each case is credible.
- In the early years of infection and illness from the virus, many doctors such as mine were not familiar with the disease and therefore wrong or inaccurate diagnoses were made. Many of the infected were simply told they were imagining things. For those that were working It was difficult to obtain a doctor's certificate to take paid sick leave. Many continued to work, even though ill, as they couldn't afford not to as rent, mortgages and sustenance were necessary.
- Prior to receiving any benefits from the settlement agreement many claimants could not continue to work and still be able to do the household chores that they did before. They were forced to hire help for things such as snow removal, yard and garden work and minor repairs.
- Some persons had family members that picked up the slack but some like me who were single had a very limited support network or none at all.

- Claimants had to retire from work earlier than anticipated and although the settlement picked up the loss of income there was no allowance made for loss of contributions to a pension fund or loss of health benefits.

- Current payments for loss of services in the home do not begin to compensate for the cost of such work or for the amount of time contributed by family members or friends.

<u>Impact/Stress Factor</u>

- It is impossible to assess the impact/stress factor that infection with Hep C has had on the claimant's, their family, friends and even their colleagues and coworkers. As mentioned earlier each case is different but yet the same in so many aspects. When listening to other claimant's it is so easy for me to identify with their situation.

- Aids were very much in the news at the same time as Hep C so there was a certain stigma attached to Hep C. Public Health was notified once the diagnosis was for certain and infected persons were interrogated by, in many cases, insensitive civil servants.

- The treatment of the virus came with side effects that were at times worse than the ailment. The fatigue and flu like symptoms never went away for the entire 30 months that I was on alpha interferon. In fact it lingered on for months afterwards.

- The presence of the virus has resulted in being more susceptible to other ailments or/and the worsening of existing conditions.

- General health and age at the time of the infection also played a key role in the severity of the disease.

- In smaller communities or remote areas it was difficult/impossible to get an appointment with a specialist. Family doctors were not familiar with Hep C. In two separate instances my family doctor told me that I was their first Hep C patient. One told me I probably knew more about the decease that he did and he was right. I did.

- Money cannot replace the embarrassment and emotional, mental and physical burden that this act of negligence has placed on so many over such a long period of time.

- Depression is something I will not elaborate on. There is no need. All you have to do is read my submission or others like mine or listen to the folks at the consultation sessions.

For me to have received tainted blood is very hard to fathom. That prevention was an available simple inexpensive test. It is time to right the past wrongs and try to ensure that preventable things are prevented. It is also time to allocate the available funds to the claimants while this can still be done. Delaying this matter will only add to the anxiety of the claimants and their families. We have suffered enough.

I am grateful that I survived although over the twenty-nine years since my transfusion there were times that it was very hard to be grateful and very difficult to continue living. We do what we can.

Thank you for the opportunity to comment on the settlement agreement. Please feel free to contact me if you need clarification on my submission or if you have any questions.

Respectfully submitted by

Submitted: August 26, 2015

Mr. J.J. Camp
Dear Sir:

With respect to the Financial Sufficiency Review of the Hepatitis C Settlement Agreement, please see my comments for the Court below.

1. I believe the claims approval process is too long. I don't know the exact sequence of events that must take place during the process for a claim to be approved, but I think it could be shortened. My experience has been that I submit a claim near the end of December, but the cheque doesn't arrive until late in February or early March; it's usually two full months from claim submission to funds received. My understanding is that if I had direct deposit, it would speed up the process by about a week.

   I'm asking the Court to ask the Administrator to review the claims approval process to determine if the process can be shortened.

2. Over the years I have thought about what might be helpful to me as a person with Hep C. Because it has affected my legs so bad, I thought either a chair lift for our stairs or a scooter for walking outdoors; either one would help my quality of life. I remember asking one of the reps at the Hep C Claims Centre about the chair lift and was told "we don't fund those." I have also been told on another occasion that the claim "...has to be **directly** related to the Hep C."

   As a result of my contracting Hep C I now have severe Leukocytoclastic Vasculitis in both legs and feet and the Cryoglobulinemia that was diagnosed in 2011 is also affecting my legs. These two illnesses effect my walking, and particularly walking up hills, inclines and stairs. The main symptom is pain. As well, I experience sensory nerve impairment often which makes my legs and feet feel, numb, tingly and spongy. The fact that these illnesses are a result of the Hep C makes me wonder, "what do they really mean by directly related." Using this argument would make it easy for the Administrator to deny a claim.

   As a side note, the Cryoglobulinemia has also caused kidney damage, which (according to my Nephrologist) in time will cause me to need dialysis. I don't know what costs might be involved at that point, but hopefully monies will be available. As this illness progresses there will likely be costs that are not covered by the BC Medical Services Plan-my hope is that there will be funds available through the Hep C Claims Centre to cover any unanticipated costs. If it turns out that there are costs not covered by MSP, and as a senior on a fixed income, I would be hard pressed to be able to cover them.

   I must admit I don't know what criteria the Administrator uses to decide whether a claim is approved or not. I believe (and my doctors would concur) that my Hep C has caused the vasculitis, and the cryoglobulinemia and they in turn affect my ability to walk. Therefore, I would say that my difficulty walking is directly related to the Hep C; whether or not the Administrator sees it that way is anyone's guess. The reality is that my having Hep C has negatively affected every aspect of my life-e.g. from travelling to walking to playing with my granddaughter, etc.

   I'm asking the Court to require the Administrator to explain specifically to the claimant why the claim was not approved. And the Administrator should also be required to inform the claimant that there is an appeal process. Also, the policy of "directly related" should be reviewed and perhaps changed.

Sincerely,

1986-1990 Hepatitis C Settlement Agreement
RE: Surplus Funds

The Late
Mother of

August 27, 2015

09-21-15P01[illegible]-ARNV

Joint Committee Member
J.J. Camp Q.C.
Camp Fiorante Matthews Mogerman
400-856 Homer Street
Vancouver, British Columbia V6B 2W5
604-331-9520
jjcamp@cfmlawyers.ca

Dear Sir/Madam:

I recently received a letter regarding the 1986-1990 HEPC Surplus Funds.

This letter is written with regard to the notice of Surplus Funds.

My Mother contracted Hepatitis C died April 6, 1999. The Government provided compensation money to me at the time of the 1986-1990 HEPC Settlement. It seems to me that with the amount of the surplus funds, at this point, that the initial compensation package was possibly not high enough resulting in the dollar amount of surplus funds, which accoding to the letters is between $236 million and $256 million.

It is therefore my opinion that since the surplus funds are a direct result of investments from the original compensation fund that the funds should be paid out to the people who have been directly affected and experienced the loss of a loved one, namely my mother

The research that is mentioned in the letter should not necessarily be part of this discusssion, since to my knowledge, it was never a part of the original settlement. I believe the Government has a responsibility in research but not using funds from the original Compensation.

Yours truly,

Son of the Late

email:

From:
Sent: August-27-15 9:41 PM
To: J.J. Camp
Subject: Submission for allocation of surplus money of Hepatitis C Settlement

I wish to formally submit my strong belief that some or all of the surplus money be distributed to the families who lost of a family member from the 1986-1990 Hepatitis C.

My husband, passed away , , 2003 from the Hep C he contracted during blood transfusions to control his hemophilia. His approved claim number was # part of the Class C settlement .

It goes without saying that his death brought a profound loss, both emotionally and financially to my life, and the lives of his sister, daughter, son and two grandsons. Since then there is one more grandchild who never had a chance to know his grandfather. My life and the lives of s family were all painfully changed with his long illness due to the effects of the 'tainted' blood which he took as transfusions for his lifelong hemophilia. He suffered a long-drawn out and painful death which was so unfair and uncalled for if adequate testing had been done.

I feel it is only fair that any surplus money be shared between the families who suffered from this. This money should be used now to help in the care and support of the families as they continue to live a life without their loved one. This money should be used to make their day-to-day lives easier, rather than sitting in a surplus account and perhaps never be used as it was originally intended.

Sincerely,

C.
H.

Responses for the HepC supplement considerations by the Joint Committee.

Has the income loss payment kept up with the going rate in the infected person's field or job?

The cost of living factor and salary increases from 1997, when we found out my husband had Hep C, **has not kept up adequately with today's salaries.**
His calculated post income at the time was about $56,000.
Today, **had he been alive and working as a Senior Registered Paramedic, he would be making closer to $85,000-$90,000.** However, yearly settlement support amounts are only based on the $56,000 post income. If you take into consideration that material goods, groceries, gas, tradesmen wages, etc have more than doubled in the last year.....the settlement amount doesn't go very far.

At what age do people working in the infected person's field and job generally retire?

was a registered paramedic with the City of Calgary. Had he been healthy and lived, he would have retired at about age 65.
However, a **Sun Life survey of 3000 people done in 2008 showed 41 percent of respondents considered they will work after the age of 65,** most because they have to have more income. We know that people are working after retirement at other jobs and are living longer. Had lived and been healthy, we would have been able to work longer, saved and invested money, been able to buy life insurance and had a number of retirement strategies.
Due to the HepC (bioweapon) that was all cut short. My son and I only received the $165,000 lump sum, as died prior to 1999, and later a $5000 bonus. **Had lived he may have been awarded money as he progressed through the stages of the disease....**that amount would have been closer to $250,000.
became infected in 1987, when he received a heart transplant. Staff at the U of A hospital knew he had HEPC, but kept if from us under orders from their superiors, because of potential law suits. I did not discover he was infected until 1997 when I was told it was one cause of death.
could not qualify for insurance, so any money from the award and work insurance went to pay off debts, credit lines and mortgage liens. The $36,000 yearly loss of support, supplemented by work pension and my income (low wage earner, as I was part time looking after and while he was ill, and as a single parent after his death), which was minimal in comparison to what we could be earning if we were both healthy. The payment only kept us slightly ahead of poverty levels. Most importantly, I am **disappointed that the fund claws back support payments and forces individuals to apply only for services, when my husband would have reached 75.** It means a $20,000 shortfall, which puts me living at close to poverty level at a very vulnerable age. This is a most important time to have a supportive partner's income and services. There is no provision for a lodge or nursing home for spouses, whose income was adversely affected by their spouse's demise. It puts a burden on family members to support them. More seniors are working into their 70's or more, so **I believe this factor is also severely out of date and needs to be reviewed.**

Did the infected person contribute to a Registered Retirement Savings Plan or have a pension plan while in the work force that has been impacted by leaving the work force?
He had no RRSP as he died at age 44 and we needed the money to live.

Were Employment Insurance, Disability Benefits, Canadian Pension Plan and/or MPTAP deducted from the infected person's income loss payment? Did that cause an unfair disadvantage?

When he was ill he could not qualify for Canadian Government disability benefits (you almost had to be unresponsive or in a coma to qualify for those) and he had some work disability but it didn't equal lost wages. He kept working through the good graces of his employers until he died.
The plan **deducts for my widows pension yearly** in the compensation package and yes I would say that is a considerable disadvantage**....the extra money would go a long way for those on a limited budget.**

While the infected person was still in the workforce, did he/she also regularly do household services around the home?
did a lot of things as best as he could, in spite of his illness. We relied a great deal on friends and family, but that goes only so far. House maintenance, car repairs and other **things were too costly to pay contractors**, so we all worked at them as best we could. My son, although young, was required to do more than a young person should ever be required to do. did most of the driving and helped with the cooking and laundry.

Once the infected person was not working outside the home, was he/she able to continue to do the things around the home he/she once did?
The deterioration was evident, things took their toll and took longer.... **eventually and I were doing all the jobs that , would have normally done.** I remember him being very disturbed about what the neighbours would think, as I was the only one seen doing the outside work all the time.

Did the infected person give up doing things around the home so that he/she could continue in the work force longer?
Yes. He conserved his energy for work, but was not a complainer. He told his close friend many days that it was difficult to get up out of bed and go to work. He was not allowed on the street as a medic, so his employers (a godsend to us) found a position for him in emergency 911 dispatch, however the stress of that position also was very tiring for him.

How does the maximum of 20 hours/week compare to the time the infected person spent working around the home before HCV prevented it?

It makes no sense to me that this payment is an either or for deceased members families. The support and the service are missing the minute they die!

The time allotment is not the problem, as all of us fill available hours just doing things around the house that need done. It is the amount of money awarded for this.

Do you hire out the replacement services for work the infected person did around the home or are these tasks performed by another family member?

Yes, I have had to hire out the work, especially now that my health has been exhausted from the past trauma in our lives. I now suffer from stress related maladies, heart problems and arthritis. The house has so many things wrong that I can't afford to pay tradesmen for, that I don't know if I will get much equity out of its sale.

How does the hourly rate you receive to replace work the infected person did around the home of approximately $16.50/hr compare to the rates you are paying for replacement services?
When you consider that employees at Tim Hortons are getting close to $14.00 an hour, $16.50 hardly pays for anything. I had a yard company just shovel walks and mow lawns and their rate alone cost $150 per month and that was only once a week, so that is $37.50 an hour. Housekeepers charge $50 per hour. Trades to fix your roof, plumbing, electrical, car troubles, charge $75 to $150 hour and materials.....so to cut someone's support payment and give them $960 to cover living expenses and all that, is pretty cutthroat and sadistic if you ask me.

Costs of Care – a payment of up to $67,000 annually to pay the costs of care and assistance with daily living for the infected person at Disease Level 6
Is the care being provided in your own home or at another facility? If provided at home, are these care services hired out or are they performed by a family member? Does the amount you receive cover the costs being incurred and hours being spent for care?

We did not get the $67,000 annually for looking after in our home, because we were lied to for ten years and did not know it was HepC affecting his health. He died before the claims were authorized and we were not offered any money for those ten years of suffering. This is another one of the injustices of this plan.
The claims should start on the date of the infection with moneys retroactively paid to that amount.
When he was ill, we cared for him as best we could, which was pretty much 24/7. What we did for him, let him live a fuller life.
Otherwise there were times when he was in hospital and we thought it was related to his transplant and medications (a heart and kidney transplant recipient). When he died, there was an autopsy done that indicated his heart and kidney was fine, however the Hep C had ravaged his liver, brain, bone tissue, among other organs in his body.

The money would have been welcomed, but it does not compensate for the caregivers wear and tear on their bodies and their emotional and mental health.

Did the infected person require significant care before he/she reached a Disease Level 6 medical condition? If significant care was required before Disease Level 6, how did the hours and costs?

was in the hospital for about a month before he died, and many, many times prior to that. **The Edmonton journal calculated the hospitalization rate was at $1000 per day, in 2008, which I imagine has increased considerably since then. That would mean $30,000 per month, which is considerably more than $67,000 per year.**

Out-of-Pocket Expenses – to reimburse out-of-pocket expenses incurred due to infection with HCV. Does the money reimbursed for out-of-pockets generally cover the full amount the expenses you incur?

Absolutely not. When was alive his work medical paid some of his costs, but medication was a big expense. One drug alone cost $1000 which was partially paid under an emergency initiative, but meds for drug induced diabetes were not and lost wages were not. Because we didn't know about the HepC when was alive, no money was provided for multiple trips to the hospital or missing wages for hospital stays. **No reimbursements were given at all.**

After he died:

Last year I spent over $52,000 on living expenses alone, a lot of which included **medical payments and costs paid to others due to absence** from my life, leaving little room for savings, emergency money, or retirement savings. This plan does not consider our main provider was essentially murdered by the HepC infection.

It does not provide for **family medical expenses** lost to those who have no work plan. (I had to pay $350 taxi fare f or one trip to and from the hospital in Calgary due to an emergency admission because there was no one available to drive me there and back.) I have had to pay for a **psychologist** at $100 a visit, to work through losses and trust issues. I cannot afford appropriate medical insurance and have been putting off a root canal because I can't afford to pay for it. I have had to rely on neighbours and local Family and Community Services to do repair work, emergency maintenance, yard and house maintenance….because **I can't afford regular contractors**. (Thank God for loving neighbours)…but even that goes only so far). I can't even afford to sell, as I have had to use the credit line to make ends meet and the sales market won't leave much in equity.

Family Member Payments – a payment for the loss of guidance, care and companionship of the infected person, after his or her death

- **Spouse of infected person** – $33,644 ($25,000 in 1999 dollars)
- **Child of infected person under age 21** $20,186 ($15,000 in 1999

dollars)
• **Child of infected person age 21 or over** – $6,728 ($5,000 in 1999 dollars)
• **Parent of infected person – $6,728 ($5,000 in 1999 dollars)**
Does the payment to any particular family member seem out of line? If so, how or why? Does the payment to any particular family member seem out of line with the payment to any other family member? If so, how or why?

While I am so glad for all those infected, that a cure is available, it seems like there is a lot more money put into lawyers, administration of the fund and the living over the dead.
It is unfair. I would give anything to have ; alive and taking treatments towards an ultimate cure and with me and his son today. I think and mine loss (and the loss to the families that donated organs to j) is more than can ever be compensated for, but that doesn't mean we should be **just written off as a non-expense.**

In an article Written by Louis Del Signore on March 21, 2013. Posted in Personal Injury & Motor Vehicle Claims He states personal injury claims in motor vehicle accidents are capped at **a threshold of $340,000 for pain and suffering**, but

"In order for your claim to pass the threshold, the injuries sustained in the motor vehicle accident must have resulted in:

- Death;
- Permanent serious disfigurement (e.g. loss of a limb or scars); or
- Permanent serious impairment of an important physical, mental or psychological function."

Adjacent to the website is an article that awards $150,000 per person to a company whose employees were sexually harassed.

With just these two examples, **I think our payouts were terribly underrated**. I also think that **the claims should start on the day the people were infected**, not on the day the suit was won.

I also take offence **that children of the deceased are not adequately compensated and cut off after their 25th birthday. They have lost a father (or mother) which is as traumatic as the loss of a spouse**.

I cannot tell you in words how much damage it has done to my son and I. Our trust has been destroyed and our family unit annihilated, never to be regained. It is like we live in an altered reality now. We are still working out the trauma of losing my husband. **Emotional and financial support is a life-long necessity.**

Who hasn't had a time when they relied on family to give additional support for that new baby, or first house, or many of the other family supports needed throughout our lifetimes. A Stats Canada report on delayed transitions for young adults states **that children are leaving the home later in life and sometimes return to the home for financial support.**

"Overall, the transition to adulthood is now delayed and elongated. It takes today's young adults longer to achieve their independence: they are leaving school later, staying longer in their parents' home, entering the labour market later, and postponing conjugal unions and childbearing."

We also know that the educational processes are a lifelong cost to keep up with employment requirements.

To my knowledge there is no provision for educational support for members of the family in this plan (unless is at the University of Ontario and not all are approved or is the course content comprehensive or easy for the person to attend).

Spouses should also be supported through an educational process as it allows them to become more self-sufficient.

As for **funeral expenses**, the total funeral cost $10,000, which the plan would not of covered except for the Canada government payment. We cut costs by utilizing cremation, no internment, cheaper body transportation and a donated funeral location of a local school.

We might have done it more traditionally had the money been provided. My father's funeral plot cost $10,000 and his internment and casket another $10,000, with services and reception another $5000.

If you could change one thing about the Plans or the payments you receive under them, what would you change?

There is definitely **more than one thing to change**. I have outlined some above. To summarize:

- Lump sum payment increases for pain and suffering and loss of family member
- Start claims at the time of infection
- Increased loss of income to reflect wages that would have been available had the person lived or been working at the job he was employed at before infection.
- Increased support and service payments to include education costs for spouse and children, medical and psychiatric plans, payment for upkeep of homes and service calls from tradesmen, transportation costs, extra medical costs and provision for widows/widowers in their old age.
- Take the money spent administering the fund and the money spent on lawyers reviewing the funds and give that money to the recipients.
- I can't see surplus being a lot given the number of members, however the ability to take a lump sum amount if they want for any awards in the plan and invest it as the person sees fit to get interest and dividends off it would be good too.

Life insurance?

Life insurance is impossible to get if a person has anything more than the common cold. **It is something that courts need to review and mandate that definitions of a pre-existing illness be not open to interpretation of the insurance companies.**

Final comments:

I would like the courts to keep in mind that **this is a class action settlement, not a government program.** While I agree that members must be looked after, the government has broadened and changed the parameters of this suit to let all HepC/HIV infections into the fold.

Justice was not done for those who died and the spoiled families caused due to the tainted blood. Someone in the supplying companies, who in the US were required to test for the infection, knew that the supplies were tainted. They and their connections in Canada were not extradited or punished. Shredded documents and the fact employees of Canadian hospitals were threatened with job loss and told to withhold information from clients indicate culpability. Had it been a bioweapon released (which it ultimately is) and the number of deaths calculated, there should have been a criminal trial held in the Haque for crimes against humanity. There is more traceback done on the victims qualifying for the program than was ever done to find those responsible. There wasn't even acknowledgement or an apology made by the government, to the victims of this horrendous crime, and they wonder why Canadians don't trust our politicians and health care agencies.

The loss of my husband is a scar on our lives and this action has done damage that will never heal for me, his son, his friends, those he would have saved through his profession and the families that donated organs' so he could continue to have a positive effect on all our lives. Even those who treated in hospitals, hoping that their efforts would give him another chance at life have been betrayed through this tradgedy.

How the limits for compensation were determined and administered were never explained, nor were we consulted prior to the award as to what would be fair compensation. We were encouraged to take what we could get.

It seems that even the push for a cure might have **been to deliver these funds back to the government, which would be the ultimate injustice to all who have suffered.**

I say NO, NO, NO.

Criminals who have tried to profit from their crimes through marketing their stories are not allowed to profit by the courts. How would returning this money back to the government be any different? This would be a travesty and **should not be allowed.**

Now that a cure has been found, the money would do more good in the hands of the people's lives it affected and changed forever. Let them decide whether or not they want to give funds to further research efforts. **Research agencies should have no part in this.**

Return the money to the members and their families. I feel those families who have had members die, deserve more compensation than those who have the ability to be cured.

Those who were given the HepC through regular medical procedures should be compensated for their existing illness and money and support awarded until they are cured. They should be supported to gain good employment after they are cured.

Those who gained HepC or HIV through unlawful needle exchange and unprotected promiscuous sexual practises, should be compensated less but given support for medical care and the cure.

Sincerely,

MR J.J CAMP Q.C AUG. 29/15
400 - 856 HOMER ST.
VANCOUVER B.C. V6B 2W5

DEAR MR. CAMP:

When I got my HEPATITIS C in 1989 The DR Put ME ON 325 COATED ASPRIN & I have been on A Blood Thinner PRADAXA since 2012 when I had A mini STROKE with No side AFECTS That KNOW OF. I have had A DOUBLE HERNIA, RADIATION FOR PROSTRATE CANCER, The Right LEG FROM my KNEE TO The TIP OF my TOES FOR APPROX. 3 YRS, I LOST A LOT OF blood when I had 2 TUMORS REMOVED & had TO WEAR A CATHETER FOR SO LONG, I do NOT HAVE ANY CONTROL OF MY bLADDER I WEAR A LEG bag And A NIGHT BAG EVERY day. I had TO WEAR PADS FOR A LONG TIME TILL INTERIOR HEALTH FINALLY FOUND A NEW CONDOM THAT I KAN ONLY WEAR FOR APPROX. 2 days & ALL These DIFFERENT SOLUTIONS THAT I have TO PUT ON & THEY ALL COST A LOT OF MONEY but it would be nice to get some HELP to pay for so much Pain That I have had to Put up with al These years + I just have small Pensions. my wife + I are both 85 years + she is not in very good health. my first wife past away in 2004 + my wife has a lot of medical problems as well. I had a family DR. for 20 yrs but he retired in the first part in July 2015 + the new DR that took over from him said in August of this year that he had been studying my charts + said he didn't know that I had Hepatitis C unit he read my file from when I was in Vancouver General I am also sending a copy so you can see what I went through, I was not to be writing this letter to-day. They were telling that I might not be walking so they were showing me how to walk up stairs with cruches

over

& How to get in the bath Tub, it took me a long time to get to were I am now but there is times that I have watch.

Yours
Truly

I just recieved this letter as it was sent to my old address

This is my NEW Address

[redacted]

From:
Sent: August-30-15 10:47 AM
To: J.J. Camp
Subject: 1986-1990 Hepatitis C Settlement

The Estate of
Thank you for giving me the opportunity to write to you.
In March 2001 our son passed away he did not see any moneys from this.
My wife and I took up the cause and in time there was A settlement ,Not all that much to our liking but A settlement so we could move on.
WE THINK THAT THE REMINDER OF THE MONEYS SHOULD BE DIVIDED EQUALLY TO EACH.

How does one measure the lose.His Sister lost A loving brother her two boys lost an uncle that could have helped in there education, The wife and I have lost A son and maybe some grandchildren and now maybe some help in our old age.

From:
Sent: August-30-15 12:33 PM
To: J.J. Camp
Cc:
Subject: 1986-1990 Hepatitis C Settlement Agreement

Attention J.J. Camp,

On behalf of my brother and myself we would like to provide our input regarding the above subject.

As you are aware, our brother, passed away from HIV and Hepatitis C tainted blood which he received from the Canadian Red Cross.

We feel that the suprplus which is estimated to be between $236 million to $256 million should be divided amongst all the families that were affected. We feel this should include all that have lost loved ones as well as those people that are still living with Hepatitis C.

Thank you for giving us the opportunity to voice our opinion.

From:
Sent: August-30-15 3:17 PM
To: J.J. Camp
Subject: subject letter to the trust fund hep. c

Re"j.j.Camp o.c.

As wife,daughters.andgrand clildern and members of theClass Members and Family Class Members I am writing you this submission and giving you the Joint Committee of the 1986-1990 Hepatitis C settlement Agveement my imput and taking in the consideration of the allorcation of the Surplus of monies in the trust fund.

Thepayout received by my Family,myself,the wife ,daughters and grandchildren,wasin my opinion not sufficient to meet the hardships endured white watching one ,husband,father, andgrandfather surcome to the liver Cancer which was contracted form the Hep C.

We realize that no amount of monies paid out wil bring our loved one back, but the pain we have will be with us forever.

The amount of $ 250.000 given to me at the loss of my husband of 54 years was in my opinion, nothing

The $250-oo paid out to the grandclildren who had a close relationship whis gentle,giving and loving man was ridiculus,And $600.00 for a daughters who cherished their father was and is shameful /

So in conclusion I would most certainly give the joint Committee my agreement in the disspursement of all the surphs of funds in the Trust Fund.

once again please take in consideration the hardships we all en dure to this day at the loss of our loved one

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From:
Sent: August-30-15 5:06 PM
To: J.J. Camp
Subject: Joint Committee Class Member Consultations

<u>To the attention of J.J. Camp, Q.C.</u>

Hep C Claim

I was unable to attend the Session in Edmonton last week.

I am a Disease Level 3 as far as the compensation relates.

Through no fault of my own I was infected with Hepatitis C. When the news was delivered to me 11 years after being infected, it was devastating. I strongly feel it was the cause of my marriage of 18 years to break down that same year. I was consumed with the disease and I was focusing on treatment. I had a wonderful marriage with 3 happy children prior to this news of disease. So, as far as "loss" experienced due to HCV, yes - I do feel that I lost my family. There has been no compensation for this suffering. I feel that this type of loss should be considered somewhere as an additional separate issue/level.

I believe the benefits from the surplus should be a lump sum payment and it ***should be divided out to infected class members*** based on disease level and/or other identified factors. I would be very hurt if this surplus went back to the government.

As far as life insurance goes, I have coverage through my place of employment currently. I'm not sure what they would decide if they found out about the Hep C if/when I died. Insurance companies seem to do what they want and always decide on what is best for them.

Thank you for your time and consideration of my views.
Sincerely,

From:
Sent: August-31-15 8:37 AM
To: J.J. Camp
Subject: 1986-1990 Hepatitis C Settlement Agreement

To Whom it May Concern:

I am writing in reference to letter I received dated 07Aug2015 pertaining to my late grandmother
As stated in the letter, "the trust fund is sufficient to meet the expected needs of Class Members and Family Class Members and there is a surplus".

No amount of money could ever replace the loss the entire family has endured. The effects of losing my grandma have been life changing. She and I were very close; I lived with her during the last few years of her life. Because of her death at an early age from Hepatitis C she contracted from a tainted blood transfusion, she was not able to be a part of many fundamental events in my life such as graduations, marriage, the birth of my children and many other events we celebrate as a family. Our family is very close and these events along with other family gatherings such as Christmas, Easter etc. are just not same. She was always an amazing person to have and be around; always happy with a giggle you would never forget – it always makes me laugh even today to think of it.

As previously stated, there is no amount of money that can ever replace the wonderful person she was or fill the void that now exits. However, I fully support and am if full agreement with the Joint Committee making an application to the Courts to request that all of the surplus be allocated in favor of the Class Members and Family Class Members.

Kind Regards,

August 31, 2015

0-31-15P02:22 RCVD

Mr. J.J. Camp, Q.C.
Partner
Camp Fiorante Matthews Mogerman
#400—856 Homer Street
Vancouver, BC V6B 2W5

Dear Mr. J.J. Camp, Q.C.:

I am writing on behalf of my husband, , further to the request for feedback from Class Members of the 1986-1990 Hepatitis C Settlement in regard to the Surplus. We are grateful for the opportunity to provide our perspective on where the Settlement fell short on compensation, how the structure of the Settlement made it difficult to collect compensation, and to offer our thoughts on how the Surplus could serve to bridge some of the gaps in the compensation that was awarded to children of deceased Class Members.

To provide some background on the family situation, my husband's father, ( ) , (who was deaf from birth) contracted Hepatitis C from a blood transfusion he received in 1986. At the time, was married to my husband's mother (his first wife), , and they had three children: , , and . He was a skilled machinist by trade (gainfully employed by) and provided a significant portion of the family income. There was a breakdown of the marriage, and they separated in May of 1987, maintaining joint custody of the children including child support payments. Their divorce was finalized in May 1994, and married his second wife— . second wife is substantially older than he was (in her mid-fifties when they married), is also deaf, and had adult children from a previous relationship, as well as two grandchildren at the time of their marriage. They were married for approximately five years at the time that passed away on , 1999. Following death, brother, , fell into a state of depression, which led to his suicide at the age of 19 on , 2001. Tragically, sister, , passed away on , 2004, at the age of 19, from complications due to pneumonia. Contact between second wife and his children was limited following his death, however, his second wife got in touch with in the fall of 2002 to discuss the 1986-1990 Hepatitis C Settlement. I was present at this meeting, it was the one and only time I have met stepmother. The three of us went to dinner, and and his stepmother used American Sign Language to discuss some documents that she needed him to sign. She advised that she was the "Personal Representative" for his father, and that he and his siblings would receive compensation through the Settlement. She had verify his sibling's information, and sign some documents pertaining to the payments. At the time, she presented herself as having the best interest of the children at heart, and we felt grateful that she was being considerate of children. She advised that the children's claims were effectively branches off of her claim, and that their claims would be reviewed every three years and further compensation may be awarded during those reviews.

The first—and only—payment (and) received came in the Spring of 2004. It was approximately $18,000, the fixed payment for "Loss of Guidance, Care and Companionship". At the three year mark, I encouraged to follow up regarding the reassessment of the claim that his stepmother had described to him. We soon discovered that the way in which the compensation was being administered was rather complex, and since then, we have spent many years attempting to determine how to collect the compensation that was owed to and his siblings. children did not receive any compensation for loss of support, nor any monies that were paid to Estate. Sadly, given the time of his death, likely did not benefit from any of the compensation, either.

Needless to say, in the 16 years following death, there have been many milestones that he would have contributed to in his children's lives— through moral, emotional and financial support. While the Settlement was intended to assist children of deceased Class members, it unfortunately, has left more unanswered questions and a sense of exclusion for . All attempts he has made to contact the Administrator have been met with skepticism and a complete lack of compassion. Given the devastating emotional toll the loss of his father, brother, and sister has had on his life, negotiating with the Settlement Administrator is a task that has found to be too emotionally burdensome. I have advocated on his—and his siblings'—behalf to the best of my ability during our relationship, and would like to achieve a sense of acknowledgement and closure with regard to the compensation so that we may have a sense of peace and legacy for .

Further to the Consultation session held on August 12, 2015, I respectfully submit for your consideration our responses to the questions posed to the Class Members present.

1) **Does the payment to any particular family member seem out of line? If so, how or why?**

Answer: Yes, the majority of payments to compensate deceased class members were paid directly and indirectly to their spouse. The way the plan is structured to have funds (and information exchange) flow through the "Personal Representative" (in case, his stepmother), and the Estate for other fixed payment amounts set up a loop-hole that enabled spouses from a blended family to misappropriate compensation that was intended to go to the children and family members of deceased class members.

2) **Does the payment to any particular family member seem out of line with the payment to any other family member? If so, how or why?**

Answer: Yes, the payments (when considering the various payment categories) to spouses of deceased class members were quite generous by comparison to the payments made to children of deceased class members. The payment amounts did not reflect the individual circumstances of deceased Class members such as the length of their marriage to their respective widows. While a traditional family model would allow for some of the additional compensation awarded to spouses to benefit the family unit and marital children through familial exchange, the compensation awarded to blended families (such as) was left to the discretion of the deceased Class member's spouse.

3) **Does the payment under any particular payment category seem out of line with the loss or expense it is intended to compensate?**

Answer: Yes. The only payment that can be assumed to have compensated the children of deceased class members is the fixed payment for "Loss of Guidance, Care and Companionship" ($15,000 in 1999 dollars). This payment is on the lower end of what the average is ($35,000 McVea v. T.B. et al., 2002 BCSC 1407). When considering this payment is intended to compensate such a variety of life events from the tangible costs (post-secondary education, help with mortgage down payments, weddings, grandchildren, unexpected expenses, loss of inheritance, etc.), to intangible (loss of guidance, teachable moments, moral support, etc.) it is extremely low.

4) If you could change one thing about the Plans or the payments you receive under them, what would you change?

Answer: The way that the fund is structured should be changed to accommodate a broader spectrum of personal circumstances for Class Members (ie-blended families). There should be some accountability for the manner in which the funds were dispersed (such as audits on the compensation to deceased class members and how it was allocated amongst family members), and any amounts that are determined to be for specific family members, should be paid directly to them.

There should be someone advocating for the children of deceased class members, and providing more clarity and transparency in the claims process for children of deceased class members. The "Personal Representative" aspect of the structure established enough confusion as to how the funds were being managed which caused the children to believe they were being represented. Direct contact initiated from the Administrator to the children (regardless of if the children have reached the age of majority)—or the appointment of a case manager—when adolescent children are identified, would help avoid confusion and misinterpretation of the Settlement through receiving third party information from the "Personal Representative" (who in my husband's situation is deaf, and not his parent—there can be significant misunderstanding when American Sign Language is being used to communicate between a deaf and hearing person).

5) If the courts decide to enhance benefits to the Class from the surplus, should it be lump sum payments, or an increase in the ongoing recurring payments you receive?

Answer: Payments to family members should be lump sum to ease the burden of administration, and payments to living class members could be paid as enhancements to their compensation to best utilize the surplus (ie-interest earned on investing that portion).

6) If there is a lump sum, should the same amount be set for each infected class member or should disease level, loss of employment and/or other identified factors be considered in setting the amount?

Answer: Various factors should be considered when deciding on the amount for lump sum payments; disease level should hold significant weight in the decision. Deceased class members had a significantly lower chance of surviving their HCV related illnesses, while living class members now have markedly improved survival odds, in some instances as high as 80-95%, including access to much more advanced treatments and drug therapies than were available in the mid-1990's. Payments to deceased class members and their families were set at a time when the sufficiency of the fund may have been in question due to future uncertainties. However, as life expectancy for surviving Class members has increased, and better treatments have become available, the outcome for living Class members is dramatically more positive than it was when deceased members passed away. Furthermore, there are provisions in the Settlement for living class members should their disease progress, enabling them to collect further compensation. There is also the potential for further medical advancements, and additional surpluses in the Settlement in the event that investments continue to exceed liabilities, that could benefit living class members.

Attending the Consultation session on August 12, 2015 and writing this letter has renewed our hope that there may be a resolution to the compensation issues where children of deceased Class members are concerned. While this process has reopened a very emotionally painful chapter in our family history, we hope that the information I have provided will help decide how the Surplus is allocated, and ensure that Settlement protocols are reviewed and amended to protect the interest of children of deceased Class members.

Please feel free to contact me by phone or email should you have any questions or feedback relating to this letter. I can be reached at (604) , or by email:

Respectfully,

Firstly, thank you for giving us the opportunity to share our thoughts and opinions during this forum. I will never forget the day I found out (by accident) that our Mom had Hep C. Mom & Dad didn't want us to know - they didn't want us to worry. We spent the next 30 some odd years worrying. Not an everyday worry...just one of those worries that jumps out of no where every once in awhile. I'm sure Mom worried everyday. I'm sure she carried the anger and frustration of 'why me' with her everyday. Now I carry that anger and frustration. I don't have my Mom anymore. My kids don't have their Baba. Her death has left a hole our hearts. I am a realist - death is part of life - I get that. And I understand that we don't always have control over how we die, or when. We should, however has some control of how we live our lives while we are healthy. Our Mom was robbed of that control when she contracted Hep C through no fault of her own. Can you put a price tag on her life's worth? Someone apparently has. In my mind, it will never be enough.

We were not aware of the depth of the Hep C Settlement Agreement. Mom didn't share - and I'm not even sure she understood how far the settlement extended after her passing. Learning all of this, and trying to cope with our loss has been bittersweet to say the least. Receiving the letter regarding the surplus was another surprise I wasn't prepared for. My one question was, and is...what are you holding on to the surplus for? Certainly patients affected by the Hep C are aging and dying. Family members of those infected are aging and dying. If the Trust fund is sufficient to meet expected needs in the future, then distribute the surplus, and allow some closure to take place for those of us left behind. I certainly don't want to revisit this every 3 years. Thank you

daughter

To the Joint Committee,

I still hesitate before I say aloud or type the words "Hepatitis C". When I was 19, my face would flood with blood any time I heard the word Hepatitis, and it took a counselor to bring me to physically say the words "Hepatitis C" out loud. It is painful for me to talk about something that I've habitually kept a secret from my close friends and extended family members since I was young due to the negative stigma associated with the virus and also my fear of it. Yet I feel my experience living with Hepatitis C (Hep C) is unique and worth sharing. I also suspect that other class members struggle to speak about this topic and hope my experience might speak for some of them as well.

In order to address which areas of the settlement that I feel fall short, I feel I must first address how the contraction of Hep C has impacted me personally, as it is my belief that it is the impersonal nature of the compensation fund distribution and aid offered to class members that fails to fully meet the specific needs of each class member, especially in unique cases.

I would like to discuss this problem through my own experience, unique in the sense that I have suffered immensely, not as much from symptoms of the virus itself, but from treatments for Hep C, coping with my fear associated with having Hep C, and ongoing conditions that by medical standards are considered to be indirectly related to the virus. As a result, I have not qualified for additional compensation, other than to cover medical costs deemed appropriate. In my opinion, due to the lack of acknowledgement for the complex and unexpected health implications related not only to contracting Hep C, but living with and treating Hep C, I am perhaps one of many to have slipped through the cracks of this government aid system.

I first discovered that I had Hep C when I was 7 years old. I learned that I contracted Hep C through a blood transfusion at birth and have had Hepatitis my entire life. I can remember crying as I ran home from school one day in grade 5, because a Hepatitis vaccination nurse showed the class an educational video that used a cartoon monster to represent Hep B, and an uglier monster to represent Hep C. That monster depiction was how I understood the virus that I had as a 10-year-old, and the thought manifested as a great burden of fear in me. My anxiety over the matter persisted throughout my youth.

During my second year of university, I underwent the only available medical treatment at the time: 10 months on Interferon and Ribavirin. The physical symptoms of this treatment are known to be horrific, but for me, it was the psychological side effects that were particularly devastating. This treatment had a profound impact on my self-confidence, social engagement, and an already deep-seated anxiety. I reflect upon this period of my life as one of great loss. When contemplating the decision to undergo treatment, I thought about the side effects of the drug, the timeline, and I measured out the pros and cons. I took some time to imagine what it might be like to have the treatment and how relieved I'd feel to rid my body of that cartoon monster that I still felt possessed by, silenced by.

In practice, the experience of the treatment is far more brutal than what I had imagined. Before agreeing to the Hep C treatment, I didn't account for the isolation I would feel, or for the friendships that would fall apart when I wasn't myself, or for the lasting mental distress that wouldn't go away, even after my hair grew back and the treatment was completed. I didn't realize that I would be trading that Hep C monster for a series of new ones. I didn't account for these things because they aren't detailed on the treatment's list of side effects.

It has been 4 years since I've completed the treatment and my mental health has continued to suffer. I have been diagnosed with severe anxiety disorder, panic attacks, depression, and generalized anxiety disorder. I have suffered persistent long-term physical side effects from anxiety, including burning skin sensation, numbness in my hands, feet, and lips, chest tightness, fatigue, insomnia, muscle tightness, and pelvic floor dysfunction. Above all, my pelvic floor dysfunction has been the most challenging physical manifestation of anxiety. It took several years, five urologists, two emergency visits, and countless hours of diagnostic testing and surgical procedures to diagnose. It causes debilitating pelvic pain, severe urinary frequency, urinary urgency, sexual dysfunction, and has served as a barrier to my employment, romantic relationships, as well as to carrying out my daily life.

As you can see, the way in which Hepatitis C has affected me has been complex. It has been an ongoing domino effect of health problems. In the last year especially, I've spent the majority of my time either in bed or seeking medical attention. I've struggled to hold down a full time job, provide for myself as an adult, and I continue to do so. I have not been compensated for these disabilities since they are not covered by "the 1986/1990 Hepatitis C Class Act", and consequently our government wrings their hands of responsibility.

On top of all that, because I underwent the Hep C treatment before completing university, and have suffered from impaired health ever since, I have never been employed long enough to qualify for disability leave through an employer, employment insurance, or any other social aid program other than the "1986/1990 Hep C Class Act". Indeed, these funds have played a vital role in my survival, allowing me to provide for myself in times of unemployment. However, I have been living on my own for 7 years, and in that time have spent the majority of my compensation money. It is only a matter of time before those funds evaporate entirely, and I'm left with nothing but my disabilities and no safety net.

Given all of the above, it is of my opinion that the surplus of funds goes towards the following:

1. Research that seeks to understand the entire impact of Hepatitis on one's life (beyond the medically listed symptoms) with a focus on the indirect physical and medical consequences of having Hepatitis C, and the entire impact of all Hepatitis treatments on Class Members' lives.

2. Providing a social aid program that seeks social and financial support for class members who require additional aid due unforeseen consequences arising from contracting Hepatitis C, especially in cases where class members do not qualify for additional compensation under the 1986/1990 Class Act.

3. To the class members themselves, as it is my belief that the amount of compensation distributed does not account for the entire impact of Hepatitis on one's life, including indirect symptoms and the mental distress associated with having Hepatitis C.

Thank you very much. I hope you take my letter into careful consideration.

August 31, 2015

To:
J.J. Camp Q.C.
Camp Fiorante Matthews Mogerman
400-856 Homer Street
Vancouver, B.C.
V6B 2W5

To whom it may concern,

I am replying to the Joint Committee letter I received in July of 2015. I am very interested in pursuing this action. I was unable to attend any scheduled meetings as I am a pensioner and was not able to travel to those sites.

Please consider this note a confirmation of my interest in this matter. Although it has been many years since my father's passing, my family and I are still feeling the effects of this loss.

Yours sincerely,

From:
Sent: September-04-15 5:32 PM
To: J.J. Camp
Subject: Hep C Joint Committee 1986 1990

Dear Members of the Joint Committee concerning the1986-1990 Hepatitis C Settlement

In 1990, my father, was diagnosed with non A, non B, hepatitis after he received a blood transfusion in a Halifax hospital. After seven years of declining health and finally his death in 1996 at age 97, his family was told that he actually had contracted hepatitis C, not A, not B as had been previously told his family. Prior to his receiving the transfusion, he was an active 90 year old, walking 3 km daily and being a major contributor to the well being of the home he shared with his wife, our mother. From 1990 until 1996, his health declined significantly, he experienced extreme itching all over his body, he scratched uncontrollably, bled constantly, and was unable to sleep at night. Despite the numerous creams prescribed to alleviate the symptoms, there was really no relief. During this time, he did not know what his illness was, and we his family were not told that he had Hep C and it was only upon his death that we learned the diagnosis.

Our father's illness put an immense strain on our family, particularly on our mother who spent numerous sleepless nights trying to help. In the last few years before he died, the relationship that they had shared for 50 plus years had become filled with anxiety. Our mother who was in her late eighties and virtually on her own, and not sleeping herself because our father could not sleep, became a nervous wreck. Supporting our father, creaming his body, washing his everyday soiled clothing and running their household by herself became an impossible undertaking. All of us, five working adult children lived in Halifax and took turns making weekend trips to Cape Breton to help.

In desperation, both Dad and Mom came to Halifax where our mother stayed with our brother and our father came with me, my husband and two university aged children. We gave up our bedroom so that he could have our bed, close to the ensuite. Every night, my husband, our teenage son and I helped him into the bathtub, creamed his body, got him ready for bed, and helped him through the night when he needed help. My husband and I were both working, our children were studying at university. Enormous strain was put on them as well as my husband and me, but loving their grandfather with the same intensity that we loved our father, they were glad they were able to help.

So in light of the questions asked by the Joint Committee, I would suggest that the payment that our mother received, having been given a financial benefit for 2.09 years which was based on the actuarial date of Dad's expectancy, was insufficient. She could have used compensation for the loss of support she had for the years Dad was sick and for the 10 years she lived after Dad died. Dad's death at 97 years after so much suffering was a reflection of his strength and commitment to living, always positive and hoping that he would get better. As a testament to his family's longevity there is a monument in Cape Breton to his great grandfather who died at 114 years. Dad's three sisters each reached 102 years so it would not have been inconceivable that Dad would have lived past 100 years if he had not received tainted blood.

In addition, I suggest that the $5000. each of us children received did not ever compensate either symbolically or realistically for Dad's illness and the $500. granted to his grandchildren was insufficient for the loss of their grandfather, and the loss of history that went with him.

Thank you for reading this letter and for pursuing just settlements for all.

September 4, 2015

J.J. Camp Q.C.

Camp Fiorante Matthews Mogerman

400-856bHomer Street

Vancouver, B.C.

V6B 2W5

Attention: Joint Committee Members- (1986-1990 Hepatitis C Settlement Agreement)

To whom it may Concern:

In my opinion, the surplus in the Trust Fund should be divided amongst the surviving Class members and Class family members. If the Trust Fund has been deemed sufficient to meet the expected needs of the Class members then the excess should be dispersed amongst those that it was intended for rather than sit in a fund not being used.

Sincerely yours,

Sept. 4, 2015

HEPATITIS C 1986-1990 JOINT COMMITTEE

Attn:
J. J. Camp, Q. C.
Camp Fiorante Matthews Morgerman
400-856 Homer Street
Vancouver, British Columbia V6B 2W5

Dear Sir / Madam:

Thank you for your recent correspondence inviting submissions to the Joint Committee, and enclosed detailing of Consultation Sessions and the Phase 2 Sufficiency Schedule. I did participate in the August 12, 2015 Live Webcast.

I very much regret my current state of health prevents my investing the time and energy necessary to research and present a detailed submission with respect to possible use(s) of the anticipated surplus remaining subsequent to the Joint Committee's administration of claims via the Trust Fund for the 1986-1990 Hepatitis C Settlement Agreement.

I do propose, however, that preferably **all,** or at least **the large majority** of said surplus be allocated to Class Members and Family Class Members:

(a) in **amounts proportionate** to their original qualifying levels of compensation, 1 through 6 inclusive;

or failing this;

(b) in **equal amounts** to each member, the original level of compensation notwithstanding.

RATIONAL:

1. In my considered opinion, each and every original level of compensation was / is totally inadequate, bearing in mind the extraordinary physical, mental and emotional shock, anxiety, frustration, distress and suffering experienced to greater or lessor degree by each original compensation recipient as he / she/ they struggled:

- with serious feelings of fear, anger, resentment, guilt, inadequacy, isolation, depression, etc., all of these and more often precipitating crises in personal health and personal relationships;

- to locate, research and present required documentation under historic, distance and other conditions rendering this nigh impossible;

- to schedule and undertake innumerable required medical appointments, interviews, tests, teaching sessions, etc., most of these requiring serious travel and other inconveniences;

- to complete necessary / obligatory treatment (often enduring significant pain) and frequently, involving out-of-town travel and accommodation plus large dollar outlay from meger budgets for these, for drugs, and much more, often far in advance of any possible subsequent reimbursement;

- to jeopardize / sacrifice career, promotion, often employment itself, thereby aggravating financial circumstances already challenged by the above;

- to experience the chaos and, frequently, the mutilation and disintegration of friendships and family relationships wrought by this disease; and

- to grieve the premature death(s) of friends and / or family members as a consequence of their being infected with hepatitis C.

2. Consistent with the integrity of the original legislation / regulations for determining and administering compensation settlements to members and family members, in my opinion the distribution of any surplus monies now also should be proportionate to those same six original qualifying levels of compensation.

May I express my appreciation to the Joint Committee for the time and consideration given my brief comments.

Yours sincerely,

1986-1990 Hepatitis C Settlement Claim Number

Tel:

September 5, 2015

J.J. Camp Q. C.
Camp Fiorante Matthews Mogerman
400 – 856 Homer Street
Vancouver, British Columbia V6B 2W5

Dear Sir,

Re: Written Submission to Joint Committee re: Hepatitis C Settlement surplus funds

We write in reply to the notice we have received regarding the surplus in the Trust Fund created to meet the needs of Class Members and Family Class Members of the 1986 – 1990 Hepatitis C Settlement Agreement, requesting our input on how we think the surplus should be used.

We believe that the surplus should be shared equally by all of the original members of the Trust Fund. We feel that the funds should go to those who lost their fathers, mothers, husbands & wives, and children, no matter what their age is at today's date. As we understand it, the rules of the distribution of the monies in the Trust Fund state that at a certain age, some of us are no longer entitled to receive monies from the fund. We feel that even if a child of a Hep-C victim is over 25 years of age, they should still share equally in this surplus. The same should apply to spouses who are over 65.

All of the initial recipients of the compensation should be included in the distribution of these surplus funds, and that distribution should be made in equal shares to all of us.

We thank you for the opportunity to contribute to this decision and trust that we are not too late in getting this letter to you. We look forward to hearing from you, and ask that you contact us at *if you have any questions or require anything further.*

Sincerely,

From:
Sent: September-05-15 6:53 AM
To: J.J. Camp; info@savonitto.com; hepc@strosbergco.com
Subject: Hepatitis C Settlement Agreement

I would like to thank you for the opportunity to provide input into the matter of the surplus from the Hepatitis C Settlement Agreement funds.

I am the daughter of , who died of Hepatitis C complications in 1999, after having received an infected unit of blood during surgery several years earlier. I helped nurse him until the time of his death and saw how much he suffered as the result of this infection. He had stated sadly to my Mom, upon hearing about the possibility of a settlement payment, that he would never see that money, but that he hoped she would get enough to help her for the remainder of her life. My Mom is now 87 years old and has lived without her husband for 15 years. She did, after a very painful and difficult application process, receive funds from the Settlement agreement, which continued for several years. She had expected it for a longer time, but was told there had been an administrative error, and the funds stopped. I do not understand why the funds did not carry on until her death, as she is still without her husband.

I also believe that the $5,000 paid to the children of the Hepatitis C patients was not really an adequate amount. My brothers and I lost the love and guidance of our Father, my children lost their beloved Grandpa. This loss has left a great hole in all of our lives. I know that no amount can bring him back, or adequately compensate for his loss, but at the time, it almost seemed that the amount given was an insult, rather than a gesture of compensation.

I am sure there are many others who feel the way I do. Although much of the anger I have felt because of the senselessness of my Father's illness has passed, the loss and the grief are still present.

I am thankful that much advancement has been made in the cure for Hepatitis C, and only wish it had come in time for my Father. If more work is needed in this direction, it would seem right that some of the funds could be used to search for further treatments and cures. However, as the money was set aside for victims and families of Hepatitis C infection, I believe that, at least, more of it should be given to those it was intended for.

Again, thank you for requesting and considering my input. If you have any questions, please feel free to contact me at this email address ________________, or by phone at . I have moved, so my current street address is

Sincerely,

From:
Sent: September-06-15 12:59 PM
To: J.J. Camp
Subject: Hepatitis C Settlement

We received your letter regarding the surplus dollars you have. We think that it should be divided amongst those that this affected.
We have moved and our new address is:

This address applies to

who passed away , 2014\

Thank you

September 7, 2015
J.J. Camp Q. C.
Camp Fiorante Matthews Mogerman
400 – 856 Homer Street
Vancouver , British Columbia
V6B 2W5
Telephone: 604-331-9520 Fax: 604-689-7554
Email: jjcamp@cfmlawyers.ca

Dear Mr. Camp Q.C.

I am writing in response to the request for disbursement of funds. Before I present my suggestions, it would be helpful for me to give a brief overview/timeline of my experiences to provide some context for my suggestions.

- Discovered that I might be infected with tainted blood while watching the news in 1995. Knowing I had received a blood transfusion during the time periods stated in the news prompted me to get tested.
- Confirmed by my doctor that I was positive for Hepatitits (Hep) C and was at Level 3 infection. Despite knowing this is due to blood transfusion, feel shame, anger, disbelief and sadness that this has happened to me.
- Inform my family, take precautions for infection control reasons. At the time, I was also working in a foodservice capacity, became very stressed about potential health risks I might be to the public at work.
- Attend multiple doctor and medical appointments.
- Very soon after my diagnosis, I lost my job – which was an additional stressful life event.
- With the diagnosis and job loss, became depressed.
- Begin treatment for depression, under the medical care of a psychiatrist.
- Start interferon treatment (January 2005) with multiple adverse effects that included hair loss, nausea, vomiting, overall malaise and inability to perform to the best of my functional ability. Advised by liver specialist Dr. Robert Bailey to stop treatment after 3 months of interferon due to debilitating side effects.
- Inform all health care providers meanwhile (doctor, dentist, dental assistants, any technician doing lab work etc) during medical appointments. Encountering a new medical professional would require me to explain my diagnosis and current condition. It is a very stigmatizing experience relating this to health care professionals. For example, I was looking for a new General Practitioner (GP) after mine had retired. When I went to meet with the GP who was taking new patients, he declined taking me as a patient. He stated, "I don't take people with Hep C or too many medical problems."
- Need to inform non-health professionals of my status making me feel defensive and vulnerable as I would wonder if they would keep this information confidential. One example is enquiring about health insurance when travelling, i.e. speaking with a MasterCard representative on the telephone when I was calling to ask about travel insurance rates through MasterCard. The representative asked me specifically if I was Hepatitis C positive.
- I am declined health insurance when travelling due to my Hep C status.

- Chose to undergo a new treatment as recommended by Dr. Robert Bailey which commenced the week of September 1st, 2015. I am feeling side effects of muscle soreness, headaches and fatigue. I am grateful for another opportunity to treat this ongoing condition, but it is still unclear whether this will cure me of Hep C.

I have been reflecting on what to suggest for disbursement. I find this very challenging as it is putting a price tag on physical and mental health. Meanwhile, I continue to deal with this condition.

After much thought, I have come up with a suggestion of $200 000 as a lump sum for me. While this affected me directly, I'd be remiss if I didn't acknowledge the impact this has had on my immediate family. Honestly, I cannot assign a dollar amount to the mental anguish, stress and stigma I have experienced as a result of this. The suggested dollar amount is one I have arrived at with a clear conscience and I believe to be fair.

Please do not hesitate contact me, if further clarification on any of the above details is required.

Sincerely,

Signed to follow via letter mail

09-17-15P12:35 RCVD

September 7, 2015

J.J. Camp Q.C.
Camp Fiorante Matthews Mogerman
400 - 856 Homer Street
Vancouver, BC
V6B 2W5

Dear Sir/Madam:

RE: 1986-1990 Hepatitis C Settlement Agreement

I was infected by a blood transfusion where I contracted the Hepatitis C Virus in 1989 through no fault of my own, and the amount of anguish that I have endured to November 2004 when I completed the HCV Drug Therapy Treatment was almost intolerable. This treatment was so severe that numerous individuals could continue on with it. I took the Pegasys treatment (Peg-interferon injections once per week and ribavirin medication daily) for one year from December 15, 2003 to November 2004 and suffered through considerable anxiety and discomfort from the side effects of the treatment. The initial symptoms were anxiety, irritability, it felt like my skin was crawling from the inside out and I just wanted to climb the walls, nausea, for a whole year I had flu like symptoms, severe shaking of my entire body, very volatile and aggressive behaviour and sleeplessness. My thyroid function became altered permanently and I have to take synthroid medication for the rest of my life. I am unable to obtain life insurance coverage because of the Hepatitis C. There was no normalcy to my life. My health was severely impacted and my family function jeopardized due to my condition.

I would like to express that NO amount of compensation will replace the years I lost being extremely ill. These years are re-hashed and are terrible memories in my life which I would like left in the past, but that is not possible because I am required to submit documentation every three years to a review of the financial sufficiency of the Trust Fund.

. /Page 2......

I feel the surplus of funds in the Trust Fund should be dispersed equally to Class Members and Family Class Members to cover any type of expenses pertaining to their medical condition in accordance with their level of sickness, in any way possible to improve their quality of life after being severely affected by this dreadful disease Hepatitis C.

Sincerely yours,

Claimant #
(E-mail:

Sept 8, 2015

J. J. Camp Q. C.
Camp Fiorante Matthews Mogerman
400 - 856 Homer Street
Vancouver B.C. V6B 2W5

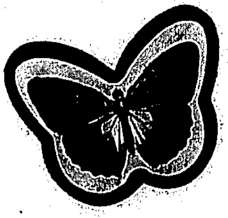
To whom it may Concern:

I am a member of the Family Class and received notice that the Joint Committee is seeking input from class members as to the surplus.

I am pleased that this fund was managed conservatively, resulting in a surplus. Since this fund was created expressly for class members and family class members, I believe the surplus should be allocated to these same members, as was intended.

Thank you for seeking my input.

Sincerely yours



From:
Sent: September-09-15 7:28 AM
To: J.J. Camp
Subject: The Joint Committee Wants To Hear From You

J.J. Camp, Q.C.
Camp, Fiortane, Matthews, Mogerman

From:

I am part of the 1 86 - 1990 Hepatitis Settlement Agreement - Claim Number , I received two cheques # in 20/02/2001 for Level 3 for $57,283.21 and # in 18/19/2002 for Level 2 Holdback Release for $5,779.56. Total amount = $ 63,062.77

Thank you for the recent letter and unfortunately, I recently sold my home and did not receive the information about the August 12th, 2015 session in Vancouver. I do appreciate the information and found it surprising that there is still a Surplus of $236 to $256 million dollars still sitting in the fund.

As for what to do with the Surplus, I feel that some of the money should be sent to the Class Members of Family Class Members that went through the Tainted Blood they were subjected to by the Health System of the day. Personally, when I was notified about the chance that I might be affected, I went to Mount Saint Joseph Hospital for the tests and found that I had Hep C. My wife, daughter and son all went for the tests too. Luckily, they were okay. I know that filling out the applications was a very stressful situation. Contact phone numbers and the people that were involved in running the applications were difficult to deal with. My Heart Surgeon, Dr. Lawrence Burr @ VGH was extremely helpful in getting me all the required information and I made it through the process.

I feel the 1986 1990 Hep C Class Members and Family Class Members should receive a share of the Surplus. I'm not being greedy but can't help but feel that we were not paid enough i a Surplus like this is still sitting.

Sincerely,

Cell:

Attn: Members of the Joint Committee

RE: 1986-1990 Hepatitis C Settlement

In 1990, my grandfather, was diagnosed with non A, non B, hepatitis after he received a blood transfusion in a Halifax hospital. After seven years of declining health and finally his death in 1996 at age 97, his family was told that he actually had contracted hepatitis C, not A, not B as had been previously told his family. Prior to his receiving the transfusion, he was an active 90 year old, walking 3 km daily and being a major contributor to the well being of the home he shared with his wife, my grandmother. From 1990 until 1996, his health declined significantly and he physically suffered extreme itching, bleeding, and insomnia. Despite the numerous creams prescribed to alleviate the symptoms, there was really no relief. During this time, he did not know what his illness was, and we were not told that he had Hep C and it was only upon his death that we learned the diagnosis.

Our grandfather's illness put an immense strain on my grandmother and my parents and my aunts and uncles. Our grandmother, in her late eighties at the time, made much effort to help our grandfather with creaming his body, washing his clothes and running their household on their own with no outside support. It was impossible. My mother and my aunts and one uncle, all working full time, took turns making weekend trips to Cape Breton to help her.

I remember most when it was decided that my grandfather would come to live in my childhood home with my parents while my grandmother lived with my uncle in Halifax. I remember vividly the work my parents did to ensure that my grandfather was as comfortable as possible. My mother, in particular, and my brother spent time assisting my grandfather with regular routine habits; bathing, feeding, creaming his body, and helping him through the night when needed. I remember that this put a lot of strain on my family, even though we all loved our grandfather.

Looking back, I feel angry and saddened because my grandfather was so healthy prior to this diagnosis and I am so sure that he would have lived longer had it not been for this mistake that was made. Further he was not ready to die – he kept saying "I am getting better" and had had no intention of dying as he was very active in his community in Cape Breton – walking the beach, playing the fiddle, participating in church parish community activities, and knowing the long history of his life and family.

In light of this and the questions asked by the Joint Committee, I do not feel that my grandmother, my mother, my aunts and uncle, and all of the grandchildren were sufficiently compensated. Thank you for reading this letter and for pursuing just settlements for all.

Yours truly,

September 12, 2015

J.J. Camp Q.C.
Camp Fiorante Matthews Mogerman
400 – 856 Homer Street
Vancouver, British Columbia V6B 2W5
Telephone: 604-331-9520
Fax: 604-689-7554
E-mail: jjcamp.@cfmlawyers.ca

Dear Sir/ Madam:

On September 9, 2004, my father, , passed away due to receiving Hepatitis C tainted blood to treat injuries from a motor vehicle accident.

Knowing there is surplus of funds intended to meet the needs of class members and family members affected, it would be my wish to divide this surplus equally among survivors.

My children's only financial legacy from my father's estate is the $500 kept in trust for them. Ideally, I would wish my dad could regale his grandchildren with stories of Austria, growing up during World War II, his success on the national rowing team, and singing with the Vienna boy's choir.

My family and I would appreciate any extra funds to be put towards university, technical school, and/or housing. My dad would have been proud to contribute to their financial wellness if not their knowledge of our family's history.

Sincerely,

We as the grandchildren of agree with the wishes expressed in this letter:

X

X

X

Please be advised of our address change:

September 16, 2015

J.J. Camp Q.C.
Camp, Fiorante, Mathiews, Mogerman
400-856 Homer Street
Vancouver, B.C.
V6B 2W5

Dear Sir/Madam:

Re: Joint Committee for the Hepatitis C Settlement

I received your letter of August 4, 2015 asking for my opinion on what should be done with the surplus money remaining after the initial compensation to the Hep.C victims of the tainted blood.

In November 1988 I broke my neck in a single motor vehicle accident. In surgery to stabalize my C5-C6 injury, I recieved a blood transfusion of the tainted blood 10 years later my doctor received a letter informing him that I might have recieved Hep.C from that blood transfussion. I was tested positive which explained why I had so many health issues over and above most quadrapegics.

I eventually received $10,000.00 plus interest for compensation. I can't have a lot of medications becase they will damage my liver. Dentist don't want to treat someone with Hep.C, my wife stays home to look after me as I get weaker + sicker over the years.

I recieve $1,100.00 CPP disability and $738.00 a month disability from my work insurance. I'm not eligible for AISH so I can't afford or have dental or eye glasses. And now to top it off I have leukemia.

Not everyone infected received the same amount of compensation, some that I've talked to received a lot more. The money in the Hep.-C fund was meant for compensation for those of us who were infected with the tainted blood. It will never give us back what health we've lost and continue to lose, but it will make life remaining a little easier. Give it to us.

your truly,

September 18, 2015

J. J. Camp Q. C.
Camp Fiorante Matthews Mogerman
400 - 856 Homer Street
Vancouver, BC V6B 2W5

Re: Hepatitis C 86-90 Settlement Agreement - Trust Fund Surplus

I am writing to you to provide my personal submission to the courts for allocation of the surplus in the 1986-90 Hepatitis C Settlement Trust Fund per the most recent financial sufficiency review.

I received a fairly routine blood transfusion in 1986, which was tainted with the Hepatitis C virus while I was on hemodialysis due to kidney failure. My dialysis journey started at the age of one when I was diagnosed with Chronic Reflux. With many operations in between, too numerous to mention, I was put on dialysis at the age of 23 and this continued for a period of five years until I received my first kidney transplant.

During that time, I was extremely ill and was not prepared for another diagnosis such as testing positive for the Hepatitis C virus. This news, in a large capacity, contributed to my declining health and took an even larger toll on my mental well-being. I became depressed to the point that I could not think of anything except dying to relieve my state of mind.

Luckily, I received a kidney transplant in 1991 but with the warning that this particular kidney was not a "good match". It lasted four and a half years.

I was put back on dialysis for another 2 years when I then received a second transplant in 1997 which again, lasted only four and a half years. Again, I was put on dialysis for another one and a half years.

My third and current kidney transplant has been successful since 2003 and I am truly grateful for every day it is working but have always had to live under the "black cloud" of the underlying Hepatitis C virus. This takes an enormous mental toll when you are being tested each year to check for levels in the liver as you can only hope that you don't develop cancer or one of the other sure and inevitable effects of having this virus, not to mention the constant worry of possibly infecting your spouse through "marital relations".

Although no amount of money or benefit can erase the years of mental stress this has caused, in my opinion, YES, claimants should be able to receive enhanced benefits at each and every level of this long and taxing process. I would hope that the courts could see their way clear to disbursing the excess funds to those of us who have lived with this disease, myself personally, for nearly thirty years. At best, we could then alleviate at least one portion of our accumulated stress due to financial burdens.

Yours truly,

Claim #

J.J. Camp, Q.C.
Camp Fiorante Matthews Mogerman
400 – 856 Homer Street
Vancouver, BC V6B 2W5
Telephone: 604-331-9520
Fax: 604-689-7554
Email: jjcamp@cfmlawyers.ca

RE: 1986-1990 Hepatitis C Settlement – Disposition of Surplus

Reference: Written correspondence from 1986-1990 Hepatitis C Settlement Joint Committee post marked August 4, 2015

Attention: Joint Committee Member

As I understand it, the Joint Committee and the federal government have identified a surplus in the 1986-1990 Hepatitis C Settlement Trust Fund estimated at between $236 and $256 million. It is also my understanding that the Joint Committee, of which you are a sitting member, have applied to the courts to have all or part of the surplus allocated in favor of the Class Members and Family Class Members.

The letter requests that I, as a Class Member, provide input regarding the disposition of this surplus.

I believe that the intention and spirit of the original settlement and associated trust fund was and is intended to both compensate and support the affected class members over the course of their lifetimes and subsequently to their dependants after their death. At the time of the original settlement, I had been asymptomatic. However, I have recently been diagnosed with liver cancer (hepatocellular carcinoma), which has been attributed to Hep C. I am now more fully aware of the impact this has had on my quality of life and the burden this disease has placed on my family. I also was not aware of the availability of additional funding as my disease progressed and continues to progress. Perhaps other class members and their families are also unaware.

It would be my contention and recommendation that the surplus be allocated to the Class Members or Class Member Families and that these funds NOT be retained in the trust fund and NOT returned to the Federal government or any other competing body or organization.

Furthermore, I would request that surplus amounts allocated to Class Members/ Family Class Members be provided as a lump sum payment based on disease level in keeping with the original settlement.

Respectfully

Oct 1, 2012

To: J.J. Camp Q.C.
Camp Fiorante Matters Mogerman.

To Start: I would like to say thank-you for all the work that the Joint Committee has done over the years for the Hep C. Settlement. And glad to hear that there is sufficent funds for the future.
I do agree with the joint committee that the surplus(and I think all of it should be for the class members.
We were the ones given this terrible HCV because, they the goverment did not do the proper testing. That was availabe to them at the time.
I was one who had a blood transfusion then later found out I had the HCV.
To date I still suffer from the treatment I under went.

To General Questions

- Yes, I think they have failed with only being able to have any Health care help if you are at level 5 or 6 of this disease.

- For loss of services ~~A~~ A lot of places are charging at Least $20 hrs.
I would love to hire some extra help but can not afford to

- I have my husband drive me to most appointments.
  - No he has never been covered for expenses while accompanying me to them. I did not know I could do that. I thought it was just me..

To: Appointments:

- I can't remember how many appointment when I was doing treatment. I know there were alot.
- Appointments now: not doing HCV treament vary from year to year. It could be a low as 6 or up to 12 or more. It depends on what is going on with my chronic Pain and Fatigue.

Yes I think there should be a lump sumpayment, from this surplus. The pain and suffering that we have gone through and truly still go through every day. I still worry about ~~what~~ the future will be, because of the HCV and treatment. Being compensated extra I maybe able to relax alittle knowing I would hire some help when I need it.

Being compensated from the surplus now instead of later (Let's say when it is to late does not make sense.) A Least we could enjoy the remaining years with some comfort. Why should we have to wait until our Healt is so bad to do so. This Hep C Settlement is here for us, the claimant, not just to stay in trust, as our healt get's worse. I truly hope you think of us and our familys

Thankyou

From:
Sent: October-04-15 1:58 PM
To: J.J. Camp
Subject: 1986-1990 Hepatitis C - Surplus Allocation

Good Evening Mr. Camp,

I am writing this letter to you on behalf of my brother and myself in response to a letter we received regarding the surplus of funds in the above mentioned trust fund and input on allocations of funds.

Our grandmother, passed away on , 1998 from liver failure caused by the Hepatitis C virus which she contracted from tainted blood transfusions she received. At the time of her death, my brother and I were 10 years and 8 years old respectively. Most of our memories and photographs show us with her either bed ridden at their home or in a hospital bed which is an unfortunate way to remember our grandmother.

I understand that there were two categories of compensation whether the infected had deceased prior to January 1, 1999 or after with the later receiving compensation for ongoing healthcare as well as loss of care, guidance, and support. Since our grandmother passed away prior to January 1, 1999, the estate and our family received compensation for the loss of care, guidance and support.

Where we believe the settlement fell short was for class members and family class members who's loved one passed away prior to January 1, 1999. If my grandmother had lived passed January 1, 1999, her and the family would have been entitled to receive compensation for ongoing health care which may have extended her life, improved quality of life, or possibly lead to a potential liver transplant if she was strong enough. I was raised to not say "what if" but it's hard to avoid saying that phrase every time my grandmother or Hepatitis C are mentioned in conversation. extra time that our family could have spent with her would have been invaluable, and she would have loved to have spent more time with her children, and her three young grandchildren.

My grandfather received compensation as spouse and representative of the estate, my mother received $5,000, my brother and I as grandchildren received $500 as mentioned above for loss of care, guidance, and support. I'm sure my opinion is shared with all class and family class members when I say this; the care, guidance, and support my mother and grandmother provide to our lives is worth more than $5,500. In the case of our family, this was the result of almost five years of paperwork and legal where our grandmother passed away before the settlement.

We believe any/all surplus in the trust fund outside the cost of expected needs of class members and family class members should be allocated back to class & family class members entirely. Our preference would be families of loved ones who passed before January 1, 1999 should be reviewed and receive increased compensation for the reasons stated above. Once these have been reviewed and compensated, than families of deceased after January 1, 1999 should receive the same treatment.

We thank you for the opportunity to provide input on the subject and allowing us to voice our opinions regarding the short falls of the settlement. We look forward to hearing the results of the Joint Hearing next summer.

Please do not hesitate to contact me at with any additional questions or clarifications.

Regards,

From:
Sent: October-04-15 3:37 PM
To: J.J. Camp
Subject: RE: : Hepititis C Tainted Blood

Hello I am emailing this letter written by my Mother, in regards to the recent letter she received about an excess of funds for the Victims of the Tainted Blood given to her.

To Whom it may Concern,
I wanted to let you know my opinion on where the excess money allocated to the Victims of the Tainted Blood, Hepatitis C should go.
I feel very strongly that it should be given to us, the victims in a lump sum, as soon as possible.
I am sure you have heard many victims impact statements and I am sure that they feel the same as I do.
I was given this horrible disease, this tainted, dirty blood through no fault of my own. I am an innocent victim. And this is what I have to tell myself every time I have to disclose my Hepititis C to someone.
I see them recoil from me. Like they might catch it from just being too close. I feel dirty, I feel ashamed. I feel depressed. Then there are the numerous health issues that come along with this tainted blood. I am weak, I am sick all the time. I can't even clean my own house or pull my own weeds in my garden. Because of this I have spend the last 8 years hiring out garden and yard work, as well as household chores. And I could not and can not afford it. My finances are such that I have had to sell my home and move into a apartment. I simply could not afford to hire out the maintenance and upkeep of a yard and garden. A garden in which I had hoped to spend my twilight years. But that was all taken from me. Taken from me when I was given this awful disease. I am angry. And I am sad. If I had the finances I could have afforded to have the help I needed to stay in a home I desperately wanted to stay in. I may never be able to work my beautiful garden again but at least I could find joy in watching it through the seasons.
No amount of money can make up for this life sentence but it could make my last few years easier.

Thank you,

On March 18, 1987 I had surgery in the Royal Alexandra Hospital. Because of an existing bleeding problem a timing test was done on my blood and it was determind that I had Von Willebrands disease. On that basis croprecipitate (Factor 8) was ordered from the Red Cross and given preoperatively.

At the beginning of May 1987 I found myself becoming ill and in a few days began to jaundice. I was seen by my Doctor and referred to a blood specialist at the University of Alberta Hospital. The test that was done concluded that I had Non A Non B hepatitis. By this time I had lost all my body hair and half of my hair off my head.

In 2000 my Doctor told me I should be getting sicker, so he had blood tests done and I was told that because I did not smoke or drink and maintaned a healthy diet I kicked the Hep C out of my system.

P.S.
For thirteen years (1987-2000)
I kept thinking - how long do I have to live

From:
Sent: October-09-15 10:42 AM
To: J.J. Camp
Subject: 1986-1990 Hepatitis C Settlement Agreement Consultation process

Dear Sir or Madam,

Thank you for the opportunity to submit input to the Joint Committee in regards to the the 1986-1990 Hepatitis C Settlement Agreement.

Firstly, I will provide a basic summary of my experience with the program. I contracted Hep C from a blood transfusion after the birth of my daughter on October 6, 1989. I was contacted by Alberta Blood Services in August, 2000 to encourage me to get tested for the virus. I was diagnosed as Hep C positive in November 2000. I had no other probable means of contracting the virus.

Needless to say, the diagnosis was traumatic. My husband and I had just buried his mom at age 61 from cancer. My diagnosis came the same month that my family was suffering through the death of a newborn niece and serious illness of a sister. My husband and I made the decision to carry the burden of my health scare alone because the year 2000 had been a sad one for our families. The necessity of having my husband and our children tested for the virus was a major stress for me. The anxiety of explaining the situation to my children (10 and 14 at the time) and attempting to do this without making a 10 year old feel that her birth caused me harm was a delicate process. Her inability to reconcile the fact that her Mom had the same disease that her grade 5 health teacher described as a consequence of drug use and in the same sentence as HIV/AIDS caused many tears for our whole family. My daughter's emotional wellbeing was the most important issue for me through all of this. I firmly believe that the compensation settlement did not adequately address the pain and suffering that was endured by my family because of the initial Hep C diagnosis.

Another area that I think was lacking in the compensation package was the acknowledgment that I was unable to purchase Life Insurance since I was now deemed uninsurable. This was a very real factor for me as I was a stay at home mom. My husband would been in a difficult position if my battle with Hep C ended tragically and the possible compensation by being classified Level 6 was not adequate. This was always in the back of my mind as each year went by. I am aware that life gives no guarantees but Hep C was added to my family's story because of negligence in our health care system.

I was able to hold the disease at bay until 2008/9 when liver damage was evident and drug therapy was recommended. I do not think that the side effects from the drugs and the hopelessness of knowing that my chance of cure was only 50% can be overstated. I do not wish that 48 months AND the 6 months post treatment on anyone. I missed out on a lot that time period! The compensation package only addressed the actual treatment weeks and not the post recovery time. I question the settlement's lack of acknowledgement of the 6 months post treatment that patients have to wait until you are given the treatment success or failure proclamation. That 6 months was very difficult and I for one did not feel better the minute therapy stopped. It took a full 3 to 4 months before I was feeling like myself.

I was unable to accompany my daughter to Australia with my husband when my daughter was accepted to participate in an non profit organization's youth program. Her dad was able to experience the excitement with her and get her settled in Perth while I stayed home to rest and continue drug therapy.

I was not able to fully participate in my parent's 50th wedding anniversary celebrations because I was suffering side effects. The compensation package does not adequately acknowledge many non-pecuniary damages.

I was compensated for loss of services in the home and it was quite laughable really. $240 a week. This really brings to light how families are discriminated against if they choose to be a one income household. I was an avid community volunteer and treatment certainly affected my ability to contribute to my community in non monetary ways. My role at home and my community was barely recognized by the settlement.

The diagnosis changed how my family lived our lives and how we were able to plan for our future. I am one of the fortunate ones who cleared the virus but that does not change the fact that the Hep C affected us in very real ways. I often think of the people that continue to suffer with poor health because of this mess and my desire is for them to be able to live without the stress that finances bring to this unfortunate situation.

Sincerely,

From:
Sent: October-13-15 12:03 PM
To: Sharon D. Matthews
Subject: Re: Hep C surplus

Hello Sharon, thank you for getting back to me so quickly. I am no longer at that address as the building that I was living in has been knocked down and turned into something else. I know live in England and the Hep C class action people have my address as they continue to send me information. My new address is

To tell you the truth, I am not sure what to say next... My husband was incredibly brave throughout his battle with Hep C which killed him. He could not work whilst we were married because he was too sick and I could not work more than part time because he did most of his dying at home. I appreciate that the trust had to withhold monies for future claims being made but it maddens me that had to be so stressed about money in his final years when now it is sitting in surplus. Of course I would like the money to go to the families who have suffered all these years. My husband has a mother and sister and all the rest of the family who are still devastated by the loss of him. I know that there are many families who have all suffered the same pain and need to be supported. The insult is how little money received whilst he was still alive to know that he had put his name to a very important lawsuit that would make a difference to the people just like him. was not sure about being the named person on the lawsuit but we were told that someone had to do it for it to go to the courts. was very angry about his future being destroyed and also for all the other families who wanted to do something about it but were very worried about being ostracized by the disease. My late husband was my hero who battled to stay alive and take care of his wife and family and the other families who were poisoned by this grave injustice. Thank you for your time ,

---

From:
Sent: October-13-15 12:59 PM
To: J.J. Camp
Cc:
Subject: 1986-1990 Hepatitis C Settlement Hearing Submission

October 13, 2015

To Whom It May Concern at J. J. Camp Q. C.:

As a member of the 1986-1990 Hepatitis C Settlement Agreement, I am writing this letter in hopes of having it be included as a submission to the Joint Committee/Courts for their consideration at the Joint Hearing taking place in June, 2016.

In 1986, at the age of 30, I was infected with the HepC virus through a blood transfusion in Vancouver, BC. At the time, I was undergoing a liver surgery (for a pre-existing childhood condition), which removed the entire left lobe of my liver, leaving me with a healthy – although considerably reduced – liver. Within five years of the 1986 surgery, I was diagnosed with HepC, genotype 1. Yes, that's right – I was infected with a liver disease (HepC) while undergoing a corrective surgery for a liver disease! Since that time, I have worked hard to maintain my health while attending university, raising two sons, and pursuing my career. This has not been easy, as the virus has been active in my body and extremely difficult to live with.

In 2001, I tried the interferon treatment. I was on it for six, uncomfortable months. Unfortunately, I was a 'non-responder' and the medication was discontinued. My diagnosis went from fibrosis to cirrhosis. Although I was suffering the physical and emotional effects of liver disease, I continued to work and provide a family home for my children.

I've always taken my health very seriously and have been committed to maintaining a healthy lifestyle, devoid of anything that would compromise my remaining liver tissue. I am happy to report, that at the age of 59, with a cirrhotic, scarred right lobe of my liver still functioning, I accessed the Harvoni medication and have now been 'cleared' of the HepC virus. I have lived with this virus active in my body for the last 29 years and am glad to have it gone.

So what now? I am an older woman with a severely compromised liver. The health effects of the HepC have hindered my ability to fully pursue my career, and because of that, my retirement options are limited. My liver will never recover, I will never regain the liver function that I would have enjoyed had I not been infected, and I am at a far greater risk of developing liver cancer due to the damage my liver has been subjected to due to the infection.

I feel that a portion of the surplus should be made available to 1986-1990 Hepatitis C Settlement Agreement members that find themselves in my situation. I was infected as a vibrant, fully functioning young woman, and now, although 'cleared' of the virus – I am facing my old age with what remains of my liver – scarred, diminished and at risk of further disease. Had I not been infected in 1986, my health outcomes would look very different heading into my 'golden years'. I believe that I am due a 'quality of life' allowance; a financial life preserver with which to shore me up into my declining years.

Thank you for considering my submission, and for letting me know that you have received and read this. I would be happy to discuss this with you at any time.

Sincerely,

From:
Sent: October-13-15 2:11 PM
To: Sharon D. Matthews
Subject:

Hello Sharon

My sister n law who is currently living in the UK wrote to me today. She informed me of her contact with you in regards to the lawsuit that my deceased brother, was involved in regarding the Red Cross.

Our family is in shock and confused by the news of a $230-250 million surplus. My brother and his wife suffered so much during his illness not only from the pain but also from financial difficulties resulting from the burden of the illness. That money could have allowed them some basic comforts during his painful years leading to the end of his life.

My brother was an amazing young man. He grew up with a physical disadvantage yet tried to make the best of life. He was a fair person and always did his best despite his pain and the odds against him. Imagine being 16 years old and finding out you have HIV. The way dealt with that was to go traveling with friends and see the world. Trying to make the best of a very bad situation. Then he met the love of his life at 20 years old and this amazing young woman at 19 yrs old despite all the diseases had commits to a life with him. Just after their wedding received a letter in the mail saying he had contracted Hep C! Our family has had to rally through many difficult times and emotionally it has taken a toll on us all.

Last year my Father, , past died of what surely was years of depression and devastation from the loss of his only son who he advocated selflessly for. I can't imagine how he would have reacted had he been alive to hear about this surplus. My mother witnessed her son suffer his whole life. No parent should ever have to go through that.

My beautiful, sensitive, smart, kind, caring funny brother was failed by our blood system and the dysfunctional relationship with our government and spent his final years fighting for what was right.
I'm not sure what will come of the surplus and how the money is allocated but for all the suffering our family has endured I felt it important for me to write and if possible for you to do what you can to mention my brother story in court on Friday.

Thank you for taking the time to read my email.
Sincerely,

From:
Sent: Tuesday, October 13, 2015 7:37 PM
To: Sharon D. Matthews
Subject: - Deceased

Hello Sharon, my name is My son was involved in the class action law suit against the Canadian Red Cross regarding his infection with Hep-C as the result of blood product he received.

I was quite surprised to discover yesterday that a letter from the Joint Committee Was addressed to my deceased mother (2006) regarding the surplus in this trust fund, although nothing had been sent to me as the mother of the claimant, even though I have lived at my address for 13 years.

My daughter, has written to you today describing the physical, emotional and financial pain that was suffered by , his wife and our immediate family due to the Hep-C infection.

I am appalled at the fact that there are hundreds of millions of dollars surplus in this fund when so little was paid out in compensation for the suffering of the affected families.

My hope is that the committee might address the value that was arrived at as compensation for the pain and suffering of those affected, and, in fact, the value of the life of a beautiful young man who was taken from us at the age of 32.

Thank you.

Sent from my iPad

1986 - 1990 Hepatitis C
Settlement Agreement
phase 2 sufficiency Schedule.

Oct-16-15

Re- Joint Committee

Writing in about my sister, born in

, Left us to soon, ; -2009.

Name:

Left behind sister's and brother, daughter, and mother.

, Brother

, daughter s, and

mother

Writing on behave of my family, about my sister, who got bad blood, and did not Know till later, which shorten her life span, and was taken from her family. We as family Loved her so much as did everyone who

Knew her. had a bad heart, and didn't need this added to her health. Us as family did not get much $ money's from the settlement, that was given to each of us.

We - family member's would really Like to or, hope you Keep us up to date, if or when we will get anything, out of your hearing, my phone number,

Writing on for my family - of

This is Exhibit" B "referred to in the
affidavit of CHYA R. MOGERMAN
sworn before me at VANCOUVER, BC
this 10 day of OCTOBER 2015

A Commissioner for taking Affidavits
for British Columbia

Public Guardian and
Trustee of Manitoba

155 Carlton St, Suite 500
Winnipeg, MB R3C 5R9
CANADA

Telephone: (204) 945-2709
Fax: (204) 945-0410
E-mail: Jana.Taylor@gov.mb.ca

August 19, 2015

J.J. Camp, Q.C.
Camp Fiorante Matthews Mogerman
400-856 Homer Street
Vancouver BC V6B 2W5

VIA FAX: 1-604-689-7554

Dear Sir:

RE: Written Submission to Joint Committee
1986-1990 Heptatitis C Settlement Agreement

The Public Guardian and Trustee has received information regarding the 1986-1990 Hepatitis C. Settlement Agreement. It is my understanding that there is a surplus in the trust fund and the Court will be considering submissions as to how this surplus should be utilized. The Public Guardian and Trustee of Manitoba is submitting to you, as a member of the Joint Committee, its Written Submission as to one way that the surplus can be used to address claimants who have not received appropriate compensation for their contraction of Hepatitis C in the referenced time period.

The Public Guardian and Trustee of Manitoba asks that consideration be given to extending the time period by which claims can be brought on behalf of vulnerable and/or incapable persons. The Public Guardian and Trustee of Manitoba is aware of at least one individual who was unable to bring a claim on her own behalf during the claim period. Unfortunately, the June 30, 2010 deadline had passed by the time that the Public Guardian and Trustee became aware, on behalf of the individual, that she had a claim for compensation under the settlement agreement. The Public Guardian and Trustee only learned that her contraction of the HCV was the result of a blood transfusion after the deadline had passed.

In circumstances such as these, the Public Guardian and Trustee suggests that it is fair and reasonable for vulnerable or incapable persons to still be able to make a claim for compensation against the surplus of funds that exist and I am hopeful that the Joint Committee will encourage the Court to exercise its discretion to allocate a portion of the surplus towards claims brought on behalf of incapable persons where the original deadline for the claim had passed.

I would be happy to clarify any of the points referenced above with you directly and I ask that you please feel free to contact me at your leisure with respect to this submission.

Respectfully yours,

Jana Taylor
Counsel for The Public Guardian and Trustee

JT/jk

This is Exhibit" C "referred to in the
affidavit of CHYA R. MOGERMAN
sworn before me at VANCOUVER, BC
this 16 day of OCTOBER 2015
A Commissioner for taking Affidavits
for British Columbia

From: poste381@reseller1.hostpapa.com
Sent: August-12-15 5:17 PM
To: one@postelvideo.com; Sharon D. Matthews
Subject: Question from Web Stream

Webcast question from:

As claimants we were made fully aware that no additional funds would be made available, and we accepted the risk that over time the fund may not be sufficient to meet our needs. As compensation for our injury this fund is literally all we have. Is it just to discuss a potential claw back, or reallocation of resources awarded to the victims of hepatitis C? Will we be victimized yet again?

From: poste381@reseller1.hostpapa.com
Sent: August-12-15 5:19 PM
To: one@postelvideo.com; Sharon D. Matthews
Subject: Question from Web Stream

Webcast question from:

Why is a certified Hepatologist not part of the make up of the Medical Working Group used during this review?

From: poste381@reseller1.hostpapa.com
Sent: August-12-15 6:01 PM
To: one@postelvideo.com; Sharon D. Matthews
Subject: Question from Web Stream

Webcast question from:

Do you anticipate any new Hep C claims or has there been a cut off date?

From: poste381@reseller1.hostpapa.com
Sent: August-12-15 6:15 PM
To: one@postelvideo.com; Sharon D. Matthews
Subject: Question from Web Stream

Webcast question from:

The Phase 2 Sufficiency Schedule mailed to class members outlining this process indicates we were to be informed that assets exceed liabilities by June 30 2015, yet we received this notice just a few days ago and many individuals and patient organizations were blind-sided.I believe Community involvement may have reduced this. Will the Joint Committee and the Courts now support Community involvement?

From: poste381@reseller1.hostpapa.com
Sent: August-12-15 6:17 PM
To: one@postelvideo.com; Sharon D. Matthews
Subject: Question from Web Stream

Webcast question from:

I looked after my brother for his last 5 years and because his son didn't reply to mail, I was unable to apply for my benefits entitled. Lost in the shuffle?

From: poste381@reseller1.hostpapa.com
Sent: August-12-15 6:34 PM
To: one@postelvideo.com; Sharon D. Matthews
Subject: Question from Web Stream

Webcast question from:

I am receiving loss of support payments. If I take new Hep c drugs and get "cured" will these pay outs stop. My view my marriage/health have been destroyed at 64 damage already done to my liver.Should not have to worry that taking drug will stop payments!

From: poste381@reseller1.hostpapa.com
Sent: August-12-15 6:37 PM
To: one@postelvideo.com; Sharon D. Matthews
Subject: Question from Web Stream

Webcast question from:

Can funds be set up for families in need? My brother was very intelligent and lost education for himself and his son.

From: poste381@reseller1.hostpapa.com
Sent: August-12-15 6:46 PM
To: one@postelvideo.com; Sharon D. Matthews
Subject: Question from Web Stream

Webcast question from:

They added a new section to loss of support paperwork this year asking if we had tried drug treatments. It seemed like you were trying to drop people from compensation????

From: poste381@reseller1.hostpapa.com
Sent: August-12-15 6:56 PM
To: one@postelvideo.com; Sharon D. Matthews
Subject: Question from Web Stream

Webcast question from:

Struggling to make ends meet on disability if more funds available should go to victims. Can't even start new relationship for fear of my hepc destroying their lives

From: poste381@reseller1.hostpapa.com
Sent: August-12-15 7:07 PM
To: one@postelvideo.com; Sharon D. Matthews
Subject: Question from Web Stream

Webcast question from:

I am concerned that the term "cure" is a get out of jail free card for the fund. Many of us still have lasting physical and mental issues due to the length of time we have lived with this condition. Is the fund just going to "cut us off" because of a sustained response?

From: poste381@reseller1.hostpapa.com
Sent: August-12-15 7:13 PM
To: one@postelvideo.com; Sharon D. Matthews
Subject: Question from Web Stream

Webcast question from:

The government can't take this money back to do a study to figure out how to allocate towards drug-infected users

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From: poste381@reseller1.hostpapa.com
Sent: August-12-15 7:23 PM
To: one@postelvideo.com; Sharon D. Matthews
Subject: Question from Web Stream

Webcast question from:

My husband died 1992 from complications of hep c..I don't know if I received funds for the funeral expenses. Can this be checked in your office?

From: poste381@reseller1.hostpapa.com
Sent: August-12-15 7:29 PM
To: one@postelvideo.com; Sharon D. Matthews
Subject: Question from Web Stream

Webcast question from:

What if the hospital contacted to let you know that your family member has Hep C and you make a claim after you are informed ?

From: poste381@reseller1.hostpapa.com
Sent: August-12-15 7:28 PM
To: one@postelvideo.com; Sharon D. Matthews
Subject: Question from Web Stream

Webcast question from:

Insurance concerns are huge - even when husband was a level 1 or 2 claimant, we have never been able to get life insurance, even on items such as a mortgage - very valid concern as the disease progresses.

From: poste381@reseller1.hostpapa.com
Sent: August-12-15 7:29 PM
To: one@postelvideo.com; Sharon D. Matthews
Subject: Question from Web Stream

Webcast question from:

You mention the dollar amount for the surplus. Does your buffer of $150 million , which is separate from the surplus ,provide you hope for the needs of the living HepC members?

From: poste381@reseller1.hostpapa.com
Sent: August-12-15 7:31 PM
To: one@postelvideo.com; Sharon D. Matthews
Subject: Question from Web Stream

Webcast question from:

due to my fathers diminished ability to work his regular hours, he was unable to stop working at age 65. he did work until th week that he passed. I'm sure others may be in this situation.

From: poste381@reseller1.hostpapa.com
Sent: August-12-15 7:30 PM
To: one@postelvideo.com; Sharon D. Matthews
Subject: Question from Web Stream

Webcast question from:

I fought 7 years to get compensation. Now living on $24,000 a yr disability with my work place pension destroyed. I need more from fund to look after my family.At 64 my liver won't self repair.

From: poste381@reseller1.hostpapa.com
Sent: August-12-15 7:41 PM
To: one@postelvideo.com; Sharon D. Matthews
Subject: Question from Web Stream

Webcast question from:

Hi here, How many Hemophiliacs infected with both HIV and HepC are still alive ? My son , a hemophiliac, was part of the HIV class action lawsuit and only found out he was also HEPC infected 1 year prior to his death. His autopsy showed he was at level 5 (75%) at the time of his passing. I understand that being on an HIV drug therapy program this put him in a catch 22 situation regarding the ability of HepC medication to be effective. He had started a claim ( ) but passed away before being accepted. His mother and I recieved a payout from the HepC class action group based on that number. How do we know this was a fair settlement and are you suggesting there may be additional compensation to us and others in a similar situation ?

From: poste381@reseller1.hostpapa.com
Sent: August-12-15 7:45 PM
To: one@postelvideo.com; Sharon D. Matthews
Subject: Question from Web Stream

Webcast question from: .

Are approved family members of deceased class members included in the discussion when you refer to class members?

From: poste381@reseller1.hostpapa.com
Sent: August-12-15 7:48 PM
To: one@postelvideo.com; Sharon D. Matthews
Subject: Question from Web Stream

Webcast question from:

Taking an average of individuals will not solve the issue of co-infection individuals having been treated differently than the non-co-infected cohort!

From: poste381@reseller1.hostpapa.com
Sent: August-12-15 7:49 PM
To: one@postelvideo.com; Sharon D. Matthews
Subject: Question from Web Stream

Webcast question from:

Would just add no amount will comp for the fear of infecting my family/destroyin my marriage inability to meet anybody new Again living on $24,000 a yr makes me unable to help my two boys..i need to be able to help them..the only way...more from my government that agreed to comp because they knew they would loose in court.

From: poste381@reseller1.hostpapa.com
Sent: August-12-15 7:51 PM
To: one@postelvideo.com; Sharon D. Matthews
Subject: Question from Web Stream

Webcast question from:

Thank you so much for listening..it means the world..that we are heard and understood.

From: poste381@reseller1.hostpapa.com
Sent: August-12-15 7:52 PM
To: one@postelvideo.com; Sharon D. Matthews
Subject: Question from Web Stream

Webcast question from:

With respect to the replacement of one's services around the home -as previously mentioned - those infected as children become hard to measure? Spouses of those affected as children have always filled in for the serivces they would be/should be performing.

From: poste381@reseller1.hostpapa.com
Sent: August-12-15 7:53 PM
To: one@postelvideo.com; Sharon D. Matthews
Subject: Question from Web Stream

Webcast question from:

What about family members who had to provide 24/7 and have to leave working all together?

From: poste381@reseller1.hostpapa.com
Sent: August-12-15 7:56 PM
To: one@postelvideo.com; Sharon D. Matthews
Subject: Question from Web Stream

Webcast question from:

Is Loss of Services only paid to a certain level?

From: poste381@reseller1.hostpapa.com
Sent: August-12-15 7:58 PM
To: one@postelvideo.com; Sharon D. Matthews
Subject: Question from Web Stream

Webcast question from:

What about people that became very sick right after their transfusion?

From: poste381@reseller1.hostpapa.com
Sent: August-12-15 8:06 PM
To: one@postelvideo.com; Sharon D. Matthews
Subject: Question from Web Stream

Webcast question from:

is there any talk about moving retirement age past 65

From: poste381@reseller1.hostpapa.com
Sent: August-12-15 8:09 PM
To: one@postelvideo.com; Sharon D. Matthews
Subject: Question from Web Stream

Webcast question from:

Out of pocket At time when they send back forms the notes are so brief and short that I don't understand what they mean. They have to remember we are sick disabled people...not lawyers

From: poste381@reseller1.hostpapa.com
Sent: August-12-15 8:08 PM
To: one@postelvideo.com; Sharon D. Matthews
Subject: Question from Web Stream

Webcast question from:

What happens with all the past medical expenses the family payed for a now deceased hep c person?

From: poste381@reseller1.hostpapa.com
Sent: August-12-15 8:11 PM
To: one@postelvideo.com; Sharon D. Matthews
Subject: Question from Web Stream

Webcast question from:

My son could have benefited from a lot more help and care prior to his death, He was at level 5 at the time of his death and recalling his physical and mental state I feel that other people at level 4 or 5 must need a lot more services, pshycological help, financial help especially for mothers or couples raising other children, physical rehab. There must be a better way to assess the needs of these individuals.

From: poste381@reseller1.hostpapa.com
Sent: August-12-15 8:10 PM
To: one@postelvideo.com; Sharon D. Matthews
Subject: Question from Web Stream

Webcast question from:

After telling me that interferon might make me take my own life with my depression..didn't see hep c doctor for five years

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From: poste381@reseller1.hostpapa.com
Sent: August-12-15 8:12 PM
To: one@postelvideo.com; Sharon D. Matthews
Subject: Question from Web Stream

Webcast question from:

Consider evaluating travel claims filed on a claiment level basis to review how often one visits?

FYI - we are a level 3 claimant in rural prairie provinces - regular visits 2x/yr, and during treatment, once every 3 weeks. Each visit is 500-kms round trip

From: poste381@reseller1.hostpapa.com
Sent: August-12-15 8:12 PM
To: one@postelvideo.com; Sharon D. Matthews
Subject: Question from Web Stream

Webcast question from:

Most individuals who are level 3 or higher are typically followed on a 3 to 6 month period but the need for blood work and tests such as Ultrasounds would definitely require more trips. As well some tests require a second person because of the nature of the drugs used to administer the test.

From: poste381@reseller1.hostpapa.com
Sent: August-12-15 8:17 PM
To: one@postelvideo.com; Sharon D. Matthews
Subject: Question from Web Stream

Webcast question from:

My son passed away at age 26 in the year 2000, from what I am hearing I can only imagine what he might be going through should he be still here. This webinar is full of wonderful dialogue and I for one greatly appreciate your efforts and yes I would very much like access to this powerpoint.

From: poste381@reseller1.hostpapa.com
Sent: August-12-15 8:20 PM
To: one@postelvideo.com; Sharon D. Matthews
Subject: Question from Web Stream

Webcast question from:

Agreed - Harvoni was partially covered by GreatWest Life, but only to a certain extent - and the procedure to navigate the GreatWest system was excruciating, even with the assistance of Momentum.

From: poste381@reseller1.hostpapa.com
Sent: August-12-15 8:22 PM
To: one@postelvideo.com; Sharon D. Matthews
Subject: Question from Web Stream

Webcast question from:

admin said ask private insurance first. I have been afraid to let my employer know my hepc in case they try and fire me..one of the many stress factors

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From: poste381@reseller1.hostpapa.com
Sent: August-12-15 8:27 PM
To: one@postelvideo.com; Sharon D. Matthews
Subject: Question from Web Stream

Webcast question from:

I currently am receiving lost of services. Can I switch it to loss of guidance, care and companionship???

From: poste381@reseller1.hostpapa.com
Sent: August-12-15 8:30 PM
To: one@postelvideo.com; Sharon D. Matthews
Subject: Question from Web Stream

Webcast question from:

Have you considered the toll on lower levels upon aging and the meds they can't take.

From: poste381@reseller1.hostpapa.com
Sent: August-12-15 8:32 PM
To: one@postelvideo.com; Sharon D. Matthews
Subject: Question from Web Stream

Webcast question from:

I agree with the comments of both of the ladies who spoke about the loss of their parents and the payment for family members.

From: poste381@reseller1.hostpapa.com
Sent: August-12-15 8:31 PM
To: one@postelvideo.com; Sharon D. Matthews
Subject: Question from Web Stream

Webcast question from:

Perhaps spousal loss should at least have more than a one year block for mental and physical recovery and ability to get on with their life, especially older individuals.

From: poste381@reseller1.hostpapa.com
Sent: August-12-15 8:32 PM
To: one@postelvideo.com; Sharon D. Matthews
Subject: Question from Web Stream

Webcast question from:

One of the specific compensation items refers to $1,000/month for months of drug therapy rec'd. When we applied for this, we were denied as the first line treatment recommended by our Dr. did not include Interferon, only Harvoni. We were told the settlement was worded to only include Interferon treatment. The Court could consider modifying the terms to be less named-drug specific, to include current and potential future treatments.

From: poste381@reseller1.hostpapa.com
Sent: August-12-15 8:34 PM
To: one@postelvideo.com; Sharon D. Matthews
Subject: Question from Web Stream

Webcast question from:

My son passed away in 2000, am I still able to apply for funeral expenses ?

From: poste381@reseller1.hostpapa.com
Sent: August-12-15 8:35 PM
To: one@postelvideo.com; Sharon D. Matthews
Subject: Question from Web Stream

Webcast question from:

There were no tax implications on the money we got when my mom died with Hepc cancer. There should not be tax implications if we receive some of the surplus at this time .

From: poste381@reseller1.hostpapa.com
Sent: August-12-15 8:35 PM
To: one@postelvideo.com; Sharon D. Matthews
Subject: Question from Web Stream

Webcast question from:

What if the person infected had no knowledge about treatment or wasn't able to pay for treatment and he passed after starting therapy in later years after reaching level 6?

From: poste381@reseller1.hostpapa.com
Sent: August-12-15 8:38 PM
To: one@postelvideo.com; Sharon D. Matthews
Subject: Question from Web Stream

Webcast question from:

I'm most concerned about the high cost of Harvoni. Its great that there is an effective drug out there but the high price tag is a huge barrier. Most drug plans are capped at a certain amount, and there are privacy issues. There also needs to be more awareness surrounding medi care and pharmacare as the first payers of coverage. I don't believe a lot of potential patients are aware of this. I'm learning about it only because I work for an insurance company myself.

From: poste381@reseller1.hostpapa.com
Sent: August-12-15 8:41 PM
To: one@postelvideo.com; Sharon D. Matthews
Subject: Question from Web Stream

Webcast question from:

is this the beginning of closing out the fund, where as you would pay out fund to all claimants.

From: poste381@reseller1.hostpapa.com
Sent: August-12-15 8:44 PM
To: one@postelvideo.com; Sharon D. Matthews
Subject: Question from Web Stream

Webcast question from:

Any compensations made in any medical damage claim should always be sensitive to the most ill.

From: poste381@reseller1.hostpapa.com
Sent: August-12-15 8:47 PM
To: one@postelvideo.com; Sharon D. Matthews
Subject: Question from Web Stream

Webcast question from:

Cure is a loaded word..at 64 and years of this disease..there is no cure for what this has done to me and my family

From: poste381@reseller1.hostpapa.com
Sent: August-12-15 8:47 PM
To: one@postelvideo.com; Sharon D. Matthews
Subject: Question from Web Stream

Webcast question from:

Disease progression should definitely be considered. I believe the most money should go to the sickest people. I'm probably stage 2 or 3 and doing ok, so far. I would much rather the funds go to those who need it most as soon as possible. My heart goes out to those who are suffering much more than me. I'm confident hep C drugs will improve with years to come which will help someone younger like myself recover vs. those in higher progression levels right now. This is just my opinion.

From: poste381@reseller1.hostpapa.com
Sent: August-12-15 8:49 PM
To: one@postelvideo.com; Sharon D. Matthews
Subject: Question from Web Stream

Webcast question from: .

It seems to me that an enhancement to those who are living with HepC at different levels should be a percentage of the total and it should also be possible to recompensate those who have lost family members to HepC at another percentage.

From: poste381@reseller1.hostpapa.com
Sent: August-12-15 8:49 PM
To: one@postelvideo.com; Sharon D. Matthews
Subject: Question from Web Stream

Webcast question from:

I left my employment to look after my brother for 5 years, but his son never filed my care, tried to apply but needed his sign-off which never happened. What do I do now

From: poste381@reseller1.hostpapa.com
Sent: August-12-15 8:55 PM
To: one@postelvideo.com; Sharon D. Matthews
Subject: Question from Web Stream

Webcast question from:

YES - Never been able to get life insurance for the infected. EVER. The risk we bear as a young family is significant, even if death were accidental and unrelated to HCV, due to the fact spouse is un-insurable because of HCV. Consider the usual coverage a young family would need - insurance on loans such as mortgage, vehicles and business loans. Passing of the infected spouse would devastate the family financially, and bankrupt us. THIS IS OF GREAT CONCERN FOR LOWER-LEVEL AND YOUNGER CLAIMANTS!! Thank you for considering it!

From: poste381@reseller1.hostpapa.com
Sent: August-12-15 8:56 PM
To: one@postelvideo.com; Sharon D. Matthews
Subject: Question from Web Stream

Webcast question from:

You said loss of income ends 65
Did you just say loss of support ends at that age as well??

From: poste381@reseller1.hostpapa.com
Sent: August-12-15 8:58 PM
To: one@postelvideo.com; Sharon D. Matthews
Subject: Question from Web Stream

Webcast question from:

i would recommend that there are elderly that need to be heard.

From: poste381@reseller1.hostpapa.com
Sent: August-12-15 9:04 PM
To: one@postelvideo.com; Sharon D. Matthews
Subject: Question from Web Stream

Webcast question from:

what if youre elderly and cant do treatments

From: poste381@reseller1.hostpapa.com
Sent: August-12-15 9:06 PM
To: one@postelvideo.com; Sharon D. Matthews
Subject: Question from Web Stream

Webcast question from:

Hep C BC would be a good place to start for networking- something very important to me too. Would be interested in helping start a chapter as well!

Court File No. 98-CV-141369 CP00

ONTARIO
SUPERIOR COURT OF JUSTICE

BETWEEN:

DIANNA LOUISE PARSONS, MICHAEL HERBERT CRUICKSHANKS, DAVID TULL,
MARTIN HENRY GRIFFEN, ANNA KARDISH, ELSIE KOTYK, Executrix of the Estate of Harry Kotyk,
deceased and ELSIE KOTYK, personally

Plaintiffs

and

THE CANADIAN RED CROSS SOCIETY, HER MAJESTY THE QUEEN IN RIGHT OF ONTARIO and
THE ATTORNEY GENERAL OF CANADA

Defendants

and

HER MAJESTY THE QUEEN IN THE RIGHT OF THE PROVINCE OF ALBERTA
HER MAJESTY THE QUEEN IN THE RIGHT OF THE PROVINCE OF SASKATCHEWAN,
HER MAJESTY THE QUEEN IN THE RIGHT OF THE PROVINCE OF MANITOBA,
HER MAJESTY THE QUEEN IN THE RIGHT OF THE PROVINCE OF NEW BRUNSWICK
HER MAJESTY THE QUEEN IN THE RIGHT OF THE PROVINCE OF PRINCE EDWARD ISLAND,
HER MAJESTY THE QUEEN IN THE RIGHT OF THE PROVINCE OF NOVA SCOTIA
HER MAJESTY THE QUEEN IN THE RIGHT OF THE PROVINCE OF NEWFOUNDLAND,
THE GOVERNMENT OF THE NORTHWEST TERRITORIES,
THE GOVERNMENT OF NUNAVUT and THE GOVERNMENT OF THE YUKON TERRITORY

Intervenors

Proceeding under the *Class Proceedings Act, 1992*

Court File No. 98-CV-146405

BETWEEN:

JAMES KREPPNER, BARRY ISAAC, NORMAN LANDRY, as Executor of the Estate of the late
SERGE LANDRY, PETER FELSING, DONALD MILLIGAN, ALLAN GRUHLKE, JIM LOVE and
PAULINE FOURNIER as Executrix of the Estate of the late PIERRE FOURNIER

Plaintiffs

and

THE CANADIAN RED CROSS SOCIETY, THE ATTORNEY GENERAL OF CANADA and
HER MAJESTY THE QUEEN IN RIGHT OF ONTARIO

Defendants

and

HER MAJESTY THE QUEEN IN THE RIGHT OF THE PROVINCE OF ALBERTA,
HER MAJESTY THE QUEEN IN THE RIGHT OF THE PROVINCE OF SASKATCHEWAN,
HER MAJESTY THE QUEEN IN THE RIGHT OF THE PROVINCE OF MANITOBA,
HER MAJESTY THE QUEEN IN THE RIGHT OF THE PROVINCE OF NEW BRUNSWICK,
HER MAJESTY THE QUEEN IN THE RIGHT OF THE PROVINCE OF PRINCE EDWARD ISLAND
HER MAJESTY THE QUEEN IN THE RIGHT OF THE PROVINCE OF NOVA SCOTIA
HER MAJESTY THE QUEEN IN THE RIGHT OF THE PROVINCE OF NEWFOUNDLAND,
THE GOVERNMENT OF THE NORTHWEST TERRITORIES,
THE GOVERNMENT OF NUNAVUT AND THE GOVERNMENT OF THE YUKON TERRITORY

Intervenors

Proceeding under the *Class Proceedings Act, 1992*

This is the 1st Affidavit
of Shelley Woodrich in this case
and was made on 15/Oct/2015

No. C965349
Vancouver Registry

In the Supreme Court of British Columbia

Between:

Anita Endean, as representative plaintiff

Plaintiff

and:

The Canadian Red Cross Society
Her Majesty the Queen in Right of the Province of British Columbia, and The Attorney General of Canada

Defendants

and:

Prince George Regional Hospital, Dr. William Galliford, Dr. Robert Hart Dykes, Dr. Peter Houghton, Dr. John Doe, Her Majesty the Queen in Right of Canada, and Her Majesty the Queen in Right of the Province of British Columbia

Third Parties

Proceeding under the Class Proceedings Act, R.S.B.C. 1996, C. 50

CANADA	
PROVINCE OF QUÉBEC	**SUPERIOR COURT**
DISTRICT OF MONTRÉAL	**Class action**
NO : 500-06-000016-960	**DOMINIQUE HONHON**

Plaintiff

-vs-

THE ATTORNEY GENERAL OF CANADA
THE ATTORNEY GENERAL OF QUÉBEC
THE CANADIAN RED CROSS SOCIETY

Defendants

-and-

MICHEL SAVONITTO, in the capacity of the Joint Committee member for the province of Québec

PETITIONER

-and-

FONDS D'AIDE AUX RECOURS COLLECTIFS

-and-

LE CURATEUR PUBLIC DU QUÉBEC

Mis-en-cause

CANADA	
PROVINCE OF QUÉBEC	**SUPERIOR COURT**
DISTRICT OF MONTRÉAL	**Class action**
NO : 500-06-000068-987	**DAVID PAGE**

Plaintiff

-vs-

THE ATTORNEY GENERAL OF CANADA
THE ATTORNEY GENERAL OF QUÉBEC
THE CANADIAN RED CROSS SOCIETY

Defendants

-and-

FONDS D'AIDE AUX RECOURS COLLECTIFS

-and-

LE CURATEUR PUBLIC DU QUÉBEC

Mis-en-cause

AFFIDAVIT OF SHELLEY WOODRICH
(affirmed October 16, 2015)

I, SHELLEY WOODRICH, of the City of Windsor, in the Province of Ontario, legal assistant, AFFIRM:

1. I am employed at Sutts, Strosberg LLP as a file administrator. I am the person at our office with the primary responsibility for the day to day handling of the 1986-1990 Hepatitis C class action settlement file. I have personal knowledge of the facts to which I depose in this affidavit, except where I state them to be on information and belief, and where so stated I believe them to be true.

2. I am informed by Heather Rumble Peterson that the Joint Committee sought input from class members and family class members to assist them in identifying issues to be considered when making recommendations to the Courts on allocation of actuarially unallocated money and assets to benefit class members and family class members, based on their experiences living with the Hepatitis C virus ("HCV") and with family members who are infected with HCV. In this regard, Sutts, Strosberg LLP received written and oral communications from class members and family class members.

WRITTEN SUBMISSIONS

3. Since August 2015, I have been involved in the receiving, reviewing, and recording of class member and family class member written submissions (by mail,

facsimile and email) on the motions to allocate actuarially unallocated money and assets as well as other written communications.

4. Subject to the qualifiers I describe at paragraphs 6, 7 and 8 below, up until the close of business on October 15, 2015, Sutts Strosberg LLP received 134 written submissions from class members and family class members. Some of these submissions were written on behalf of several named family class members.

5. Attached as **exhibit "A"** are the written submissions Sutts, Strosberg LLP received from class members and family class members concerning allocation up to and including October 15, 2015, subject to the qualifiers I've set out at paragraphs 6, 7 and 8 below. These submissions are generally appended in chronological date order except where more than one submission was received from one person in which case the submissions from that person have been grouped together and treated as a single submission.

6. The submissions attached at exhibit "A" do not include communications received by Sutts, Strosberg LLP that were purely administrative (eg: change of address). Nor do they include communications received from a number of people who wrote with questions pertaining to their own claims and/or benefits where they do not also provide information, commentary or suggestions that the Joint Committee can use to inform the recommendations it makes to the Courts on benefits for class members and family class members.

7. To the extent possible, exhibit "A" also excludes those submissions that I have identified as having been received by the Joint Committee in British Columbia and Quebec from class members and family class members in those jurisdictions and additional submissions received by Sutts Strosberg LLP in French that were forwarded to the office of Mr. Savonitto for consideration and inclusion in his office's affidavit.

8. Some submissions received by Sutts, Strosberg LLP were also addressed to Ms. Podrebarac. I have also conferred with Julie Davis at Ms. Podrebarac's office and reviewed submissions they received and circulated to me in an attempt to exclude duplication in the Ontario actions between our offices. I expect that some duplication will nonetheless occur between submissions attached to my affidavit and those attached by Alan Melamud from Ms. Podrebarac's office.

9. The submissions appended at exhibit "A" have been redacted to remove names, postal addresses, email addresses, phone numbers and photos where applicable to protect the privacy of the class members and family class members.

10. Sutts, Strosberg LLP also received two letters from organizations whose membership includes class members. I am advised by Ms. Peterson that those letters are included in Mr. Melamud's affidavit and as such have not been included here.

11. Ms. Peterson has advised me that she attempted to acknowledge all written communications received at Sutts, Strosberg LLP and advise class members and family class members when and where the motion materials would be available for them to review.

ORAL COMMUNICATIONS

12. A number of persons have also contacted Sutts, Strosberg LLP by telephone with purely administrative changes and/or questions about their own files and benefits. While these contacts have been recorded, no attempt has been made to compile them for this affidavit.

13. Deborah Tocco, a file administrator at our office, and/or Ms. Peterson have spoken to many such individuals to assist with their individual questions. Ms. Tocco and Ms. Peterson have advised me that they answered questions to the extent they were able, provided updated contact information to the Administrator for some of these callers, advised others to contact the Administrator to clarify their entitlements, facilitated contact with the Administration for others, and advised class members and family class members when and where the motion materials would be available for them to review.

CONSULTATION SESSIONS

14. I am advised by Ms. Peterson that Mr. Melamud of Ms. Podrebarac's office has reported on the Toronto consultation session and webcast she co-hosted with Ms. Podrebarac in his affidavit sworn in support of this motion.

AFFIRMED BEFORE ME at the City of)
Windsor, in the County of Essex, this)
16th day of October, 2015.)
)
)
)

Commissioner for taking affidavits

SHELLEY WOODRICH

THE ATTACHED IS EXHIBIT "A" TO THE
AFFIDAVIT OF SHELLEY WOODRICH AFFIRMED
BEFORE ME THIS 16TH DAY OF OCTOBER,
2015

COMMISSIONER FOR TAKING AFFIDAVITS

Sonya Robinson

From: [redacted]
ent: Tuesday, August 04, 2015 7:46 PM
.o: Hepatitis C class action
Subject: On behalf of my father [redacted] - DOB - Dec. 12, [redacted]

Good evening Mr. Strosberg,
I am in receipt of your letter regarding consultations with the Joint Committee in the implementation of the 1986- 1990 Hepatitis C Settlement Agreement. Sincere thanks for allowing us the opportunity to provide feedback. This speaks volumes about your care and concern for those affected and impacted by the tainted blood scandal and all those who today continue to feel the impact of contracting Hepatitis C.
My father was one of the class action lawsuit claimants through your office back in 88. He did receive a part of the settlement and for this we are thankful. My father has had years of medical conditions as a result of the Hepatitis C infection. Today he is 88 years old – thank God he is still will us – but now as a result of the Hepatitis C infection and years of carrying this infection he is now battling Liver Cancer. As you know there is a direct correlation between the Hepatitis C infection (Liver) and the possibility of contracting Cancer.
We are now battling another illness.
It is my opinion that these innocent people are rightfully deserved some of the surplus settlement. Their lives have never been the same. My dad has never been healthy – constantly in and out of hospitals – one issue after another and now battling Liver Cancer at this age. It is incredibly challenging for someone his age to now have to fight to beat this illness.
If we are asked for our opinion, my family believes that they are rightfully owed funds for pain and suffering all of these years since the original settlement. It is our hope that you continue the fight you began on their behalf. We are extremely thankful for your tenacity and work in the original lawsuit and would hope that you continue to advocate for their rights yet again this time around.
I would be pleased to complete any necessary paperwork or have a discussion by telephone with you in this regard to answer any further questions that you may have.
I question why did the Government hold back such a large sum of money in this class action lawsuit. It seems that once again the patients and those suffering from this have perhaps been overlooked while millions of dollars in surplus have been sitting in a bank somewhere collecting interest.
I would welcome your feedback and response.
Sincere thanks again for all you have done on behalf of these claimants. Your work is honorable and we are most grateful.
Sincerely

[redacted]

"We were born to make manifest the glory of God within us. It is in everyone, and as we let our own light shine, we give other people permission to do the same". Nelson Mandela

1322704

Sonya Robinson

From: [redacted]
Sent: Wednesday, August 05, 2015 11:39 AM
To: Hepatitis C class action
Subject: Re Surplus

Attn JOINT COMMITTEE,

My opinion is that the surplus be used to extend the benefits past the age of 65 since many people do not retire at 65.

[redacted]

1322787

RECEIVED
AUG 14 2015

SUTTS, STROSBERG LLP

August 6, 2015

[redacted]

[redacted]

Mr. H. Strosberg, Q.C.
Sutts Strosberg LLP
600 – 251 Goyeau St.
Windsor, ON
N9A 6V4

Dear Sir:

Subject: Hepatitis C. Settlement
Surplus

I am in receipt of correspondence requesting input from Class Members and Family Class Members on the Hepatitis C settlement surplus.

Please accept this submission on behalf of my mother, who is in a long term care facility and for whom I am Power of Attorney for personal care and finances. Additionally, I have discussed this matter with my youngest child [redacted] who resides in Alberta and has requested that I convey his thoughts to the Committee.

Simply put it is the opinion of myself and son [redacted] that the surplus be divided between the members of the settlement or their estate at a rate to which the initial payout was made. This means that those infected, their spouse, children, grandchildren or the estate of these people would receive a portion of the surplus at the percentage of how they were originally compensated.

It seems to me that the surplus should be used to directly compensate those affected by this tragedy. My mother's payouts under her chosen option ended years ago. At that time they were helpful in improving her quality of life and giving her a bit more peace of mind for her financial situation. Any additional payout to her would help maintain or improve her current care level within the long term care facility.

Yours truly,

[redacted]

Shelley L. Woodrich

From: [redacted]
Sent: Thursday, August 06, 2015 7:09 PM
To: Hepatitis C Class Action
Subject: Submission to joint Committee

I would like to see the surplus or at lest part of it used to support my brothers widow for the rest of her life.So I think the widows of people like my brother should be looked after for the rest of their lives.They are the ones hurt the most.

[redacted]

R. Gary McLister, B.A., LL.B.
BARRISTER AND SOLICITOR

Suite 400 - Westcourt Place
251 Goyeau Street
Windsor, Ontario
N9A 6V2
24 HOURS
Telephone: (519) 258-7975
Facsimile: (519) 977-1158
e-mail – gary.mclister@gmail.com

August 7, 2015

RECEIVED
IN RECEPTION
AUG 06 2015
SUTTS, STROSBERG LLP

Harvey Strosberg Q.C.
Sutts Strosberg
Barristers & Solicitors
600 – 251 Goyeau St.,
Wiondsor, Ontario.
N9A 6V4

Dear Sir/Madam:

RE: [redacted]
RE: HepC Settlement Agreement (1986 -1990)

The writer represents [redacted] a HepC sufferer and member of the class. The form letter regarding the surplus in the fund was sent to this writer and I contacted [redacted] As he did not receive it directly, I expect the Joint Committee does not have his current address. It is:

[redacted]

[redacted] would welcome receipt of additional monies. He still lives with the HepC effects, now at the age of 70 years. My client does not know, and I cannot tell from the correspondence, what specifically you are referring to when the letter refers to "areas of settlement that you feel fall short and how you think the surplus should be used." Additionally, this writer does not know what interest the federal government has in the fund.

[redacted] believes the surplus ought to be distributed to the class members, the HepC sufferers like himself. By now the class ought to be fixed. The fund has accumulated for 25 years. It ought to be helping the HepC sufferers that the fund was set up to help. My client's position is that any surplus ought to be distributed equally among members of the class. Distribution of the surplus to surviving class members and their families of deceased class members can only assist them. He always felt there ought to be a pension or annuity program.

In any event your advice is requested. Kindly provide an explanation as to what issues, areas of settlement, the form letter is addressing. The writer believes more detailed information would give context. [redacted] reserves the right to reconsider and make further submission if the information requested below changes his view. We await your response.

Yours truly,

R. Gary McLister

RGM

From: [redacted]
Sent: Friday, August 07, 2015 10:26 AM
To: Hepatitis C Class Action
Subject: hep c input surplus

My husband contacted hep c through a blood transfusion in 1989 . He was forced to live with hep C the rest of his life . I think the surplus should be divided between the people affected by hep c and their surviving family members . For everything he and his family went through.

My husband is [redacted], date of birth July 10, 1920 ., past away Jan 2003 .

Thank You for taking the time to ask for everyone's input.

[redacted]

Sonya Robinson

From: [redacted]
Sent: Saturday, August 08, 2015 11:20 AM
To: Hepatitis C Class Action
Subject: HEPC Input - Northern Ireland

Dear Mr Strosberg,

I represent two of what I presume are "family class" members whom your firm have recently written to in [redacted] concerning the HEPC Class action. I have been appointed because of the death of the previous lead contact. As a result I am not as well informed regarding the subject matter but do have an outline of it all from when you were in prior contact.

My family's involvement is through my uncle [redacted] who emigrated from Portadown to Edmonton, Alberta in the late 50's. You had previously been dealing with my eldest surviving uncle [redacted] of [redacted], [redacted] He passed away in April 2011 and is survived by his daughter [redacted] his wife [redacted] and son [redacted] having predeceased him. His obituary can be found here.

My mother is the youngest and only surviving member of the [redacted] sibship: she is [redacted] of [redacted] [redacted] (please note that the address you currently hold for her requires a correction on the word [redacted]"). You will know from your records that she was previously married to [redacted] who passed away in September 1965. I am the third son of that union.

I realise that you may require a more in depth scrutiny of my identity but am in the position to provide whatever you may need, not only though my own efforts but also those of my mother and cousin. In the interim I can only ask questions and trust you will provide the answers to both parties, in addition to (I presume) the other three cousins currently resident in the UK whose parents are deceased. That is, the children of [redacted] and [redacted] (née [redacted]). Should you find you have difficulties I am happy to act as intermediary until such times as you have direct contact with them.

I am given to understand that the matter at hand is that my Uncle [redacted] was given contaminated blood which led to his premature death; that he was one of an unspecified number of diabetics in Canada who were affected this way. Your law firm took a class action on behalf of my uncle's union and were successful in your prosecution of the guilty party. This led to the establishment of a fund which provided compensation to those who were affected and survived and to the relatives of those who didn't.

Upon examination of the Phase 2 Sufficiency Schedule document which you have provided to both my mother and cousin it would appear there are surplus funds which you, as trustees, wish to disseminate and you are seeking suggestions from survivors and relatives as to how this should take place. Therefore let it be known that the two people I represent feel they are too distant from the effects of the tragedy to become involved or make suggestions as to the dispersal of funds. They are beneficiaries only because of [redacted] death but as he hadn't returned to his homelands for forty (plus) years the impact was somewhat reduced, especially given that only my mother now remembers him in person.

Therefore there is no input from those members of the extended [redacted] family whom I represent. We would however appreciate you acknowledging the changed circumstances particularly as my mother is now in her 83rd year, suffering from age-related illness and my cousin [redacted] has suffered ill health to the point where she is having difficulty conducting her own affairs.

Yours sincerely

[redacted]

Sonya Robinson

From: [redacted]
Sent: Sunday, August 09, 2015 4:53 PM
To: Hepatitis C Class Action
Subject: Hepatitis C Settlement Surplus

Dear Sir or Madam,

I am one of the Family Class members who recently received a letter regarding the surplus in the 1986 to 1990 Hep C Settlement trust fund. I wanted to let you know that my mother, who is also a Family Class member, did not receive this letter. She moved since receiving the initial settlement amount a number of years ago, and I am wondering if that is why she did not get the letter in the mail. Here is her current contact information:

[redacted]

Her previous address was [redacted]

If you have any questions or require any further information, please don't hesitate to contact me. I would also like to add that I feel the surplus should be divided in its entirety and allocated to both the Class and Family class members.

Sincerely,

[redacted]

1323871

Sonya Robinson

From: [redacted]
Sent: Sunday, August 09, 2015 2:54 PM
.o: Hepatitis C Class Action
Subject: Hep C Jan1/86 to July 1/90 The Late [redacted]

My name is [redacted] and I am the widow of the late [redacted]

I am in receipt of the most recent notification letter concerning a surplus of funds held in trust for those surivors of the tainted Hep C blood transfusions as governed and distributed by The Canadian Red Cross.

It has been 18 long, lonely years since my [redacted] died. How I do miss my husband and this letter has only refreshed my memories of what was and my hopes for what could have been.

The irony of this sad situation is that my beloved husband survived the enemies and the horrid conditions he fought in during WWII, only to be felled by an enemy no one could ever have imagined was coming on our home soil and that was the lack of integrety and due diligence by the Canadian Red Cross.

This should never have happened and all the money in the world can not compensate us survivors of this gross case of misconduct! Hep C detection tests were long in use before this tragedy happened which makes this situation even more intolerable.

In my opinion, and as a long suffering survivor of this tragic situation, I feel that the surplus of funds should be distributed equally amongst all of the immediate survivors who have lost their family members due to the tainted blood. If these people desire to use the funds to set up grants in their deceased loved one's name, or use it to assist in their daily lives, it is THEIR decision.

Further , the notice says the funds may be held in a trust fund, but my question is for whom is this trust fund being set up for? Again, it is those survivors living now who should be given the surplus funds as we are the ones who have suffered the most damage. I thank you for your attention herein. Should you wish to discuss this matter further, please do not hesitate to contact me by return e-mail. If you wish to submit my comments to the court, you may do so with my permission.

Yours truly,

[redacted]

Spouse of the Late [redacted]

1323863

Sonya Robinson

From: [redacted]
Sent: Monday, August 10, 2015 8:09 PM
To: Hepatitis C Class Action
Subject: RE: Attendance of August 26th Hamilton Meeting

First and foremost, they should be considering dispersing the overages to class action members themselves? Let's not forget, that an initial award given to HIV infection class action members, was revoked from class action members who agreed to receive the Hep C class action award. I feel that this "reneged" reward should be reimbursed to every individual who it was revoked from. After all, they were two individual and separate claims with two individual and separate rewards for two very different and separate diseases. Just because they were tragically inflicted upon the same unfortunate individuals by the same offenders, doesn't mean that the awards should be considered one in the same. I often equate it to someone walking down the sidewalk when suddenly, a drunk driver comes along in their car, jumps the sidewalk, hitting the pedestrian and injuring them causing them to be paralyzed for life. A court of law orders the drunken driver to award the now paralyzed person compensation for their error. Imagine if a year later, the same unfortunate individual is travelling down the same sidewalk, only this time in a wheelchair, when along comes the same drunk driver, driving a different car, jumps the sidewalk and crashes into the person in the wheelchair. This time, unfortunately taking their life. How unbelievable it would be if the beneficiaries we're told they had to give back the initial award for the previous injustice before being awarded a settlement for injury causing death. The two instances were different requiring two different charges and two different awards. Unfortunately, the Hep C class action judgement, forced anyone making a claim to pay back the award for the initiall HIV claim that 'paralyzed' the individual upon the first impact. Apperently, the award was given for the initial impact and had to be paid back from any HepC compensation since the individual had now been killed by the same person in a different car! What sense does that make?!

In any case, the excess funds should be divided amongst all eligible class action members with compensation payment weighted more heavily towards claimants where the infected individual is now deceased as a result of infection. It would then be the chosen right of each class action member individual to determine what they choose to di individually with their portion of the disbursement.

Thank you.

[redacted]
Cell: [redacted]

[redacted]

[redacted]

From: [redacted]
Sent: Monday, August 10, 2015 3:30 PM
To: Hepatitis C Class Action
Subject: Attendance of August 26th Hamilton Meeting

Please note that I WILL BE attending the August 26th HepC Meeting in Hamilton.

Thank you.

[redacted]

C: [redacted]

Sonya Robinson

From: [redacted]
Sent: Monday, August 10, 2015 9:31 AM
To: Hepatitis C Class Action
Subject: Surplus Funds / Hepatitis C

I just received you letter on the Hepatitis C Settlement, in which you have asked for input on the surplus of funds. I would like to suggest to the Joint Committee, that a 75% portion of the trust fund should be passed along to the surviving, direct family members.
Thanks for the opportunity to give my input.
[redacted]

Sent from Windows Mail

1323874

Sonya Robinson

From: [redacted]
Sent: Monday, August 10, 2015 2:12 PM
To: Hepatitis C Class Action
Subject: Re: Hepatitis C Settlement Agreement

Yes it was intended for [redacted] and his sibling was [redacted] his case # 15727
Keep us informed of the up coming events regardind this Hepatitis C Settlement

Thank You

[redacted]

-----Original Message-----
From: [redacted]
Sent: Friday, August 07, 2015 3:17 PM
To: Hepatitis C Class Action
Subject: Hepatitis C Settlement Agreement

I am writing this on behalf of his sibling [redacted] (He is not a computer person) [redacted] only had 1 sibling and that was [redacted].

I received the letter the other day about the Joint Committee wanting to hear from Class Members or Family Class Members.
My brother-in-law [redacted] passed away Feb 26 1993.
He was only 50 and died way to young because of the Hepatitis C infection. I think the money should be disturbed amongst the Class Members and Family Class Members.
[redacted] suffered a great deal with this and was hospitalized many times. We still miss him very much. His claim #is 15727 Please keep me informed of what is going on with this. I in turn will be keeping an eye on the consultation sessions on the computer

[redacted]

Mr. Harvey Strosberg
600-251 Goyeau Street
Windsor, Ontario
N9A 6V4

August 10-2015

RECEIVED
AUG 13 2015
SUTTS, STROSBERG LLP

Dear Mr. Stroyberg,

A few days ago I received a Private letter from Ottawa. At first I was wondering what to do with it. But after reading it what they wanted to do I decided to forward my opinion as well.

Some years ago I found out that I had Hepatitis C (May-2003). I received a blood transfusion in January of 1988. So as you can see I have been walking around with this bad blood for 15 years without knowing it. Throughout these years I suffered various problems. Even today after my operation my problems are not over yet. So with this in mind I am sure I am not the only one that has been suffering various problems through these years.

If I take every thing into account what I when through it would be nice if whatever ever is left should be **equally be divided** among every body that put in an application and was able to proof that he or she had in fact Hepatitis C. And I assume the money also should be **equally be divided** for how long they have been suffering. Common sense should also tell us that those who received Hepatitis C 20 years ago should receive more than those that received it only 5 years ago. I also assume that you also will take all the people into **consideration that have died as well**. Sincerely yours.

[redacted]

[redacted]

[redacted]

August 10/15

Harvey Strosberg Q.C.
600 - 251 Goyeau St.,
Windsor, Ontario, N9A 6V4

RECEIVED
AUG 19 2015
SUTTS, STROSBERG LLP

Dear Sir :-

Re:- 1986-1990 Hepatitis C Surplus
- Joint Committee Members

I, as a recipient of compensation due to Infection by Hepatitis C, and also due to tainted blood, am putting forth some ideas re what to do with the surplus.

Hep. C altered the lives of all of us infected, going under treatments and changes in our lives in many ways.

I was fortunate enough to survive Hep C., treatment and the damage to my liver, but many did not, leaving family to cope.

I will not die from Hep C as I now have multiple myeloma, and receiving chemotherapy for life.

I am not sure of what compensatio Others are receiving, however, if my wife survives me, will she continue to receive yearly payments for loss of services in the home? or under a different reason.

2.

Having asked that, my suggestions re what to recommend to the judge re surplus are:-

1. Regardless of end of life causes of compensation recipient(s), the spouse/children may continue to receive his/her compensation yearly, as long as he/she lives? or lives independantly?
2. All or most of the surplus could be put toward bursaries for children/families of victims of hep. C.
3. Children in need for any reason, (of Hep. C. victims/recipients of compens. e.g. illness, addictions etc. or as result of hep. C.
4. Keep most or all surplus in the trust fund as once it is gone from the fund, it is gone.

Yours Truly

[redacted]

[redacted]

AUGUST 10th 2015

MR. HARVEY STROSBERG Q.C.

SUBJECT: HEPATITIS C.

I AM IN RECEIPT OF LETTER REGARDING HEPATITIS C FROM: PO BOX 2370
STATION D
OTTAWA, ONTARIO, K1P 5W5
RECEIVED AUGUST 1, 2015.

I RECEIVED APPROX. 8-10 PINTS OF BLOOD NOV 27 1986 AT THE DARTMOUTH GENERAL HOSPITAL NOVA SCOTIA.

ACCORDING TO MY DOCTOR RICHARD FELDERHOF (RETIRED) NEW GLASGOW IN 1998, 2 PINTS PROVED TO BE POSITIVE

THIS WAS CONFIRMED BY DR. PELTEKIAN, LIVER CLINIC, VICTORIA BLDG HALIFAX NS
FAX # 473.2894.

MY PRESENT DOCTOR PETER LEE HAS ME SCHEDULED FOR COMPLETE BLOOD WORK YEARLY (DUE LATTER PART OF AUGUST, 2015)

WITH RESULTS FORWARDED TO:
DR PELTEKIAN - LIVER CLINIC, HALIFAX.
FAX # 473-2894.

2

I HAVE ATTEMPTED OVER THE YEARS TO SEEK PROVINCIAL COMPENSATION, HOWEVER, WITHOUT SUCCESS.

I INFORMED THE N.S. GOVERNMENT, THAT, I BELIEVE "ONLY 3 PROVINCES HAVE COMPENSATED SUBJECT "HEP. C" RECIPIENTS."

QUEBEC ONTARIO BRITISH COLUMBIA

IN THEIR REPLY, IT APPEARED, THAT THE N.S. GOVERNMENT HAD NO INTENTION OF COMPENSATION AS THE FEDERAL GOVERNMENT WAS TAKING CARE OF THIS MATTER.

IT HAS TAKEN A TREMENDOUS STRAIN ON ME AND MY FAMILY, ESPECIALLY, WHEN I CANNOT KISS MY GRANDCHILDREN.

I AM ALWAYS ON GUARD WATCHING FOR ANY SORT OF BLEEDING. (SHAVING, NORMAL CUTS)

I INFORM LAB. TEC AT THE BLOOD CLINIC TO BE CAREFUL, AND, I SEE OSTOMY NURSE MONTHLY WHO IS AWARE OF MY "HEP. C".

I WOULD APPRECIATE YOUR EFFORT ON MY BEHALF FOR ADDITIONAL MONEY.

YOURS TRULY

[redacted]

Sonya Robinson

From: [redacted]
Sent: Tuesday, August 11, 2015 7:45 PM
To: Hepatitis C Class Action
Subject: #2142 - Hep C Settlement

Hello,
If you receive this email and it identifies me in any way other than my claimant number please delete, also please delete the previous email that I had sent, as it has my name on it.

I have given the surplus a lot of thought, and the questions that you have given back to me have made my decision harder to make. First of all I thought it should be divided up equally, as it would be very complicated to divide as there are so many factors that could be given consideration.

I have no idea how many class members there are, and I also had no idea that there is a level of disease where the virus isn't even in the blood! So I think the surplus should be given to the class members, with the amounts being divided amongst the different levels of the disease, with the highest levels receiving the most. Having said that, please keep in mind that these people are already being looked after, and the level 3 and level 4 disease levels should also be entitled to the surplus.

Sent from Windows Mail

1325111

[redacted]

From: [redacted]
Sent: Thursday, August 06, 2015 9:47 PM
To: Hepatitis C Class Action
Subject: Re: 1986-1990 Hep C Settlement

Hi,
So sorry about not understanding about the surplus, I do have a few additional comments.
You must confirm that these emails will be kept confidential, and my name will not come up in any public hearings. This is very important to me. If you are unable to keep these confidential, please disregard the first email and this one as well. This is something that I have kept from my family and friends, and the only other person that knows is my husband.

The question that you came back with is a hard one to answer. If its decided that the surplus payments would be divided, based on different factors, I think it would become very complicated and hard to distribute. For example, there is a new drug out now to treat the disease, Harvoni, so many of us are on the drug right now. If taken properly, there is a very good cure rate. But what about if the individual isn't responsible to take the prescribed dosage every day? Or decides to quit the therapy half way through? Would it be fair to pay that individual and not pay the ones that have taken the drug responsibly? Would it be fair to pay the ones that haven't had a good lifestyle, maybe alcohol or drug related, and there disease worsens? There are so many

132383.

different scenarios on why I think that it would be very hard to divide according to different factors. That is why I think the surplus should be divided equally among the class members.

To the best of my understanding the class members will still receive what they are entitled to according to their disease level, and will still be taken care of. But the surplus is something that should be distributed equally, as we have all suffered from this disease. To try and figure out a way to pay the surplus to the class members based on different factors, in my opinion would take years to figure out.

Sent from Windows Mail

[redacted]

From: [redacted]
Sent: Tuesday, August 04, 2015 9:01 PM
To: Harvey T. Strosberg Q.C.
Subject: 1986-1990 Hep C Settlement

Hello,
In regards to the email that was sent to the class members, I would like to share my thoughts on the surplus of funds that has been announced.
I feel that the surplus should be shared amongst the class members, and the Settlement be closed. Its 25 years old now, and I think its time to share the funds that are remaining and end the settlement. I understand that there could be costs in the future, that would be up to each individual to allow for some of the funds paid out to cover the costs.
I think we all have been through a lot over the past years, if not physically, then definitely mentally, as this has always been a difficult thing to live with for a number of reasons. There may be circumstances where illness may occur in the future and this virus would potentially limit the treatment or drugs that would be required. For these types of circumstances the settlement would not be responsible. For some of us that haven't been healthy, it might give us a chance to retire a little sooner or live a better quality of life. Otherwise how long will the money be kept? Long enough so that no one who has gone through this will be around to benefit from it?

I don't mean to sound greedy or selfish, I am just trying to be honest on how I feel the surplus should be handled.

Best Regards,
[redacted] #2142

Sent from Windows Mail

Sonya Robinson

From: [redacted]
Sent: Tuesday, August 11, 2015 3:02 PM
To: Hepatitis C Class Action
Subject: 1986-1990 Hepatitis C Settlement

This Letter is to confirm how Id like my surplus should be used.
My name is [redacted] and Ive contracted Hep.C through a blood transfusion when I was 14 years old during my first open heart surgery. Since then Ive been doing well until I reached the age of 22 that is when I actually found out I had Hep.C I was in the hospital for 3 months getting tests done that is when they told me I had Hep.C. I've gotten compensation a few times I was told I'm at a level 4 they gave me a liver biopsy but I was not compensated for it. Since then my liver has been bothering me alot my kidneys as well I cannot get pain killers because of my blood thinners. But to answer your question about how id like the settlement to paid my opinion is that id like to paid in one lump sum. I will be the one to make the arrangements for trust funds myself because I need funds at the moment and I also provide payments to my kids mothers every month. I also need a home as of right now I have no home and I am almost bank ruped so this money would be spent very well also I will be setting up accounts for my family members as well.
I thank you for taking the time to read my letter Yours Truely [redacted]

1324624

Aug 12th, 2015-08-12

Mr. Harvey Strosberg Q.C.
Sutts Strosberg LLP
600 – 251 Goyeau Street
Windsor, Ont. N9A6V4 Email :hepc@strosbergco.ca

I am writing concerning the letters we received regarding the - 1986 – 1990 Hepatitis C. Settlement. We received 5 letters, 2 to [redacted] 1 to [redacted] and 1 to [redacted] – both names are my wife – [redacted] and 1 letter to the Estate of [redacted] our son address to [redacted]
We had 2 sons who died from H.I.V. and Hepatitis C. [redacted] (single) died in 1992 and [redacted] in 1997. (18 years ago today) He was married to [redacted] I believe we have met back in the late 1980's – 1996 as you were working for us on the Family Class Action at that time.
We did not realize that there was a continuing Trust Fund set up. It is also hard to believe that there is a surplus of about $240 million. We agree with the Joint Committee to the Courts that the surplus should be allocated in favour of the Class Members and the Family Class Members providing that a portion of the surplus be left in the Trust Fund.
The question I have to ask, are we involved in the Estate of [redacted] or just [redacted]? Did [redacted] wife [redacted] also receive notification of the Hepatitis C surplus or is this private?

You can email us a [redacted] or phone us at [redacted] if you can answer the above concerns or if you want any more information.

Please reply if you receive this email

Thanking you in advance,

Sincerely yours – [redacted]

RECEIVED
AUG 17 2015
SUTTS, STROSBERG LLP

August 12, 2015.

[redacted]

Dear Mr. Strosberg,

I am a Family Class Member of the 1986–1990 Hepatitis C Class Action settlement. I was the spouse of the late [redacted] and the executor of his estate, since Hepatitis C materially contributed to his death, I, the Personal Representative and Family Member/Dependant, received the compensation for his death. I am presently receiving the loss of services for his death.

I firmly believe that any money that is deemed surplus should be allocated to the family members with the spouse receiving the most. The spouse should either get a lump sum or loss of services until he or she dies.

Yours truly,

[redacted]

[redacted]

August 12, 2015

Harvey Strosberg Q.C.
Sutts Strosberg LLP
600-251 Goyeau Street
Windsor, Ontario
N9A6V4
Email: hepc@strosbergco.com

RECEIVED
AUG 19 2015
SUTTS, STROSBERG LLP

RE: Surplus funds in Trust Fund – [redacted] 1000691

Dear Mr. Strosberg,

I went on treatment so I may better my liver enzymes to have a longer life. It took me over 3 years to get on my feet after treatment concluded in Jan 2002. Yes, I was compensated at Level 3 and my expenses covered, It will be 29 years since I received the blood transfusions infecting me with Hep C in September at the birth of my son.

I really feel that the compensation fell short when I ended treatment, I was not able to go back to work for 10 months. Compensation should have continued until my return to work.
My family (and I had young kids at the time) supported me mentally and physically for the 3 years as I recovered, they watched me go through major depression, various health issues and stress of rebuilding myself. To this day, symptoms occur that can only be concluded as a side effect to the Rebetron treatment.

If the surplus is granted and is to be distributed to Class members and family, I would like it to be considered that more funds be granted to the lower levels 1, 2 and 3 compensation recipients. Hep C will not be cured 100% and I took the opportunity to take the Rebetron treatment and its side effects and I have to identify the fact that I am a carrier of Hep C at any medical appointment, surgery, etc., it will always live with me. The decisions made at the time to purchase this blood should not be taken for granted and the infected members should be compensated to the fullest amount possible.

I am attaching a letter that I sent to the Board in Oct 2002 and again in 2003 for review.
Thanking you for your time and support in this matter. Good Luck at the hearing.

[redacted]

[redacted]

January 29, 2003

Claim #1000691

Dear Sir:

I submitted a letter in October 2002 regarding review for infected persons of Hep-C. As mentioned in my letter (copy attached), the side effects I was left with after going on Rebetron treatment, I was asking if there would be any compensation for this.

I was hoping for some confirmation that yes my letter was received, will it be reviewed, or is there no answer to this inquiry.

I am anxiously waiting for a reply.

Thank you,

[redacted]

[redacted]

Claim #_1000691

I am writing in regards to my being a Hep-C infected patient from a Blood Transfusion received September 23, 1986.

I have completed a 12 month treatment program of combination drug Rebetron (Jan 2001-January 2002). This medication has left me with many side effects.

1) I finished the treatment on January 4, 2002. I had worked during the 12 months of treatment. After completing treatment, I become very stressed out, tired and suffered major depression and could no longer work. The last day I worked was January 16, 2002. I returned to work on Tuesday, October 1, 2002 after many months of counseling and rest to rebuild my health.

2) My blood work showed changes in my thyroid. I saw a specialist in September 2001, he concluded with the Rebetron treatment it was affecting the thyroid and to wait until after treatment was completed, if any changes would occur. My thyroid count has constantly changed and after 10 months, the counts are still increasing which means I now have to go on medication for my hyper-active thyroid.

I went on treatment so I may better my liver enzymes to have a longer life. I cannot believe that there is no continued compensation to infected persons who are willing to go through such a terrible treatment and be left with more medical conditions after the concluding coverage for while on treatment compensation.

I truly feel it is important that the Compensation Board of Hep C review this treatment, its side effects and compensate the infected persons during the recovery period and for continued financial compensation for the side effects left, that need to be medically cared for the reminder of life.

I thank you for your assistance and I hope that this may be reviewed as soon as possible.

[redacted]

August 12 2015

Dear Mr. Strosberg

As a Family Class Member re: 1986-1990 Hepatitis C Settlement Agreement; I received in the mail information regarding a surplus in the Trust fund. I was instructed to submit a reply to the joint Committee member in my area with my input on this matter. I totally agree with the joint Committee that the surplus be allocated in favour of Class Members and Family Class Members.

Since I do not have an E-Mail address; any information or correspondence to me will have to be done by mail or telephone and very much appreciated

Yours Truly

[redacted]

RECEIVED
AUG 17 2015
SUTTS, STROSBERG LLP

To: Harvey Strosberg

Sutts Strosberg LLP

600-251 Goyeau St.,

Windsor, ON N9A 6V4

Re: Trust Fund Surplus.

Please be advised that I would like all of the Trust Fund Surplus be allocated in favor of Class Members and Family Class Members as opposed to keeping it in the Trust Fund.

What is the value of creating another level of beaurocracy to deplete benefits which all Class Members, regardless of their financial situation are entitled to.

The psychological and physical damage caused by this dilemma should be compensated as long as possible, and in some way the Surplus would help by using these funds to ease our predicament.

Thank for looking into this matter for all of us.

[redacted]

08/12/2015

Harvey Strosberg Q.C.:

I am writing to request an extension to the Hep 'C' deadline. I appologize for being late in submitting my application. I was late because I didn't understand the application and I didn't have a Doctor for many years, until in 2010, when I finally got a Doctor and then was introduced to my Hep 'C' nurse (Beth McLelland) Even though I was late, Beth helped me to fill out the application and then I submitted it.

Hep 'C' has affected ~~my~~ me quite drastically. I've been unable to work for the last five years and I have undergone two lengthy treatments so far. Both were unable to rid this virus from my system. These treatments have negatively affected my sight, skin, digestion etc. →

In these five years, I look like I've aged at least ten years

I am presently undergoing my third treatment (Harvoni), and I'm hopeful that this time it will be Third times the charm and not Third time and I'm out!

Sincerely

[redacted]

Shelley L. Woodrich

From: [redacted]
Sent: Wednesday, August 12, 2015 7:33 AM
To: Hepatitis C Class Action
Subject: submission joint committe members

Aug.12/15

[redacted]

Dear Joint Committee Members:

On behalf of my brother [redacted] March 15 1953-March 20 2011 who passed away far to soon as a result of blood he received from the Canadian red cross. [redacted] always felt the trust fund that was being withheld should have been given to the unfortunate people like himself that had to live with as he called it a time bomb.. My brother went from livng a gainful healthy life, to living on disability, and dying a terrible death.

I will not be attending any of the upcoming consultation sessions, although if my thoughts were to be any kind of help to the unfortunate people living Hep, c I would suggest the trust fund be given to the victims and their families , was that not the original intent of this surplus???????

Thank-you

[redacted]

[redacted]

To: The Hep C 86-90 Joint Committee

Re: Input on Allocation of Surplus Funds

August 13, 2015

Many thanks for asking class members for our input on the proposed allocation of the surplus of funds relating to areas of the settlement that fall short for us.

I appreciate this opportunity to share some of my story, so the human side of Hep C has a voice and a face. In 2001, at age 52 I suddenly lost 40 lbs. in a short three-month time period and was so ill and weak, that I could no longer even walk up a flight of stairs.

Finally, I was diagnosed with Hepatitis C, as it turned out, from a blood transfusion I had received in 1986. In so many ways, my life was about to change.

I'd been self-employed for many years before this and yet here I was barely able to make it through a day and most days unable to even leave my house. I certainly couldn't work, as I was too weak and malnourished. I was a single mother and had my daughter and elderly mother to be concerned about as well. Things appeared bleak, however, on the suggestion of my doctor, I applied for the Loss of Income supplement through the Hep C 1986-90 settlement and set out to find ways to improve my health.

I truly believe it is because of the Loss of Income supplement I've received, that I have been able to regain my health to the level it is now. It offered security as I navigated through unknown health territory. It has taken over a decade plus, however, I am now living my life by contributing to others through my writing and by sharing my life experiences.

My liver specialist has been incredibly supportive and recently gave me a very big compliment when he said, "I don't have any patients like you, [redacted] You are very disciplined about your health". He was exceedingly pleased with how well I continue to do despite the dire prognosis I had been given almost 14 years before.

Because I am now 65, my Loss of Income supplement has come to an end, and a very meager loss of services supplement is the only thing available in its place. As well as I am doing, I still have days of extreme tiredness and fatigue, and of course I still suffer from the illness, as Hep C remains with me for life. Although I feel fortunate to be doing as well as I am, I am still dependent on the Loss of Income supplement that has now been cut off and do not know how I will support myself without it.

This dramatic decrease in my yearly support, is already taking its toll on my health. The stress of not knowing how I will support myself and my health in the long term, has me lying awake at night unable to sleep.

Although I understand and acknowledge that the settlement agreement was created when mandatory retirement at age 65 was law, this is no longer the case, and it is not uncommon in the greater population of the world, that more often than not, people work long past the age of 65. Mostly out of necessity. This is just the nature of the world we live in today.

I am writing this not only on my behalf, but also for all other claimants who may be in a similar position that I find myself, cut off from the financial foundation and support at an age and time in our lives when we need it more than ever!

My request for the Joint Committee is to consider allocating surplus funds for essential long-term Loss of Income support past the age of 65, for life, for myself, and all of us who are considered success stories and are still here, despite the odds stacked against us.

Many thanks for your support and consideration.

Sincerely,

[redacted]

[redacted]

Sonya Robinson

From: [redacted]
Sent: Thursday, August 13, 2015 9:41 AM
To: Hepatitis C Class Action
Subject: Class action member

Hello,

My name is [redacted] and I am writing for my input of the class action lawsuit for the hep C class action. In 1987 I was infected when my mother was pregnant with me and had a blood transfusion with the tainted blood. I have lived with this illness my entire life and it has caused on and off depression. I am finally now cured and think that 100% of this surplus money should come to us, the class action members as we are the ones 100% having this effect our lives for someone else's mistakes.

1326342

Aug 14-2015

To Whom It May Concern,

After recieving your letter 7-31-15 re Late claim filing.

I am sending my first file #1000 853 along with this Letter.

Sons and daughters should not have to wait this length of time for their benefit unexkptable. This has gone on far to long.

Pay out the money for late files and close this chapter of something terrible that has happen to my brother [redacted] who died Nov 9-2004 so we all can move on.

Thank you in advance

[redacted]

RECEIVED
AUG 17 2015

November 11, 2013

[redacted]

Class Action Counsel for Ontario
Harvey T. Strosberg, Q.C.
Sutts Strosberg LLP
Hep-c@strosbergco.com
Fax: 866-316-5308

RECEIVED
AUG 1 7 2015

Dear Mr. Strosberg:

I am the sister of [redacted] who contracted Hepatitis C, through a blood transfusion. [redacted] has since passed away, but his wife, [redacted] did submit a claim for compensation, Claim Number 1000853. [redacted] came to me on April 12, 2012 to inform me that I would be able to submit a claim as a family member. [redacted] had also learned of this claim late but has since been compensated. At the time [redacted] had suffered from encephalitis and was very sick from this. I feel that this maybe contributed to the fact that her claim was late, and because of this family members were late in being told of the fact that they could submit a claim for compensation.

Once I was notified, April 12/12, that we were entitled to make a claim I contacted the claims centre in Ottawa immediately, which they then sent out a form for me to fill out and submit back to them, which was sent back to Ottawa, on April 18, 2012, to The 1986-1990 Hepatitis C Claims Centre, P.O. Box 2370, Station D, Ottawa, Ontario, K1P 5W5.

I was very close to my brother [redacted] and feel that I should be compensated as well. I trust that this will answer the reason why I should be entitled to a late claim and compensation.

Sincerely,

[redacted]

Aug 15, 2015
HARVEX Strosberg Q.C.
Re: 1986 - 1990 Hepatitis C Settlement Agreement

Re: [redacted]

CEIVED
AUG 2 0 2015
S, STROSBERG LLP

In response to your request for a reply as to the Joint Committee's application to the Courts for the use of the surplus in the trust fund.

We the family of [redacted] would like to see the surplus divided EQUALY and distributed to the Class Members and Family Class members or record. My father retired early due to poor health which changed Income status and retirement plans. Had Toronto General Hospital notify my father in a timely fashion of the "tainted blood" he received his healthcare treatment plan would have taken a very different path. Perhaps his last years of life would have been less painful and less riddled with endless hospital visits, tests, and procedures. We feel the original payment was not sufficient compensation to my mother.

yours Truly

[redacted]

Sonya Robinson

From: [redacted]
Sent: Sunday, August 16, 2015 11:52 AM
To: Hepatitis C Class Action
Cc: [redacted]
Subject: Hepatitis C input for [redacted]

Harvey Strosberg Q.C.
Sutts Strosberg LLP
600-251 Goyeau Street
Windsor Ontario N9A 6V4

2015 08 17

Dear Sir,

This submission is a response to the request for input re Hepatitis C and its impact upon our family.

Hepatitis C destroyed our family.

My brother, [redacted] contracted Hepatitis C and died a slow, confusing and terrifying death! He was unable to advocate for himself due to the overwhelming nature of his situation and this itself was a major element of his deterioration.
He owned and operated a family business established by his grandfather in 1937 and nurtured by his father during his lifetime. When it fell to him to operate this business he did so with pride and enthusiasm. Due to the onslaught of Hepatitis C and his ever diminishing physical and emotional state the business suffered and eventually had to be closed. That final admission of defeat preceded his death!
Hepatitis C not only led to his death it also impacted his family on a daily basis. Addressing his medical needs became the focus of his immediate and extended family. There were constant and overwhelming duties that had to be addressed - supporting his financial needs, assisting with all household needs and duties, providing transportation, providing emotional support. His mother in her eighties was totally engaged everyday with his care. She took him into her home to provide for him as she suffered from health issues herself. Due in large part to the stress placed upon her she also died while providing care for him in her home. Immediately after her death, literally within hours, we assumed responsibility for providing 24 hour care for him. This was overwhelmingly difficult for him as he was a very proud person and felt great humiliation with requiring this assistance. It was also very very difficult for us as we live 75 km away and spent the last few years of his life constantly on the road to serve his needs.
As an awful aside to this terrible situation and while my brother was undergoing this nightmare he was aware of the death of his cousin also as a result of Hepatitis C .
This snapshot herein provided represents a rather cold assessment in a very few words of a situation that no family should ever have to experience!
Emotional, physical and financial ruin.

Sincerely,
[redacted]

Sonya Robinson

From: [redacted]
Sent: Sunday, August 16, 2015 1:48 AM
To: Hepatitis C Class Action
Cc: [redacted]
Subject: Hepatitis C 1996

Hello Mr Strosberg
The request for my input concerning the 1986 - 1990 Hepatitis C Settlement Agreement has come to me here in Switzerland.

In my opinion, after 30 years, a moratorium is in order. When the search for all the victims has been completed, all the surplus must be distributed to Family Class Members only (with the understanding that Class Members are not directly affected by this tragedy) putting an end to this Class Action that brings up the pain of loss over and over.

Thank you for requesting my opinion
I miss my dad along with the people he helped all his life

[redacted]

1305201

Dear Marvey/Hep C   Aug 17/2015

My name is [redacted] I am a member of the class action with Hep C.
I'm writting in regardes to the letter I recieved in regardes to the surplus of funds
This is my opinion and story.
My husband [redacted] (Hemophiliac A)
died at the age of 36 in 1991. We had a daughter [redacted] She was 2½ when he passed.
He never got the chance to see her grow up first day of school, birthdays, christmases good-night hugs and kisses, etc etc.
And [redacted] missed out of having her father. We were just beginning to spend our lives together and had been for years before his death. But we have lost such a wonderful loving careing person with a heart of gold. Still after all these years I love and miss him everyday.
And now we have a grandson almost 2 years old, who is also a Hemophiliac (A)
And I know how much [redacted] would have loved to be around him and watch him grow
But [redacted] never got that chance. This country and government took all that away from us. It breaks my heart everyday.
No amount of money will ever replace him. I would choose him over money anyday.
But as members we fought so hard for so long for this money. This money

does not belong to Hep C. This money belongs to the victims and thier families. This is what we fought for. Why should it be kept.

The surplus should be divided and given out in one lump sum. And be done with it.

It's not thier money to keep it belongs to all those families that lost loved ones who fought for it and deserve it.

Thank You

[redacted]

[redacted]

Sonya Robinson

From: [redacted]
Sent: Monday, August 17, 2015 4:02 PM
To: Hepatitis C Class Action
Subject: follow up

Hello,

I have taken much needed time to absorb last Wednesday's Joint Committee session in Vancouver.
It was very informative and satisfying to be a part of the proceedings as I have not before had an opportunity to share my Impact Statement or lend my experience to the table, as of yet. It was good to be in the room!

This is something I am passionate about, as I feel the Joint Committee and the entire proceedings have not yet considered the impact and stress on the family unit, being infected with this virus incurs!

I liken it to an projectile explosive device hurled into the middle of the family unit, and it goes off! BOOM!
In spite of my best efforts as a devoted single parent, (it was a miracle I had children at all) I couldn't keep us together when my health fell apart. The stresses over 17 years as the virus got more aggressive, a failed treatment, and my little family just couldn't remain intact! Then the damn sprouted a leak this past winter, I almost bled out from varice rupture and I became septic with infected ascities...I was in liver failure and was assessed for transplantation! My kids couldn't take it!
My eldest found the first boy that came along and married him! I haven't seen or heard from her since her wedding May 1, 2015! My youngest latched herself onto another family and doesn't communicate with me anymore. Her mental health so fragile, she has 3 counselling sessions a week! From what I hear, my eldest also has developed agoraphobia on top of her anxiety disorder and depression! She can't even leave her own apartment as a 24 year old adult!

This virus has cost me EVERYTHING! I am ill, at the end of life, isolated, don't have a relationship with my own kids because they can no longer look death in the face, even if it is their own Mother's face! Their mental health has SUFFERED and is still suffering to the point my youngest when approached to consider writing her own impact statement, she ended up in mental health crisis! My oldest didn't even respond via email when asked to do the same.

WE REQUIRE WRAP AROUND SERVICES BEFORE ONE OF MY DAUGHTERS ATTEMPTS SUICIDE AGAIN!!!!
WE REQUIRE SERVICES I AM TOO FRAGILE TO FIGHT FOR AT THIS JUNCTURE!

Having to endure PTSD medical triggers and the demise of my little family is THE biggest challenge of my life, the deepest soul pain, soul hurt, LOSS I have ever had to endure in this life!
This is a deeper soul hurt than the loss of the cornerstone to my foundation, my own Mother, 23 years ago!
The loss of my health at 17, facing cancer torture, dying during treatment, being brought back to be infected with Hep C, to actually landing a job before being diagnosed with cancer for the 4th time and then getting fired from that job because I had cancer, won precedent in Canada in a human rights case, then to be told I had a miracle pregnancy, then being left at the side of the road because I wasn't supposed to be able to get pregnant, I'd had cancer!... I have survived being the only survivor of a multiple birth, a traumatic head injury after being bucked off a horse and smashing my head on a rock at 8 years old,, surviving being sexually molested from really little to 15, by a family "friend", surviving a traumatic metastatic cancer treatment, dying during that time, an entire lifetime of illness, infected blood and the discrimination associated with tainted

137529

blood! (No one has opened that can of worms yet.) I have had to live a secret life to protect my family from the stigma of having a live virus in my blood that is not only killing me but can also kill anyone who comes into contact with it! This is a very heavy burden to carry when I am a victim in this! There was nothing in my life style that I did to be infected by this virus! I was an unfortunate who developed an horrific metastatic cancer that almost took my life! I was an innocent and my life has not been the potential of what it could have been if I had not been infected with this insidious virus! A point to note, I have for the past 10 years been a public speaker for the Terry Fox Foundation at the various local annual events. I have been fortunate enough to be able to inspire kids with my cancer story as my 3rd treatment was from the funds the Terry Fox Foundation had generated for cancer research.

Every day I have to endure the loss of my children in my life, is more than I can manage! I WANT, NO, I MUST BE HEARD IN THIS!
Medical compensation is one thing, koodos! To make this right, respectfully, it is MORE than fair for the Joint Committee to encompass ALL that the infected person loses through the Hep C transmission not just the health aspect!

If I understand correctly, from the Joint Committee session meeting, that I might also, still be able to make a claim for `Loss of Income'. Infected at 19, suffering from PTSD, I had not the chance or opportunity to establish `Income earning potential' as I was infected before I'd had the chance to establish that earning potential. If this is what permits me to make an additional claim, I would like the opportunity to do so. Can you please inform me on how to do that.

Although my life's challenges have been almost impossible to over come, my don't you ever quit character trait has seen me through it all, and will continue to do so! I am compiling my experiences, this year, right away actually, as I will be writing my autobiography... My life story will become book form, who knows where from there...
My earning potential as a Canadian citizen has not ever had an opportunity to be fulfilled.
It is my sincerest desire to rectify that before this virus claims me!

I look forward to future communication and information from you in this matter.

Sincerely, [redacted]

Sonya Robinson

From: [redacted]
Sent: Monday, August 17, 2015 9:26 PM
To: Hepatitis C Class Action
Subject: Submission for the Joint Hearing

Dear Mr.Strosberg Q.C.

I am a Hemophiliac who acquired Hep C from a blood transfusion. I am part of the settlement group. My involvement came early in the process when [redacted] and I travelled to Ottawa to advocate for the settlement on behalf of the Canadian Hemophilia Society. We garnered media support as well as acknowledgement from opposition members, especially from [redacted]. The Federal Health Minister of the day chose not to meet with us by leaving that session of Parliament through the underground tunnel. We have come a long way.

I have been more fortunate than many with regards to this insidious disease. It cost me a year of work while on a drug trial of Interferon and Ribravirin. It contributed to my marriage break up. It was the reason why I had to leave work early. I was a school Principal and I loved my job ...

I sincerely believe that the fund surplus should be allocated to all the Class Members. It may compensate for all the suffering that has gone on that is not measured by the Settlement Steps. An equitable settlement of the surplus is justified. Apart from Members who have passed on, the hardships and suffering inflicted by this disease are unique to each individual. This cannot be measured nor should it be to establish a payout scale of the Surplus.

In conclusion, I would like to summarize my position. The Surplus should be given to all class members. The Surplus should be allocated on an equitable basis.

I would also like to thank you Mr. Strosberg for your many years of support and professional diligence.

Sincerely, [redacted]

1326636.

Sonya Robinson

From: [redacted]
Sent: Monday, August 17, 2015 12:22 PM
To: Hepatitis C Class Action
Subject: Surplus-Hepatitis C Settlement

I have received your letter regarding Hepatitis C Settlement were you ask for input on the short fall and surplus. My suggestion to the Committee would be 75-80% of the trust fund be passed onto the surviving direct family members.
Thank you for the opportunity to give my input.

[redacted]

1326405

RECEIVED
AUG 21 2015
SUTTS, STROSBERG LLP

[redacted]

August 17, 2015

Joint Committee
Hepatitis C., Class Action 1986-1990
Attn. Mr. Harvey Strosberg Q. C.

Dear Sir,

I lost my father in 2004 to liver cancer brought on by the Hepatitis C. he contracted during a heart surgery. He left a wife, two other children and six grandchildren.

The victim, or the surviving spouse, the children and the grandchildren--these are the people to whom this surplus should be allocated in each class member family.

Recently, my mother had to sell her house because she found it increasingly difficult to afford its upkeep when she was cut off from the yearly Loss of Services in the Home compensation she had been receiving.

As well, on his death, his surviving sisters also received a one-time compensation – I found that amount (I believe $5,000) to be grossly disproportionate to the compensation received by the grandchildren (I believe $500).

This surplus presents itself as an opportunity to assist those closest to the victim and who suffered or continue to suffer the greatest loss.

Sincerely,

[redacted]

Joint Committee Member
Harvey Strosberg Q.C.
re: hepc surplus fund

I am writing in response to the request for input on the surplus funds. I received tainted blood in 1988 while giving birth and feel obligated that my voice be heard. The recent death of Diane Parsons Forsyth, a woman who fought so hard for all the members, emphasizes that right.

THE MONEY BELONGS TO US AND OUR FAMILIES! Over the past 27 years I have not only dealt with the constant fear of my own body's vulnerability but also with the pain of being found out. When my boy was young I didn't want to subject him to misunderstanding parents, teachers and children discovering that I had HCV. I stopped volunteering when they made it mandatory to sign an affidavit declaring you were free of any communicable disease. My doctor informed me that I could never return to my previous workplace , which was,ironically the Canadian Red Cross, where I worked as a clinical assistant. My family was completely dismantled. My husband took on the onerous position of being sole wage earner and my fear of somehow transmitting the virus to my family haunts me . For the constant shame, change and fear I was awarded $32000. As I age and worry about the future it is my opinion that any surplus funds belong to the class action members and their families. After all, a surplus could only exist , by virtue of the fact ,because the members so conscientiously refused to abuse the system.

BUT IT IS OUR MONEY- OUR LIVES-

With great regard,

[redacted]

[redacted]

RECEIVED
AUG 17 2015

SUTTS, STROSBERG LLP

August 18, 2015

RECEIVED
OCT 13 2015
SUTTS, STROSBERG LLP

To Whom It May Concern,

Re: [redacted]
Hepatitis C Compensation of blood products between Jan 1, 1986 and July 1, 1990

I received your notice that the Joint Committee requests my input for the disbursement of the surplus funds. I feel that due to the loss of family that the funds should be disbursed to family members.

The funds were dispersed once the Canadian blood service was found at fault with the class action suit, due to inflation and the economy the surplus should be divided among families of loved one who became ill and or deceased.

Sincerely,

[redacted]

[redacted]

RECEIVED
OCT 15 2015
SUTTS, STROSBERG LLP

August 18, 2015

To Whom It May Concern,

Re: [redacted]

[redacted]

Hepatitis C Compensation of blood products between Jan 1, 1986 and July 1, 1990

I received your notice that the Joint Committee requests my input for the disbursement of the surplus funds. I feel that due to the loss of family that the funds should be disbursed to family members.

The funds were dispersed once the Canadian blood service was found at fault with the class action suit, due to inflation and the economy the surplus should be divided among families of loved one who became ill and or deceased.

Sincerely,

[redacted]

RECEIVED
AUG 25 2015
SUTTS, STROSBERG LLP

Harvey Strosberg Q.C.
Aug 19/15

Dear Sir:

I have recieved a letter from you stating that there is a surplus of $2 million plus and so therfore I am giving you my opinion on what to do with this money. -

My Claim no is 12103

I have recieved my last payment in Feberary which was $798.47

I am unable to attend your consultation session.

I don't understand why this has to go to court. My family and I have had to manage without my husband and so has my kids and grand kids because of this horribal mistake.

It is an insult to me and my family that there is even a question of what to do with this money. It should be going to everyone that was afected by this huge mistake

Yours truly
[redacted]

I have remarried recently so [redacted] is added to my name

My <u>new</u> last name and address

[redacted]

(Claim No 12103)

[redacted]

RECEIVED
AUG 19 2015
SUTTS, STROSBERG LLP

Dear Harvey
My name is [redacted] the wife of [redacted]. He contacted the Hepatitis in 1986. He was operated for Heart Surgery. He was fine till 1996, when he was to have a surgery for his prostrate. We were informed, that he could not perform surgery, because he had tainted blood. We were shocked and he got worse and became weak I looked after him day and night very faithfully. As a result I had to retire early from work, because I could not leave him alone.

I have no computer or internet. I cannot attend the meeting which is on the August 25 - 2015. It is also my husbands birthday on that day.

My husband's brothers and sisters who are in Bombay and Goa in India, did not have any idea what me and my children went through this ordeal of sufferings. yet they received money from my husbands blood. He died in the hospital on October 6th 2001. I would like some surplus money to go to health care ~~serfix~~ service to improve our health Care!

I am not able to do a lot of things, as I am now 80 yrs. old. I have arthritis on my knees, legs and arms. I also have diabetis. I have children who are busy with their family. I need help, with my housework and other things, like garden showelling the driveway. I would apriciate if you can conside my request. Thank you in anticipation.

your sincerely.
[redacted]

JOINT COMMITTEE MEMBER

RECEIVED
AUG 19 2015
SUTTS, STROSBERG LLP

HARVEY STROSBERG Q.C.
Sutts Strosberg LLP
600 – 251 Goyeau Street
Windsor, Ontario
N9A 6V4

Dear Mr. Strosberg,

I am writing to you as a Family Class Member, in regards to my opinion of what I believe should happen with the surplus money of the 1986 – 1990 Hepatitis C Settlement Trust Fund.

I feel strongly that only the surviving children, and the spouse that was the caretaker of the deceased members should benefit from this surplus. I do not wish to see extended family members benefit. In the case of the deceased member having no surviving immediate children, then I would like to see the surplus go to help Hep-C victims with essential living support, or for the money to go to a strictly regulated and transparent Hep – C research and drug development program.

I was married to victim, [redacted], for over a decade, and we had a beautiful, happy, very loving family, with our baby son, [redacted].
[redacted] was everything to us. A great daddy, a loving husband. Hep- C destroyed our world.

Shortly after the birth of our son, [redacted] began a baffling, destructive decline. We never knew he had acquired Hep – C from blood transfusions. All I knew, was that we began to lose everything. [redacted] declined physically, emotionally, mentally, and financially, in every way. I lost my husband, my son lost a capable father. I went from having the luxury of working part time, to being able to be home with our baby, to becoming the sole provider for the three of us.

By the time our son was three years, we were surviving entirely on my meager, unreliable income as a waitress. We had no home, sometimes no food, and soon we had no future.

My husband became completely incapable of the trusted care of our son. I had no choice but to defend for us all on my own, never knowing or understanding what was raging on in [redacted] body.

I eventually became [redacted] sole provider, for everything. All his clothing, transportation, medications, food, gifts, money, and housing, also while trying to make a better life for myself and our son.

By the time we learned of his diagnosis, we had become completely outcast, there were no family members to come forward to help. I phoned every social agency I could think of, there was nothing to help us. We suffered immensely, immeasurably, physically and emotionally every day.

How can I describe to you what a nervous breakdown feels like, how can I tell you what it's like to watch your child stop smiling, to plummet academically at school. I can't tell you the pain in our hearts watching a man we loved so much, waste away.

[redacted] was a remarkable, unique, incredible entrepreneur and extremely generous man. He was our future. We were a real family, supposed to be forever.

My son will never inherit what could have been his legacy. I was never helped financially for being his sole caretaker.
I was never able to be helped financially from [redacted] for our son. [redacted] was supposed to be able to contribute to [redacted] child support, but he was never able to work.
I was not able to be given child support for many years, yet I provided support to [redacted]

I would very much like to be able to be compensated for at least that. I was his wife, and mother of his only child, and I believe I deserve to also receive compensation as opposed to people that had nothing to do with him.

I can't even begin to tell you in words how difficult it was for me to fight for our son to receive any money at all from Hep – C. It was complete insult to injury, that me, also as a victim, had to deal with months of bureaucracy. Why should it have been up to me, to take on hospitals, tracing back blood transfusions, dealing with untold amounts of paperwork, legal difficulties, etc. It was insulting to be a victim of loss, then have to prove it.

I hope that someone will grant compensation to myself and to [redacted], for all the incredible pain and suffering we endured, for the risk to our own lives, to never having his Dad around again, for the loss of his father watching him grow, become a man, see him marry, to become a grandfather.

The immediate, approved Family Members only, should be granted compensation.

No one should ever have to suffer what [redacted], myself, and our son, [redacted], suffered.

Blessings to you.

Sincerely,

[redacted]

[redacted]

Family Class Member

JOINT COMMITTEE MEMBER

HARVEY STROSBERG Q.C.
Sutts Strosberg LLP
600 – 251 Goyeau Street
Windsor, Ontario
N9A 6V4

RECEIVED
AUG 19 2015
SUTTS, STROSBERG LLP

Dear Mr. Strosberg,

This is a letter stating how I feel the remaining surplus money from the 1986 – 1990 Hepatitis C Settlement Trust Fund should be allocated. I am the son of a deceased father, a victim of the Hep – C tragedy.

I firmly believe that the only people who should benefit from this are the direct and immediate family members, such as the children and spouses of the deceased victims. Only the people who saw first hand and had to endure the hardships of watching their loved family member decline in health should be considered for this surplus. I do not agree with the remaining surplus being divided out to the extended family. To me, that is similar to saying "I saw 9/11 on the news, I feel sorry for the victims families, I should be compensated too." If it is not available to be divided evenly upon the direct children and family members, I would like to see **proof** that the remaining surplus money go towards aid for current living victims of Hep – C, or I would like to see **proof** that it go towards the current Hep - C research and drug plan, in hopes that it can potentially benefit victims of this terrible disease.

My father and victim, [redacted] was a VERY loving and successful man. At a young age, I had no choice but to watch his health and life decline at a painfully slow and depressing rate until the very end. Words can not describe the immeasurable pain involved in watching a loved family member, sole provider, and the first mentor that you form a bond with, wither away to nothing. I was robbed of a happy childhood spent growing up with a father, learning from a father, and ultimately being fortunate enough to grow old and take care of my father, as he had tried to do for me, before his mental and physical disability due to the disease.

I could have had the opportunity to learn from him and carry on his extremely successful business ventures. I could have had my Dad.

I hope you do the right thing, and compensate the children and spouses of Hep – C victims, and not any and all extended family members, such as their cousins, aunts, uncles, etc. Only the immediate and closest approved family members should benefit.

Thank you,

[redacted]

RECEIVED
AUG 19 2015
SUTTS, STROSBERG LLP

Dear Mr. Strosberg

600-251 Goyeau St., Windsor, On N9A 6V4

My name is [redacted] of Sarnia On. When I was eleven years of age, I lost my mother to leukemia. My older sister, who was 23 years old, and her husband, moved into our home in order that I would be properly taken care of and loved. She became more than a sister and much like a mother figure to me.

In 1988, while undergoing minor oral surgery, my sister received 9 bags of cryoprecipitate. Her surgeon was extra cautious because she suffered from Von Wiilibrand's Disease. As a result of this surgery, my sister was infected with Hepatitus C. She suffered for the next 16 years. At times the suffering was extremely difficult to watch.

I believe that the monies that resulted due to the class action suit was set aside for one purpose only, for those who suffered and those family members who suffered with them. Therefore, my suggestion to your committee is that the remaining money be dispersed to those who have been registered with the class action suit.

My sister's name was [redacted] and she passed away on Nov. 23, 2004. She suffered much and was much loved. It would be wrong if anyone other than those for whom the money was intended profited in any way.

Thank you,

[redacted]

August 2015

To whom it may concern,

I'm writing because I received your letter for the estate of [redacted] for the Hepatitis C settlement you wanted my input on the matter. Therefore I'm letting you know that it was extremely hard on the family when we heard [redacted] was infected with Hepatitis C. [redacted] second kidney transplant failed in 1997, and due to the fact that he had Hepatitis C, he couldn't be on the transplant list.

We suffered and went through a lot of pain seeing [redacted] go on dialysis in Ottawa 3 times a week for 2 years. It was long days, 6 to 10 hours before we got home which was hard for my son.

I took care of my son without knowing he was infected with Hepatitis C and not aware that my other children or I could have gotten infected also. [redacted] started receiving dialysis in Cornwall General Hospital for a while. On June 1st 2005 the Cornwall General Hospital sent [redacted] to Ottawa for dialysis which my son remained in the Ottawa General Campus for 14 months. The doctors could not insert a central line for [redacted] to receive dialysis which is how [redacted] passed away on August 16th 2006.

I had asked for help for funeral expenses for my son and you refused to help me. That is why you should divide some of the Hepatitis C settlement for the families who have endured pain and suffering for the loss of their loved ones.

Sincerely Yours,

[redacted]

RECEIVED
AUG 1 9 2015

1986-1990 Hepatitis C Settlement Agreement

[redacted]

Attn: Harvey Strosberg Q.C
Sutts Strosberg

600-251 Goyeau Street
Windsor, Ontario N9A 6V4
Telephone: 1-877-318-4372

hepc@strosbergco.com

Dear Mr. Strotsberg,

Thank you for serving on the Joint Committee which has a mandate to implement the 1986-1990 Hepatitis C Settlement Agreement and to supervise the ongoing Administration of claims.

Since the Joint Committee and the federal government recognize a potential surplus of between $236 million and $256 million, it requires action to ensure that victims and families of victims of the Hepatitis C tragedy benefit from that surplus. Indeed all of the surplus after Administration costs should be allotted to those family members affected by the Hepatitis C crisis.

As Executor of the Estate of [redacted] who passed away on August 27,2006, I recommend that surplus funds be distributed to family members affected by such a grave loss.

[redacted] left a son, [redacted] born April 29,1988. [redacted] put skates on [redacted] by the time he was 4 years old. For 12 years [redacted] travelled to watch [redacted] play hockey whenever his health allowed. Although [redacted] was too ill to attend [redacted] High School Graduation he was able to watch it via video from the Moncton General Hospital in June, 2006. [redacted] has debt as a result of his secondary education courses in the Trades. His job as a Dispatcher is demanding shift work with pay only a few dollars above minimum wage. His Dad is no longer here to help him financially and encourage him to further his education for more job opportunities which would allow him to have a better lifestyle, to afford a membership to a Fitness Centre and be able to obtain a mortgage for his own home.

[redacted] was born April 9,1991. She could count on her Dad for advice and support in a way that gave her comfort in spite of troubles. Her Dad was funny so she shared lots of laughs with him. His talks and her own determination lead her to achieve a Pharmacy Degree. Two years at UNB and 4 years at Dalhousie University have left her with a huge financial debt. During her last 2 years of High School [redacted] missed her Dad at Dance recitals, at a Pageant where she was crowned [redacted] and her roles as an actress in school theater. [redacted] absence was noticed for sure as her siblings and I watched her receive her Pharmacy Degree in Halifax in June, 2015.

[redacted] daughter [redacted] is a troubled girl because of the lack of parental guidance. [redacted] was born December 1st, 1994.

On September 26, 1996 [redacted] was awarded full custody of his children.

[redacted] was small in stature and she had a gift for dancing. She believes she was deprived of attention .Her Dad died when she was 12 years old. [redacted] shirks responsibility claiming she is too stressed to complete courses to enhance her education or to go to her place of work when scheduled to be at a job.

[redacted] daughter [redacted] was born in 1987. [redacted] was noticeably more ill by 2001 and claimed [redacted] made him laugh at a time of pain and ill health. [redacted] could also 'rule the roost' so to speak. She graduated from High School in 2015 and hopes to continue enough education to allow her to be independent and have a job she enjoys . She did attend grief counseling and seems keen to succeed in life.

By the year 2000 [redacted] bought a house located a block from his parents' home.

Towards the end of August. 2006. [redacted] tears came a few days before he passed away when he said to me, "I don't want to die because I don't want to leave my kids." He also alluded to the fact that a parent should not have to experience the loss of a child. He meant that his death would also take its toll on his Dad and I.

[redacted] was deeply concerned about his brothers, [redacted] and [redacted]. They too were distraught by the loss of [redacted] who had a dramatic affect on their lives since childhood. A card from [redacted] and his wife on our 55th wedding anniversary this week reads " Your caring shows what love really means." [redacted] always wrote a note in our cards on special occasions. And what a great decision on [redacted] part to write notes sporadically such as before school or a special event for each child as a surprise and a special way to communicate ---notes which the children read and reminisce over to this day.

[redacted] knew of the unconditional love I had for him and his children and knew in his heart that I would try my best to help them and look after his affairs to the best of my ability.

After [redacted] died, [redacted] and [redacted] lived with [redacted] and I while [redacted] lived with [redacted] and step-mom, [redacted] [redacted] is close by so is in touch often for meals and transportation.

As Executor of the Estate I recommend and encourage you to do your best as a committee and award surplus funds to [redacted] family. His children would benefit greatly from such a positive action by the federal government and your committee.

The dynamics of living with a Dad who was physically ill and left them as young people has had a devastating impact on their present day lives.

[redacted] fought the good fight for years but his kidneys and other organs and all over illness of Hepatitis C consumed his body causing his death .

Surplus funds must be allocated to [redacted] family. The federal government failed to provide safe blood products for [redacted]

As Executor of the Estate of the late [redacted] I request the release of surplus funds as time allows to The Family Class Members of the late [redacted]

Sincerely,

[redacted]

August 20,2015

To Whom it May Concern,

My Grandmother, whom I called Nana, contracted Hep C in the late 1980's. She suffered so much and I hated seeing what had happened to her. I cannot think of those days without feeling physically ill. She, [redacted] died on Nov. 23rd 2004. I was married on June 25th, 2005, 7 months later. I had so wished that could have been there. She never got to meet my two sons either. The whole travesty of the tainted blood scandal still angers and repulses me. I miss my long and frequent talks with my Nana.
I often think about her and so wish that she was here.

In my opinion. It would be wrong to use the money for any other reason than to release it to the victims of Hep C and their, still grieving, families.

Thank you

[redacted]

RECEIVED
AUG 20 2015
SUTTS, STROSBERG LLP

Dear Mr.Strosberg,

My Nana (Grandmother) was [redacted] She died on November 23, 2004. I loved my Nana so much. She was an intelligent, interesting and interested person. She always cared about what we cared about. When I was in university, I got monthly cards and letters from her. I recently counted them, I have 71 cards!

She was the best cook and the most hospitable person that I have ever known. Anyone and everyone was welcome at her house at any time and there was always food ready for them. It was almost magical how she could have delicious things ready when she wasn't even expecting you! I can honestly say that she was the best person that I ever knew. I still miss her terribly.

My Nana suffered for a very long time, 16 years, due to the tainted blood scandal. Sometimes the suffering was absolutely unbearable. My Pops (Grandfather) and my Mom [redacted] were there daily and they suffered right along with her. It was a terrible time for all of us. I wished so much that she had never had that minor surgery when she received those tainted blood products. Even now I get teary eyed thinking about it.

Please, if there are remaining funds, give it to the families of the victims. That's who it was intended to be given to. Although no amount of money makes up for the negligence of the blood scandal, we are still suffering from great loss.

Thank you, [redacted]

RECEIVED
AUG 20 2015

SUTTS, STROSBERG LLP

1986-1990 Hepatitis C Settlement Agreement
RE: Surplus Funds

File Number 14527, [redacted]

August 20, 2015

RECEIVED
AUG 24 2015
SUTTS, STROSBERG LLP

Joint Committee Member
Harvey Strosberg Q.C.
Sutts Strosberg LLP
600-251 Goyeau Street
Windsor, Ontario N9A 6V4

Dear Sir:

I recently received two (2) letters regarding the 1986-1990 HEPC Surplus Funds. One letter was to myself FBO the Estate of [redacted] and the second letter was also addressed to me as I am the Dependant.

This letter is written with regard to these notices of Surplus Funds. I am not quite certain how to respond to this matter , however I will attempt to put my thoughts forward.

My late wife [redacted] contracted Hepatitis C died April 6, 1999. The Government provided a compensation package as well as the Loss of Services compensation. It seems to be quite apparent that with the amount of the surplus funds, at this point, that the initial compensation package was possibly not high enough resulting in the dollar amount of surplus funds, which accoding to the letters is between $236 million and $256 million.

It is therefore my opinion that since the surplus funds are a direct result of investments from the original compensation fund that the funds should be paid out to the people who have been directly affected and have ongoing entitlements.

The research that is mentioned in the letter should not necessarily be part of this discusssion, since to my knowledge, it was never a part of the original settlement and ongoing entitlements. I believe the Government has a responsibility in research but not using funds from the Compensation Package or Ongoing Entitlements.

Yours truly

[redacted]

August 21, 2015

TO The Joint Committee
c/o Harvey Strosberg Q. C.
Windsor, Ontario

RECEIVED
AUG 25 2015
SUTTS, STROSBERG LLP

It is my feeling that the estimated surplus funds should be divided equally between the expected needs of Class Members and Family Class Members.

Sincerely,

[redacted]

NEW ADDRESS:

[redacted]

To:
Harvey Strosberg Q.C
Sutts Strosberg LLC
600-251 Goyeau Street
Windsor Ontartio N9AGV4
Canada

From:
[redacted]

RECEIVED
SEP 01 2015
SUTTS, STROSBERG LLP

Date:
August 23, 2015

Subject :
Hepatitis C Settlement

Dear Sirs:
My mother, [redacted] passed away December 10, 1998 from a Hepatitis C infection caused by a blood transfusion. I am a member of the class action lawsuit in this regard. Your letter stated that as well as sufficient funds for future needs, there is a large surplus. This letter is in response to the joint committee's request for input as to the use of the surplus funds in the compensation packages to members of the lawsuit. My claim number is 2364 and my daughter [redacted] claim number is 2364 – I hope this is enough to identify us adequately – additionally my brother [redacted] as executor for my mother's estate had a claim number of 01000419 and a personal claim number for himself of 00002168.

I believe that any leftover funds must be paid out to the members of the lawsuit. Under no circumstances should this money be returned to the Federal Government or to any other group interested in research or health care. It should not be used for any other compensation programs.

My mother suffered and died because of negligence in the handling of the blood supply; she would have no interest in rewarding any other group besides her family with money from the lawsuit. My daughter [redacted] grew up without knowing her Grandmother. Many families were affected in many ways and continue to be to this day. Please make every effort to make sure the money goes to the infected individuals or their family members, not to anyone else.

Yours sincerely [redacted]

[redacted]

Aug 24/15

re: Hep C. Settlement Agreement

Dear Mr Strosberg:

I am writing this brief letter to encourage you and the joint Committee to continue to support financially the families of the Blood fiasco. My son [redacted] died in Aug 2006 and left 4 children in our care.

There is no good in trying to explain the problem and trials we have gone through since 1985. Words are no good at this stage of my life 10/10/36 but financial pay out may help us get over our day by day expenses.

Looking after 4 children without their father or mother (divorced) is difficult. Their education is my primary concern. One grand daughter is now a pharmacist One grandson a worker for a trucking Co. Two children are at a loss as what to do.

We need the money to provide educational opportunities and get a start on life.

Thank you for
the opportunity of participating

[redacted].

RECEIVED
AUG 24 2015
SUTTS, STROSBERG LLP

Dear sir or madam

I am [redacted]
I have been living with Hep C for a long time since 1990. It has ruined my life. I did get a settlement about 6 years ago. But I think it should be more, for the stress and horror it has on people lives. We didnt ask for this awful ~~disea~~ curse. Everyone dont want to be near you. they are afraid, I have been single since 15 years because of Hep C. I live in a small town where everyone is afraid of me. Its so sad. The talking behind my back is so awfull. I am also so sick alot. Cant work because I am so sick alot. I think we should get more money. It wont take away the pain and stress but it will help to secure a future for our little kids that will be left alone.

[redacted]

my add.

[redacted]

RECEIVED
AUG 2 [illegible]
SUTTS, STROSBERG LLP

Mr. Harvey Strosberg,

My mother, [redacted] suffered from Von Willibrand's Disease her entire life. That disease is related to Haemophilia in that an affected person has blood platelets that hold little to no clotting factors. Because of this, her oral surgeon was extra cautious supplying her with blood products when she received minor surgery in the latter half of the 1980's. These blood products were infected with Hep C.

For the next sixteen years her battle and struggle against Hep C were both courageous and heart breaking to witness. The effects of the disease were catastrophic. She endured far, far too much suffering. My father and I agonized over watching her decline. There were so many ups and downs. She was admitted to the hospital numerous times in the early 90's with a number of mysterious ailments, particularly pneumonia, until finally in 1994 it was discovered that she was suffering from Hep C. She was told that there was nothing that could be done and that she had five months to live. We were devastated. She lived for another ten years. During that time, we witnessed so many ups and downs, particularly from 2001 until her death on Nov. 23, 2004.

My Mom was a very intelligent and compassionate woman. She welcomed anyone and everyone into her home. She was always interested in what everyone else had going on in their lives. Even when she was having a very bad health day, she wouldn't give in to it. She never, ever complained. I often said to people at that time that if I had been as sick as she was in the morning, that they'd be burying me in the afternoon. Her resilience and determination were unbelievable. She fought the good fight, there's no doubt about it.

Her church family, her friends and particularly her loved ones suffered terribly during those many years. My mom spent the first 6 months of 2001 in the hospital. I was working out of town and would drive to the hospital every single day. My Dad was faithful in his daily visits as well. The grandkids couldn't believe what had happened to their Nana. My Dad actually received sympathy cards three years before she passed way because people that had visited her in the hospital thought that they had seen her for the last time.

In July, 2004, she missed a step at the front door and fell and fractured her pelvis. She lay in the hot sun until she was discovered by a niece some two hours later. I knew at that time that the morphine that the hospital had to administer would finish off what little function she still had in her liver. She passed away after four more months of a terrible struggle.

That entire time in my life still evokes such pain. The situation was so terribly unfair and unnecessary. The idea of it all makes me still so terribly angry. It all could have been avoided if there hadn't been such negligence on the part of the Canadian Red Cross. There is no compensation in the world that would ever make up for losing my precious Mom. For the money that remains to be used for any other reason than to give it all to the victims and their families would be a further travesty. I still so miss my mom. Thank you for your time.

[redacted]

Harvey Strosberg Q.C.
Sutts Strosberg LLP
600 - 251 Goyeau Street
Windsor, ON

24 Aug 2015

Re: HepC Joint Committee Submission

Thank you for the letter regarding the Compensation Fund surplus. I am a recipient of the class action settlement based on my medical condition resulting from a tainted blood transfusion in 1989. It is my understanding that this fimancial compensation was intended to allow me to regain a better quality of life. However, since then the cost of living has risen considerably and inflation (approx. 27% between 2001 and 2014) has eroded the value of the compensation package. It is therefore suggested that the surviving class members be awarded an additional inflation adjustment to their original compensation award.

Should there be a further amount remaining in the fund, then this money could be returned to the original Federal Government source with the suggestion that it be used to improve health care for seniors.

I am looking forward to hearing of the Joint Commission and Federal Government submissions and the ensuing court decision.

Sincerely

[redacted]

Shelley L. Woodrich

From: [redacted]
Sent: Monday, August 24, 2015 11:05 AM
To: Hepatitis C Class Action
Subject: 86-90 Hep C trust fund

Good Morning,
We recently received communication from you regarding the fund sufficiency.
My wife and I hope to attend the August 26, 2015 consultation session to be held in Hamilton, August 26, 2015.
Our comments and reply to your letter are as follows.
Here is the background and reason for our comments.
Our daughter received a tainted blood transfusion in December 1989 at one month of age. She was hospitalized right after birth with a serious congenital heart defect requiring surgery. During cardiac surgery she received the tainted blood transfusion. Here hospital stay after the surgery was significant because of her reaction to the infection. At the time this was unknown but has been accepted as being related to her infection. Subsequent to all this she was diagnosed with a complex chromosomal disorder and as a result has ongoing multiple medical issues. These are greatly complicated by her additional issues related to Hep C.
Because of her level of mental incompetence, we as parents have been appointed her Personal Representative. We have to accompany her on all her Dr's visits, all are in Toronto. We live in Niagara.

The fund should allow for families of those minors who received a tainted blood transfusion to receive compensation for loss of income for the time these children were hospitalized and required Dr's visits related to their Hep C. While our out of pocket expenses were covered for that time, our loss of income and other related expenses were not. It is our assertion that there was monetary loss to our family.
Our assertion is also based on the following observation. Most people receiving a blood transfusion are in a hospital for a medical reason, they have medical issues that may require a blood transfusion. Some are more complex than others of course. Infants like our daughter, requiring blood transfusions, usually have serious underlying medical issues. Hers are lifelong and are made more complex after having acquired the Hep C virus. If an adult receives a blood transfusion, it could either be for major or minor medical issues. For the most part, they can drive themselves to the hospital or for Dr appointments. Parents of children with congenital medical issues need to take time off from work to attend these appointments or be with their child during hospital stays. You don't drop your children off at the hospital and pick them up at a later date.

This is an appropriate and valid expense request that could be covered by the surplus. You already have records of those who have received approved out of pocket expenses for hospital stays and Dr's visits related to her Hep C. There will be no surprise claims and all requests can be managed that way. A daily loss of income amount could be established for one parent for those hospital stays and a Dr's visits. Children and mentally incompetent people cannot drive themselves.

I don't know how many claimants are in similar circumstances. Please consider them as beneficiaries of this surplus as well.

Please let us know if this submission is sufficient enough to provide material for your Joint Committee's application or for discussion at your consultation session. we will provide more input if requested.

Respectfully Submitted,
on behalf of [redacted]
Her parents,
[redacted]

Sutts Strosberg LLP
600-251 Goyeau St.
Windsor, Ontario N9A 6V4

Tuesday Aug. 25, 2015.

RECEIVED
AUG 3 1 2015
SUTTS, STROSBERG LLP

Dear Mr. Strosberg:

I am writing you regarding the 1986-1990 Hepatitis C Settlement.

I was recently informed that there is a surplus of monies in the Trust Fund. As a Class Member of the Hepatitis C Settlement, I am writing this letter upon the request of the Joint Committee.

My recommendations for the surplus are as follows.
I suggest that the surplus be divided into three categories:

Category 1: An additional lump sum should be paid/distributed to all Class Members.

Category 2: Family Members caring for, or dependent on, the Hep C-infected individual should receive increased benefits. Levels of compensation should depend on the severity of the disease, and the costs incurred in caring for the individual.

Category 3: Individuals recently diagnosed with Hep C (i.e. after 2010) should be included in the Class Settlement.

The surplus should by no means be returned to the governments (either federal or provincial), nor should the surplus be given to external agencies for research, general healthcare, etc. The surplus should be allocated only in favour of the Class Members and Family Class Members.

Sincerely

[redacted]

From: [redacted]
To: [redacted] KPodrebarac@toughcounsel.com
Subject: Question from Web Stream
Date: Tuesday, August 25, 2015 8:41:40 PM

Webcast question from: [redacted]

Hello, [redacted] here, is it possible to have a print out of the screen shots ie: number of claimants and disease levels etc. Also, I hear of lots of death in this Webcast, I am still alive fortunately and don't know when my time will come, but I think there should be another pay out to enjoy and help out my family before I get too sick and cannot help them. I am noticing this past year that I am getting more symptoms of the moderate cirrhosis I have as a result of the tainted blood I received in 1986 at the age of 22. I treatment I was on was Interferion/Ribiron (sorry for the spelling) my side effects were stomach sickness, miss work, weight loss due to this, and thyroid disease, which occurred when I was on interferon drug. Unfortunately I have to leave the session but it was very informative and my husband and I thank you for your time and support. my email is [redacted], and look forward to you response. Thank You :)

From: [redacted]
To: [redacted] KPodrebarac@toughcounsel.com
Subject: Question from Web Stream
Date: Tuesday, August 25, 2015 7:56:47 PM

Webcast question from: [redacted]

Hello, my question is about my daughter who isn't HepC positive thank goodness, but because she grew up with a very ill mother she now suffers with PTSD. She doesn't get benefits...yet she suffers as I do but with different diseases. Will this be taken into consideration, when and how?

Shelley L. Woodrich

From: [redacted]
Sent: Tuesday, August 25, 2015 9:03 PM
To: Hepatitis C Class Action
Subject: Trust fund

I feel the money should be disbursed amongst the victims and families. Our family has been greatly affected by the passing of my spouse. I, not only lost my spouse, the father of my children, We lost the biggest contributor to our family. Since his passing I have had to work three jobs to keep our family going. He was not able to get insurance due to his infected disease he was not able to get insurance so I have been left to pay all bills. I have not been able to help any of my children out with schooling they have had to rely on student loan and bursaries . This is why I feel the mo rues should come back to victims and families

[redacted]

To: Whom it may Concern: Aug. 25th/2015

Er: Claim # 1100155

(HepC 86-90 Joint Committee)

To the Joint Committee in response to your newsletter recieved Aug. 4th 2015. First and formost, I would like to thank this Committee for this opportunity of reviewing our claims.

My nam is as you may already know I am another member of the family which is a first trans fused Hemophiliac, Von Willbrand's Disease VIII who has been infected and affected directly with Hep. C. from the blood supply that was tainted by the Red Cross & the F.P.T. governments. I come from a family of 11 children, 6 hemophiliacs (4 brothers & 2 sisters)

Growing up and surving with all the complications of just being a Von Willebrands VIII. Example: Nose bleeds, ears, mouth GI, menstration) bleeds; Hep C - HIV was horrific & exhausting. Not to say less than just plain hard life. This standard of life has also been life being burnt scarring & affecting every possible phase of my life. Through out these times my family & I have suffered more than our share of hardships. My poor mother, had no choice but to resort to using rags to stop and cover our bleeds. The amount of towls + sheets my mother not only had to rinse in cold, to get the blood out, so she could re-use them was very disappointing + very hard on my mother and other family members. My brothers + sisters were just →

plain scared not knowing if we were going to live or die. My mother passed away with-out a penny. Her Telephone bill was not even paid at the time of her death. Although being sick + diseased I took a job waitressing at the St. Boniface Hotel, just so I could pay for her headstone with her name loving wife of, and her 11 children Rest in Peace Mother. Sorry to say the amount of money 17,000 a year is not nearly enough to live on, when you are bleeding, losing jobs, going to the hospital, liver problems. Even to pay for my personel material (Kotex Tampon's, band-aids) not to mention trying to pay for hospital trips, rent, bills, food, like most people could afford we couldn't + still can't. I still tried to hold my head up high, but I could not do this on Welfare' I would please ask the committee to be fair + compensate up at least 35,000 to 65,000 a year, that's not much for a life who's family got inncently wrong ed is it? I have already lost my Father, Mother + 3 brother's, Ray, Guy, + Eugene from this blood scandel. Do we not deserve at lest a better life, before death comes for the rest of us. I hope you can understand what has happened to us as a family. Futher more I've been put down, denied, harrassed + beat up, for the fact they thought I was some kind of dirty junkie, that I would deseace ~~so~~ them.

→

Claint# 1100155

Hep C 86-90 Joint Committee 3)

They did not know we were infected with Hep C. & H.I.V. through no fault of or own. For this I'd have to say Thanks alot for, making my life feel lower then a dog's life. If I did not recieved this tainted Blood, I would of had a better Chance of getting a better education, to become a legal-aid lawyer or some kind of job that would not discriminate me for being infected with Hep. C. I have recently been diagnosed with Cancer. So this makes everything even more intense than ever. I have been so depressed + broke I almost wanted to end my life. Thank god I've got the support + strength of my family which seems to make the pain of all this a litter easier. If something or someone doesn't help us with a better quality + standard of life then I would have to say I'd feel a very huge mistrust from the people like this committee for not doing the right thing for my family + I hope you can read this + understand we still need help.

Thank-you very much

[redacted]

From: [redacted]
Sent: Tuesday, August 25, 2015 10:02 AM
To: Hep C Pre 86, Post 90 <HepC.Pre86Post90@crawco.ca>
Subject: HEPC

I received a letter regarding the blood 1986-1990 Hepatitis C Settlement. In regards, my brother [redacted] died as a result of the hepc. We received a settlement as a result. We signed off on it through them. He died April 2009. He was in the Wellesely hospital burn unit in Toronto, received many transfusions as a result of his condition, don't know how many times he may have been given the tainted blood. As of his condition from the burns, no leg, partial other leg, fingers and core body burns. The effect of hep c hit him harder then most as it bed ridden him for the last year. He tried the medication, of one year to try to slow down the hep c of pills each day and a needle once a week without results. Due to his added condition quality of life was not very good. If you have any questions and I can help, feel free to contact me and any information to this case would be appreciated. I would have to find his case number.

Thanks, Good luck.

[redacted]

From: [redacted]
To: one@postelvideo.com; KPodrebarac@toughcounsel.com
Subject: Question from Web Stream
Date: Tuesday, August 25, 2015 8:50:36 PM

Webcast question from: [redacted]

I believe the money should be given in lump sum amounts to help infected people make the lifestyle changes needed to sustain longevity. ie. healthy diet, exercise, reduced stress

From: [redacted]
To: one@postelvideo.com; KPodrebarac@toughcounsel.com
Subject: Question from Web Stream
Date: Tuesday, August 25, 2015 8:47:52 PM

Webcast question from: [redacted]

- lives of family members impacted after the infected person passed away

- took time off from work to take care of my father (to his medical appointments and in/out of hospital) should be compensated

- does the plan cover wheel chair, wheel chair ramp, walkers, etc that are required for the affected person?

- the amount received by my mom on an annual basis does not increase that much year by year.

- I feel the surplus should go to the living affected person and to the spouse of the deceased affected person

From: [redacted]
To: one@postelvideo.com; KPodrebarac@toughcounsel.com
Subject: Question from Web Stream
Date: Tuesday, August 25, 2015 7:18:48 PM

Webcast question from: [redacted]

My loss of income only represents my earnings as of 2001 as my last earnings from working. Will this surplus be used to validate my potential earnings for these missed years.

From: [redacted]
To: one@postelvideo.com; KPodrebarac@toughcounsel.com
Subject: Question from Web Stream
Date: Tuesday, August 25, 2015 8:36:12 PM

Webcast question from: [redacted]

Would you consider supporting HCV claimants that can't obtain extended benefits, either because there jobs don't offer benefits plans and/or the person can't afford to purchase extended benefits privately.

From: [redacted]
To: one@postelvideo.com; KPodrebarac@toughcounsel.com
Subject: Question from Web Stream
Date: Tuesday, August 25, 2015 8:43:30 PM

Webcast question from: [redacted]

Grandchildren should receive better compensation

From: [redacted]
To: one@postelvideo.com; KPodrebarac@toughcounsel.com
Subject: Question from Web Stream
Date: Tuesday, August 25, 2015 9:00:18 PM

Webcast question from: [redacted]

these funds should not go to the government
should not be given for research (I hear pharmaceutical co)

payments to children, age should not be a factor

late claimers should be accepted

From: [redacted]
To: one@postelvideo.com; KPodrebarac@toughcounsel.com
Subject: Question from Web Stream
Date: Tuesday, August 25, 2015 7:30:25 PM

Webcast question from: [redacted]

I think the surplus should be divided between all class action members regardless of status level as long as infection can be proven. The principal sum should continue to be used as it has been in the past. I said regardless of status because as a person who was infected as an youth even though I am considered level 3, I did not ask to be infected, it has affected me physically.emotionally and affected every relationship I have tried to have for 30 years. There are things I have never been able to do and missed out on as a regular unaffected person. So in closing whos to say what level is more deserving of being compensated, we were all infected and it has ruined all our lives.

From: [redacted]
To: one@postelvideo.com; KPodrebarac@toughcounsel.com
Subject: Question from Web Stream
Date: Tuesday, August 25, 2015 7:09:44 PM

Webcast question from: [redacted]

First of all I would like to apologize for not being able to attend in person as I said I would but I have suffered a knee injury and could not come to Toronto today.

I did not ask to become infected with Hep C, for me it came as a shocking and unwelcome surprise due to treatment for another health problem and the lack of vigilance and precautions in the collection of blood and blood products used for treatment of these and other health issues. As a class member all I want is to be able to carry on as normally as possible and to be able to provide my family with a decent lifestyle, free of worry from things like Hep C, there are enough other factors to worry about in life as it is.

I have 4 points that I would like covered.

#1, I completely agree that any funds that have been deemed "surplus" must stay in the fund or be turned over directly to the fund members/ families/estates only. The fund was established to help the fund members and their families and as such it needs to be kept in their hands. In my opinion the funds cannot ever come close enough to making up for ones health. As I stated earlier I never asked for this diagnosis but nevertheless I carry it with me forever. In my lifetime I truly believe that I never will be able to re-compensate my family for lost income, extra expenses, time away from them, mental stress and other factors that I attribute strictly to this diagnosis. I must always give up way too much because I am just way too tired more often than I should be. I believe that all levels of compensation need to be increased with the extra funds and yes lump sums will be acceptable based on the disease level that was originally accepted. I also am forced to decline extra work and work assignments at my place of employment due my constant tired feeling. This happens on a weekly basis, usually on Saturday and Sunday which is paid out in premium time wages. My current employer has been in a position to need premium time work from its workers for over 10 years now and in my situation I have had to decline most of it.

#2, I personally have been denied life insurance coverage because of my Hep C diagnosis and I believe that this is a very critical issue that has not been addressed in the fund. This has the potential to leave mine and many other families in a very precarious position. In my recollection I have applied to 2 different insurance companies and both times was denied. At least one insurance company cited Hep C in the reason as to why I was denied.

#3, I don't think / or know of any way to have physiological help for the infected person or the infected persons family. I believe that this type of medical help would be of tremendous help to infected persons and their families because even if the person is able to carry on a reasonably normal life the thought of the Hep c returning or of subsequent infections, especially with family members and kids weighs heavily in the everybody's mind. It does for me on a daily rate.

#4, I don't think that the funding for keeping up on the work around a home and maintaining it and your family is nearly enough. I personally rely much too much on family members for help and support. My wife needs to carry much more of a burden than she should, my children are forced to help out around the house more than they should and even my parents and in-laws pitch in to help. This happens because after a full days work I'm much too exhausted to do much around my house. Currently I need to hire outside help

From: [redacted]
To: one@postelvideo.com; KPodrebarac@toughcounsel.com
Subject: Question from Web Stream
Date: Tuesday, August 25, 2015 8:02:26 PM

Webcast question from: [redacted]

Can we contact MPPs or MPs on this surplus? The surplus must stay with the class members, that means every penny.

Shelley L. Woodrich

From: [redacted]
Sent: Wednesday, August 26, 2015 1:42 PM
To: Hepatitis C Class Action
Subject: Hep C

My name is [redacted]. I am the spouse of the late [redacted]. At present I receive an annual cheque from Hep C. When my husband passed the life expectancy of a male was 78 years. Stats Canada now says the expectancy is 79.2 years. Now the retirement age has changed from 65 years to 67 years. I believe that the surplus monies should continue until at least 79.2 years to the spouses. Even better would continue until the death of the surviving spouse.

Sincerely
[redacted]
Have a nice day

Shelley L. Woodrich

From: [redacted]
Sent: Wednesday, August 26, 2015 9:23 AM
To: Hepatitis C Class Action
Subject: HepC Joint Committee

I believe the surplus should be shared among those of us who have been impacted by HepC.

[redacted]
1000558 (TransE)

Shelley L. Woodrich

From: [redacted]
Sent: Wednesday, August 26, 2015 12:17 PM
To: Hepatitis C Class Action
Subject: RE: Submission to Hep C Joint Committee

Aug. 26, 2015.
As the Family Representative for the estate of [redacted] (Claim #13754) I would like to make the following submission to the Committee:

1. That the surplus available for redistribution by distributed to claimants in proportion to the original pay-outs.
2. That any funds resulting from an inability to pay to the claimant (death, address unknown) or to a HepC-infected claimant's estate, would be distributed to living HepC-infected individuals in the orginal group.

Thank you,

[redacted]
Claim #13754

[redacted]

From: [redacted]
Sent: Monday, August 10, 2015 9:53 AM
To: Hepatitis C Class Action
Subject: Submissions to Hep C Joint Committee

Aug. 10, 2015

Dear Mr. Strosberg:
Is it acceptable to make a submission to the Joint Committee using email? Specifically this email address?
Thank you,

[redacted]
Claim #13754

[redacted]

RECEIVED
BY FAX
27-Aug-2015
SUTTS, STROSBERG LLP 44 901 002

My name is [redacted] Icome from a family of hemophilics, five who cotracted hep c because of the tainted unchecked blood. My family has had to endure a lot of sickness due to no fault of our own. First my brother [redacted] after having a liver transplant and years of sickness died. Next my brother [redacted] took the hep c treatment and barely survived. He is hep c free but has liver damage.My brother [redacted] has poor health due to a enlarge liver and he is waiting for test to find out what other problems he has. My youngest brother [redacted] is in the process of taking the hep c treatment but he is living with liver damage.Many times over the last few years i could have used some of the surplus money to be near my brothers while they were suffering. Please give the surplus money to the class members and the class families members .

[redacted]

[redacted]

My name is [redacted] I come from a family of thirteen siblings, five brothers who are hemophilacs. Because of unchecked tainted blood four of them have hep c. My brother [redacted] passed away three years ago after having a failed liver transplant and many more complications. My brother [redacted] took the hep c treatment and barely survived. [redacted] is now hep c free but his liver is very bad, not sure what the future holds for him. My youngest [redacted] is about to start the hep c treatment but already has problems with his liver. My brother [redacted] has an enlarged liver because of the hep c , apparently the hep c has gone away. Right now because of failing health he is awaiting test to see if the hep c is has returned. There have been many times in the past such as when [redacted] was in Halifax hospital and st John's hospital that we his sibling could not be there to support him because of lack of finances. My brother [redacted] lives in Nova Scotia and had to go through his treatment and sickness without the support of his siblings because of finances. These are some of the times when we could have used some of the surplus money. I don't know what the future holds for my brothers but the surplus money would go a long ways in making their lives easier and mine in being able to be their support in the future. We have already lost one brother because of someones neglect and no amount of money could bring him back. The $6600.00 that i received was not much compensation for losing a love one. Please allot the surplus money to the class members and family class members.

[redacted]

[redacted]

My name is [redacted] I come from a family of thirteen siblings, five who are hemophilia,Four of them contracted hep c because of tainted unchecked blood. My brother [redacted] died three years ago after prolonged illness due to liver damage and a failed liver transplant. My brother [redacted] took the hep c treatment and is hep c free but has to live with liver damage. My brother [redacted] has an enlarge liver and is having complications. My youngest brother [redacted] is getting ready to take the hep c treatment and has liver damaged. We as a family don't know what the future holds for our brothers.Please allot the surplus money to the class members and class members families.

[redacted]

[redacted]

My name is [redacted], i come from a Family of thirteen siblings where five of us are hemophilacs, four of us contracted hep c because of the tainted unchecked blood. My brother [redacted] died three years ago,my brother [redacted] took the hep c treatment and is hep c free but has lasting liver damage. My youngest brother [redacted] is in the process of taking the hep c treatment but already has liver damage. Myself contracted hep c but it went away leaving me with an enlarged liver. Now because of failing health my doctors are sending me to the liver specialist to see if the hep c has returned or if the damage on my liver is got worst. Me and my family don't know what kind of complications the future will hold. I believe the surplus money should be allotted to the class members and class members families .

[redacted]

[redacted]

My name is [redacted] I come from a close family of thirteen siblings, five of us being hemophilics. Four of my brothers contacted Hep c, myself being lucky enough to escape contacting hep c. My brother [redacted] contracted hep c and after much suffering and a failed liver transplant died three years ago. My brother [redacted] contracted hep c,took the treatment and is hep c but has liver damage. My brother youngest [redacted] contracted hep c and is in the process of taking the treatment but already has liver damage. My brother [redacted] contracted hep c but it went away but he is living with an enlarged liver. [redacted] now has failing health and is waiting for test to see if his hep c has returned The death of my brother and the failing health of the other three is because of the neglect of the tainted blood not being screened. I believe that all the surplus money should be allotted to class members and class family members.

[redacted]

[redacted]

RECEIVED
BY FAX
27-Aug-2015
SUTTS, STROSBERG LLP 44 901 002

My name is [redacted] I come from a family of thirteen, five who are hemophiliacs. Four of them contracted hep c from the unchecked tainted blood, My brother [redacted] died three years ago after having a liver transplant and many other complications.My brother [redacted] is hep c free but is living with much liver damage and other complication.My brother [redacted] has an enlarged liver and is waiting for test to determine what other complications he has .My youngest brother is waiting to take the hep c treatment but he also has liver damage.I believe that the surplus money should be given to the class members and class member families to help elevate some of the pain and suffering.

[redacted]

[redacted]

To Whom This May Concern,

I have received a letter from 1986-1990 Hepatitis C Settlement. My name is [redacted] My mother, [redacted] was one of the victims due to negligence of the screening the tainted blood. This letter is asking me what I think should happen with the surplus of money? Before I answer I would like to tell you some of the agony and pain my mother and family endured that haunts me still to this day.

Just before my mother's transplant, my mother's liver was failing rapidly. My sisters and I had to do 24/7 care for her. We had to wrap towels around her legs because the toxins in her body had nowhere to go but out of the pores of her legs. She swelled up so bad we even made underpants for her as we could not buy them that size. As the hole got bigger in her leg, the more toxins came out saturating the towels. Not worried about our own safety, and with no knowledge at that time about this disease, we did what we needed to do for our dear mother to keep her comfortable. Shortly after that, about a month's time, she would end in the hospital where she had the liver transplant. She would of only have had a couple of weeks to live at that time if she didn't have this transplant is what the doctor had told my family after the operation. Well it took months for her to mend from this.

At the time of the transplant, I had just introduced my second child to her and she had to leave for the hospital. I had to stay back and couldn't be with her in London. I was so stressed from it that I could not nurse my child. Taking many trips to London so she wouldn't feel so alone. She was so terrified to sleep from hallucinations she had gotten from the medication. Once we were there to hold her hand, to say it was "okay" and that we are there nothing would happen, so she could sleep.

When my mother came home it was okay for a while. Then the new liver started to fail. My mother would have to take lactulose, a medicine that clears your bowels, to get rid of the toxins. If she didn't take it, the toxins would build up and she would get confused, pass out and this would happen frequently. My mother would get tired of this and at times was to weak to make it to the washroom. She would mess on the rug in her room, her bed, etc. My mother had one incident where she had passed out. I called an ambulance and there was blood in the bathroom, which came from her nose, mouth and the side of her head. The ambulance attendance was even shaken up. They resuscitated her. She would be on life support for 3 days.

My mother had no idea what happened. Once again, the worry of her being alone at this time was on our shoulders. She would get infections quickly. The hospital had given her some medication for this where she would be there quiet a few weeks. My mother then ended up in a nursing home until they could get her to walk again and get strong enough. While she was in the hospital, I would have to put in 8-hour shifts at the factory, come home to feed my family and go to the nursing home and bathe my mother. I would rub her down with cream because of her skin chaffing from the linen. I would do this 3-4 times a week.

She again would end up in the hospital from the infection. This would go on for months. She would go home for a month and back to the hospital. The last time at the hospital she was getting her last treatment of the week. It was a Sunday, and she had been at the hospital for 5 days. I rubbed my mother down after her shower. The nurse gave her the last treatment. I was supposed to pick her up to go home on Monday morning. When I arrived to pick up my mother and she looked like someone put her in a deep fryer. There were oozing red-blisters from all over her body. My mother was crying and moaning from pain. This was a shock to me that does not go away even today.

The hospital says this happens sometimes with the last dose of this medicine (I still don't understand that reasoning). It would be a month before she was getting better. I would literally put a jar of burn cream on her every night when I went there. Then they would put her on cancer floor to heal the rest of the time. The one night, I went there and I noticed my mother was swelling all over. My sisters and I couldn't figure this out. She would be getting weaker. Then we looked on her charts and we asked my mother, "Have you been taking your lactulose?" We asked the head nurse there and she said, "no that she hasn't." They couldn't understand why my mother needed to be on the toilet or messing herself all of the time? The nurse took it upon herself to stop giving this to my mother. We, my sister [redacted] and myself, explained to the nurses that my mother was to have the lactulose. My sister and I had a meeting with the doctor, nurse and head nurse in the morning. They said it was a cancer floor and they didn't know enough how to care for a transplant patient. Well, 3 weeks later my mother never got better and passed away on that floor; because of the negligent staff on that floor. My mother did not need to suffer, nor deserved to suffer so much as she did from negligence. My family took good care of my mother and believes we would still have her here today if it weren't for that tainted blood. My mother was a Christian and lived a clean life.

The examples I have given you are the ones that haunt me still. I could go on and on of the poor quality of life my mother endured. The only good thing that came out of this is the transplant and we had her for another 21 years. So you ask me for my opinion on what to do with this money? The surplus should go to all the families that were given the tainted blood. The victims of who suffered dearly along with their families who had to feel and watch the pain their loved ones had went through. My mother had passed away November 25, 2010, but the pain still lives in me what she went through and what I had to deal with for 25 years.

[redacted]

Shelley L. Woodrich

From: [redacted]
Sent: Saturday, August 29, 2015 4:58 PM
To: Hepatitis C Class Action
Cc: [redacted]
Subject: Letter regarding the 1986-1990 Hepatitis C Settlement Agreement
Attachments: [redacted]

Harvey,
Please find attached letters from [redacted] in regards to the 1986-1990 Hepatitis C Settlement Agreement. I am emailing on behalf of [redacted] however I have attached them to this email. Should you have any questions or require any further information please communicate with [redacted] by phone or by email at: [redacted] Please send a confirmation email to [redacted] confirming that you have received these letters.

Thank You,
[redacted]

To whom it may concerns,

I am writing this letter regarding the 1986-1990 Hepatitis C Settlement. My grandmother was one of the victims of this malpractice and it has severely impacted my emotional wellbeing. I was robbed of the opportunity to know my grandmother in any way other then in pain or in the hospital. She was always ill which limited my time spent with her.

Due to someone's negligence I will never know the beautiful person which was my grandmother nor with my friends, my family or children. The only memories I have are of her feeling constant pain.

For these reasons I feel the money should be allotted to the victims and their family members. To assist with any financial struggles or emotional hardships they may continue to face at this time.

[redacted]

To whom this may concern:

There is no value on a life...only the value you posses for life

There is no changing to what has been done...but only to learn and move forward from those mistakes

There is no reason to think negatively...your time is precious and should not be wasted with thoughts that won't allow you to move forward

There is no good that comes from holding hatred...because one day you will ask for forgives, too

There is no reason to be weak and quit...strength and courage is contagious and will help and guide other when they are lost

These are only a few words and beliefs of my late grandmother, [redacted] (1933-2010). The time we are given on this planet is not long enough, before you know it you are watching yourself grow and soon enough your own family grow. I truly feel that the life of [redacted] was taken too soon. Given the unfortunate circumstances, [redacted] was a kindhearted woman, mother and grandmother. A woman, who valued life, valued others and gave hope to the ones with no hope. A woman who would console with a simple touch, a hug and even a smile.

I believe that I have been robbed of a strong soul and great inspiration. My wish would have been for my grandmother to meet my friends and children given the chance. My grandmother passed away when I was 27 years old and this life event had great impact on the life I live today. I wish my grandmother was still around so we could celebrate birthdays, Christmas and small get together, however this was taken away from me due to the negligence of the hospital staff that provided contaminated blood to my poor grandmother. I miss her dearly everyday and my life changed forever the day she was taken form us.

I feel the money should be given to the victims and families of this malpractice as intended to assist with any financial struggles took on during the period of time the poor blood transfusion occurred. It is the victims and their family's rights to be taken care of by our government when malpractice occurs.

[redacted]

Shelley L. Woodrich

From: [redacted]
Sent: Sunday, August 30, 2015 9:23 PM
To: Hepatitis C Class Action
Subject: 86/90

[redacted]

Dear Mr. Strosberg:
My late husband [redacted] and myself were co-presidents of the Hemophilia chapter of Nova Scotia and spear headed the hep c compensation battle. We launched our own private lawsuit after failure of our provincial government to step up to the plate and do the right thing. Nova Scotia broke rank with HIV victims. The compensation package for tainted blood victims sadly lacks in some areas. If there is an excess of funds i would like to see my children's University educations paid for. My two youngest girls are still pursuing higher education. My late husband left me two pissant pensions. I am luckier than most survivors. [redacted] and I always stressed that point. We had good medical coverage and a dental and vision plan. I have always resented the present plans sharing of the loss of services/loss of income with my children. If there is an abundance in the fund I shouldn't have to share that portion and live on what is considered low income. If [redacted] were alive today his income and retirement benefits would be more substancial than what I presently receive.I also resent the administrator asking for my present spouses information and taxes. I consider this an invasion of his privacy.this package was not what we wanted but what we were given based on government legal liability. I am extremely interested in what you can do for the survivors and ant way I can help please feel free to call.

Sent from my Samsung Galaxy smartphone.

Shelley L. Woodrich

From: [redacted]
Sent: Monday, August 31, 2015 6:56 PM
To: Hepatitis C Class Action
Subject: [redacted]

Dear Mr. Strosberg:
I have a few more items with the current plan that should be addressed. I know from personal experience that the average funeral cost is at least ten thousand dollars not 6700.. I know here in Nova Scotia to hire a handyman for any maitenance or work on my house since [redacted] passed away costs me between 40.00 to 45.00 an hour whether it is mowing a lawn, trimming trees, or having the driveway plowed. If [redacted] was not infected and deceased this would not be a concern. I would have kept my job , which was close to our home and very accommodating. I would also like to see the plan set up free unlimited psychological services for survivors. I am fortunate that [redacted] medical plan transferred to me and I have access to these services. I could not leave my home for two years after his death unless it was for groceries, my daughter's soccer schedule, or to pay bills. I couldn't even speak to someone of the opposite sex without hyperventilating. I have a son who at 27 years old is an alcoholic because of his guilt over his teenage behavior and the hell he put his father through growing up. [redacted] and I always said there is the infected and there is the affected.
Sincerely
[redacted]

Sent from my Samsung Galaxy smartphone.

Shelley L. Woodrich

From: [redacted]
Sent: Monday, August 31, 2015 12:56 PM
To: Hepatitis C Class Action
Subject: answer for invocation

Dear Mr. Strosberg

I believe that the profit aliquot on the classes and family class members should be split.
Please inform me about decision of the court.

Best regards

[redacted]

[redacted]

00020094 (TE)

[redacted]

AUGUST 31, 2015

TO WHOM IT MAY CONCERN:

THE LOSS OF MY MOTHER HAS CAUSED ALOT OF STRESS IN MY LIFE. I FELL INTO DEEP DEPRESSION, BECAME PSYCHOTIC FROM NOT TAKING MY MEDS REGULARLY. IT IS A CHALLENGE FOR ME TO LIVE INDEPENDENTLY. THANKS TO MENTAL HEALTH CONNECTIONS AND ALL THE SUPPORT I RECEIVE FROM MY SISTER [redacted] I WOULDNT OF MADE IT THIS FAR. IN THE PAST MY MOTHER AND I WOULD EAT AND TAKE OUR MEDICINE TOGETHER. WITH HAVING SCIZOPHRENIA, BIPOLAR AND BEING A DIABETIC IT WAS HARD FOR ME TO MANAGE. NOW I AM ON INSULIN BECAUSE I DID NOT REGULATE MY SUGAR. WITH MY SUGAR BEING OUT OF CONTROL I DEVELOPED CELLULITIS. IF OSTEOMYELITIS WENT UNTREATED AND NO ONE CARED TO CHECK UP ON ME THIS WOULD OF LEAD TO A GREATER ISSUE, POSSIBLE EVEN LOSING MY TOE. RECENTLY I WAS RELEASED FROM THE PSYCHIATRIC WARD AFTER A FEW MONTH STAY. HOPEFULLY EVERYTHING STAYS IN CONTROL AS LIVE GOES ON.

-SINCERLY [redacted]

[redacted]

Shelley L. Woodrich

From: [redacted]
Sent: Monday, August 31, 2015 1:49 PM
To: Hepatitis C Class Action
Subject: Hep C surplus funds

To whom it may concern,

My name is [redacted] I am the eldest grandchild of [redacted] I am writing to you in regards to the surplus of funds that have been leftover from the tainted blood class action lawsuit.

I feel that the surplus of monies should be disbursed amongst all the families (children & grandchildren) related to the victims of the tainted blood syndrome class action lawsuit. Here are just a few of the many reasons why:

My grandmother was not only my grandmother, she was my mother, my bestfriend, and confidante. She is now deceased as of Nov 25, 2010, thanks to the inefficiency of our government, and their inadequacies, of implementing proper procedures to ensure the quality of blood my Grandmother and others would receiving was safe. Instead my grandmother received blood that was tainted. In turn, she contracted Hep C and sclerosis of the liver. From that moment my life as I once new it changed forever. This began the 21yr cycle of around the clock care for her. My Grandmother no longer was the fun, independent, vibrant woman she once was. The pain and suffering she endured over the years, was absolutely agonizing and intolerable. She needed to be bathed, changed, and cared for 24/7. I lived with her for 7yrs in my early 20's. I cleaned, cooked, shopped, did lawn care, bathed, and fed her most times. All of these things I would do over and over again to have her back.

Due to her health being so poor for so long, and each issue having a snowball effect, she missed the best years of any grandmother and grandchild's life. She was unable to see the birth of my child, or even be near the hospital, because she might have caught something to make her health even worse.

She was unable to partake in Sunday functions at church, where we regularly attended each week, prior to her contracting Hep C.

This not only affected her life emotionally, mentally, and physically, but it affected mine also. I am 44yrs old, and have been on and off of antidepressants since I was 21yrs old, due to depression and anxiety. By 23yrs old, I went through Brentwood, which is an addiction recovery home. I turned alcohol to deal with the stress of my home life, as my life was put on hold to care for my Grandmother.

During the last few years of her life much of it was spent in the hospitals. I would run from work to school to the hospital with my little 5yr old girl. I was a single mother. I helped care for and bathe my Grandmother and my Mother simultaneously, as my mother had a stroke and was hospitalized as well. We spent my daughter's 5th birthday at the hospital that year so that my Grandma and mom would not be excluded. For a young child that was difficult and taxing on us both.

In closing, I would like to say that there will never be enough money in the world to replace the loss of my Grandmother. Nor will the surplus of money if dispersed to the families bring her back to me. The loss of her is as raw as it was the day I watched her leave this earth. However, I do believe in my heart of hearts that my Grandmother who was a generous and kind soul would have wanted the monies to be divided fairly to each of the family members that were affected from Hep C and involved with this lawsuit.

Warmest regards,

[redacted]

RECEIVED
AUG 3 1 2015
SUTTS, STROSBERG LLP

To Whom This May Concern:

My mother, [redacted], contacted Hepatitis C back in the 1980's which was caused by tainted blood. Mom recieved the virus through a blood transfusion. My mother began to experience flu-like symtoms. She never felt good and She began to visit the doctor to find out why She was feeling so ill all the time. Dr. Carter, who was her physician at the time, kept telling her to lose weight and that it was due to her obesity. She continued for years to ask the doctor until finally the family began irate because She was obviously ill and we felt he was not investigating the illness to determine the cause. My mother finally tried a last ditch effort at a Eye reader that could detect illness in the eyes, if there was any. The eye reader expressed that she was a very sick women and needed to demand to see a specialist. The specialist and the family doctor, Dr. Carter, debated over the findings. The specialist saw that she had cirrhosis to the liver and Dr. Carter could not believe it because she never drank alcohol. After much debate it was confirmed that she indeed had cirrhosis due to Hepatitis C. The cirrohosis advanced and she began to decline in health so bad that the toxins began to build up and she became inflated. She had so much scar tissue on her liver that it couldn't filter anymore. My mother's legs began to swell up and the pores in her skin became so enlarged from poision leaking out of them that it started to drain out of her pores like a tap. One night I brought her into the hospital because she became too ill to stay at home any longer and her legs began to smell really bad. We thought that she may lose her legs. I brought her to Grace Hospital in Windsor and they transported her to the University Hospital in London, Ontario. They sent her home with a beeper for a new liver. They wanted to give her a liver transplant My mother had her mother who resided with her, my brother, whom of both who had Schizophrenia and my father

as well who depended on her to
care for them. I had to care for my
father, grandmother, and brother while
my mother was ill and in the hospital.
I had a family of my own also to care
for. Within a short time her beeper for
her new liver went off, they had found
a match for her and we were all estatic
that she would have a second chance
at life. My mother recieved her transplant
which was extremely stressful on the family
The doctors explained to us that she had
only 3 months to live with her old liver and
they also found cancer. We would drive
2 hours back and forth commuting in
the dead of winter to go and visit her.
I can remember swerving all over the

401 Highway in a ice storm with my father who was going through a tremendously stressful period in his life. I could remember being so stressed that I couldn't pass my test for a job at General Motors Trim Plant because I was full of anxiety and worry that I couldn't concentrate. My body was depleted from stress.

My mother spend 6 months in the University Hospital in London. We commuted back and forth to visit her. In the meantime we continued to care for my father, brother and grandmother, who had mental illness. My mother arrived home after 6 months but although we were grateful to have her back with us

She never felt good again. My mother continued to feel the effects of now the drugs, the liver transplant and the Hepatitis C. She wasn't able to do her own housework and she had to quit her job, which she had loved, because she could no longer stand for long periods of time. We even tried to get her to ~~wak~~ walk but that was too much for her. My mother became very needy and my father passed away in 1991, due to a massive heart attack. My mother continues to care for her mother and my brother in her home which both were sick with mental illness. I did housework for my mother and cared for her when she began to get very ill. My mother lived

22 years with her new liver. I believe she lived that many years because she believed in God & took care of herself. The transplant team said that people who believed in God seemed to fair better than the ones that didn't.

The last 6 years of my mother's life was a living hell. I had stayed with my grandfather who died of lung cancer and there was no comparison to the suffering my mother underwent. My mother got diverticulosis after a interferon treatment she had to arrest the deterioration of her second liver. She had diarrhea from the diverticulosis which confined her to her home most of the time for 6 years. Her body slowly →

succumbed to her illness, Hepatitis C, to the point where the toxins would build up in her system. Then she would take lactolose to excrete the poisons out of her liver. She frequently was in and out of the hospital for 6 years. She had been found at home unconcious in her bathroom on the floor unconcious barely alive. The ambulance driver's brought her to the hospital where they had put her on life support. She kept going in and out of the hospital until she no longer could stay at home. There was one time when they administered the wrong drugs to her. They gave her a generic brand, when she was allergic. She broke out with hives filled with blood all over her body. They would itch and drip out all over her body. She endured alot of suffering. alot of times the nurses didn't have time to give my mother a bath because she required special care because of Hepatitis C. My mother finally died Nov. 25 2010 after a long and tumulteous battle with her illness.

Now you ask what my opinion is of what you think the goverment should do with the surplus of money? Although we were eternally grateful to have our mother for the extended years she had. I believe the surplus of money left over rightly belongs to the victims and their families for the loss of my mother's life the loss of her relationship with her and

⑨

that we could have had and would have had with her.

Yours truly,

[redacted]

Shelley L. Woodrich

From: [redacted]
Sent: Monday, August 31, 2015 3:27 PM
To: Hepatitis C Class Action
Subject: Hep8690

Good afternoon Mr. Strosberg,

I am writing in regard to the Hepc Joint committee application for the potential dispersal of funds for the surplus that was found to exist in the account.

I feel that any surplus should be dispersed to the members of the plan. The amount of the monies should be tied to the level of disease that a member has so far experienced. Thus, the model would duplicate the same system already in place which compensates for disease level.

Thank-you, [redacted]

RECEIVED
SEP 10 2015
SUTTS, STROSBERG LLP

Sept 1/2015

To Whom It may Concern

I am writing in reponse to the letter, that I recieved about the Joint Committee for Hepatitis C Settlement.

[redacted] We missed many years with her. She missed knowing her grandchildren, nieces, and nephews. Time we all could have spent together, laughing and loving one another. We are the ones that had to put our lives back together.

So as far as I am concerned, the family members should get the money..

[redacted]

[redacted]

[redacted]

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SEP 04 2015
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SEPT 1/ 2015

TO WHOM IT MAY CONCERN:

[redacted]

PAINFUL MEMORIES - BLOODY NOSES
SWOLLEN LEGS & BELLY
SWOLLEN HANDS
CRACKED BLEEDING FINGERS
CRYING + HEADACHES, CHRONIC HERNIA, BLOOD TRANSFUSION
SICK TO HER STOMACH ALL THE TIME, NAUSEAU, DOCTOR APPNTS, TRIPS TO LONDON, SKIN COLOUR, TRANSPLANT CONSTANT NOSEBLEEDS, HEMORRAGES, DIAHERIA, ALWAYS TIRED, TOO TIRED TO PARTICIPATE IN ANYTHING EXHAUSTED BEFORE THE DAY BEGINS + ENDS. NEEDS HELP TO WALK, TO PUT HER CLOTHE ON, TO GO TO BATHROOM, TO PUT DISHES AWAY, TO MAKE MEALS, TO COOK, TO CLEAN, TO EAT, TO SLEEP, ETC, ETC, DAILY LIVING. TO EAT, TO SIT, TO STAND, TO GET FROM POINT A TO POINT B. THEN SHE STARTING FALLING NO BODY HOME + SHES ALONE + WE DONT KNOW HOW LONG SHE LAID ON CEMENT FLOOR. Many nights we were dragged from our beds and our sleep to go attend hep C. because it ravaged our mother until it took her life and in the end we watch as every ~~orfice~~ orfice bled out from her eyes, ears mouth & nose because the blood aneurysm.. that was 4x the size of mine burst upon her death - and hep C gave us one last miserable memory

So you see Sir, we have all suffered. I am now paralysed on the left side from a brain aneurysm and I used to help Mom from the time I was 6 yrs. old and worked with her for 23 yrs. in the same building at Versa Foods Services. I did a lot for her there as well because she was ill. I know her better than anybody because I am her oldest daughter and spent a lot of time at work and after work and at hom with her. I was also one of the executors of her estate along with my older brother [redacted]. I strongly feel the surplus belongs to the families because there were so many things Mom needed and did without because she was unaware of what she was entitled to or qualified for so she suffered without and cried needlessly. I drove her to a place in Tecumseh to buy a lift chair to make her life easier because I was working in (homecare at the time) so she could get her leg up and it would lift her to a standing position and reserve some of her energy. She bought the chair and loved it. She didn't get to use it long. On November 25th 2010, Hep C WON, we gathered around for the last time to kiss her goodbye and blood poured out from every opening on her face - her eyes, ears, mouth, nose DAMN THAT HEP C. Her aneurysm burst + we did not get to kiss her goodbye! THATS OUR MEMORY

I am the oldest girl, and I stand 2nd oldest of six children of [redacted]. I am also one of the executors of the estate of [redacted] [redacted]. I worked with her side by side for 23 of her 30 yrs. at Versa Foods until I was injured with a back injury and had to leave my job. She continued to work but off + on and not for long because I was not there to help her. You see, I was the one that carried her load because she was too sick and I was the one she relied on to get this and go get that and run for this and carry that for me. She wore me out, but she was my mom and I did it with pleasure not always, but I did it! She also came into the hospital maternity room to deliver my first born. She stayed with me for 14 hrs. while my daughter (was her first grandchild that she delivered.) She was an amazing woman but she won't see her grandchildren grow up and see them have babies because shes gone. She cannot go on vacations with us because she was too sick, she could not stand up her legs were too swollen, her nose would bleed if you took her out to eat blood would pour from her nose + you could not stop it. It ruined your appetite. We could not find underwear to fit her 350 lb. body, so my sister + I with no sewing experience made her a pair of underwear and it took us a whole weekend make them. We used terrycloth towels and sewed them together because we looked all over Windsor and could not find anything big enough to fit her. She blew up so big and suffered so much that I think it killed my Dad just looking at her. This disease has affected the whole family and we have all suffered in every way shape and form. It has tore us apart and I think the surplus should belong to the families that suffered too! I can write a book on the suffering of Hepatitis. and what I have seen from Windsor to London Ontario.

[redacted]

Sept 1, 2015

Dear Mr Strosberg ;

My name is [redacted]
(D.O.B.) Sept. 9, 1965. (Address)
[redacted]

I'm writting to you in regards to the 1986-1990 Hepatitis C Settlement Agreement. For [illegible] years it was hard enough to watch the mental anguish that our mother whent through, not to mentiom my own.

I spent the first 39 years of my life, living at home helping my parents take care of my one and only sibling, my big brother. It was hard enough with him being a hemophiliact, watching him slowly becoming mare & more of a cripple each year that pasted, but when the call came form the South Western Ont. hemophiliact Program telling him he had to go: for a blood test because he just infused that ~~that~~ spesifict lot number of factor IX just 15 minutes earlier. Our entire world came crashing in!

We all knew he had just been handed a death sentence!

About a years latter, I thought I was having a heart attack. When I whent to the E.R., thankfuly it was not a heart attack, but I pulled one of the muscles around my heart from the stress I was under because of what was happening to my brother, [redacted]

My Brother passed away on Dec, 22ND, 2004. Even though it has been just over 10 years ago, the pain is still there, as if it just happened yesterday. He was not just my brother, but my best friend!

No monies can replace this in anyway shape or form, but with myself being the sole surviving care giver and on a full disability my self. And since my brother saw no monies from the Hep-C Settlement. I fell that some of the monies should be fairly distributed among the surying care givers of thier loved ones

Thank you for your time and consideration in this matter

Sincerley; [redacted]

[redacted]

My name is [redacted] Four of my brothers caught hep c from tainted unchecked blood, [redacted]. My brother [redacted] already lost his life due to this disease. I watched him from a man full of life to needing care like a baby, and spending his last few years in hospital. I personally could have used financial help at the time to visit him while he was in Halifax for his liver transplant and while he was in st john's hospital. Our family have went through many trying times because of someones neglect. I remember the day [redacted] doctor told us that [redacted] only had a few weeks to live and we had to tell Him,I don't think any families should have to go through this. We live with fear everyday of losing another brother to this disease. I believe that all the surplus money should be given to the class members and class members families so that they would have all the support that would needed.

[redacted]

RECEIVED
BY FAX
01-Sep-2015
SUTTS, STROSBERG LLP 44901002

THUNDER BAY
SEPT. 2/15

HARVEY STROSBERG Q.C.
SUTTS STROSBERG LLP
600-251 GOYEAU ST.
WINDSOR ONT. N9A 6V4

DEAR SIR:

MY WISH IS TO APPLY EQUALLY THE PROCEEDS FROM THE HEP "C" FUND. I WAS INFECTED BY THE BLOOD TRANSFUSION ON MAY 4, 1989 AT THE TORONTO GENERAL HOSPITAL AFTER MITRAL VALVE OPERATION, FIRST OPERATION ON VALVE WAS ON APRIL 11 [illegible] 1989.

YOURS TRULY

[redacted]

ATTENTION: TO WHOM IT MAY CONCERN

[redacted]

00020092 (TE)

SEPT 2/2015

[redacted]

TO WHOM IT MAY CONCERN:

THIS LETTER IS WRITTEN TO ADDRESS A VERY POORLY MANAGED AND OPERATED BLOOD CARE SYSTEM IN CANADA. ONE THAT SHOULD OF NEVER HAD LEFT TO DETERIORATS THIS FAR TO ALLOW SUCH PAIN AND SUFFERING OF THOSE WHO WERE FORCED TO TRUST THE SYSTEM TO BE LEFT DOWN, DISEASED, SICK UNABLE TO WORK, FUNCTION, LAUGH AND ENJOY LIFE LIKE THEY ONCE DID. NOW THEY ARE DISABLED OR DICEASED.

MY MOTHERS LIFE CHANGED IN 1987 AFTER SHE RECEIVED A BLOOD TRANSFUSION FROM AN HERNIA OPERATION AND CONTACTED HEPATITIS C. SHE EXPERIENCED NOSE BLEEDS, RED SPOTS APPEARED ON HER FACE. FELT FATIGUE, WEAKNESS, TIRENESS, HAD JOINT AND MUSCLE PAINS. - THERE WAS SO MUCH DISCOMFORT AT THE LIVER SITE ASSOCIATED WITH LEG CRAMPS, DEPRESSION, ANXIETY, SLEEP DISTURBANCES WHICH MADE HER IRRITABLE. AT TIMES SHE WOULD HAVE CHILLS SWEAT HOT / COLD. HER EYE SIGHT WAS DETERIORATED, SEVERE OSTEOARTHRITIS WAS AFFECTING HER MOBILITY. DOCTORS FOUND MY MOM ALSO HAD PERIPHERAL

VASCULAR DISEASE RELATED TO HEPATITIS C. THE FLU LIKE SYMPTOMS CONTINUED EVERYDAY. WITH HEAD ACHES. FEVER, WAS SLOW IN HEALING: AND RECOVERY, BRUISED EASILY, WAS SUSCEPTABLE TO ILLNESS, GAINED WEIGHT, HAD WATER RETENTION IN HER FEET, ABDOMEN AND LEGS, FELT NAUSEA, LOST HER APPETITE, BLOATED IN THE ABDOMEN AND HAD DIARREA HER LIVER WAS SO BADLY SCARED THAT THERE WAS NODULES OF CANCER.

THE LAST YEAR OF MY MOTHERS LIFE WERE SPENT IN AND OUT OF THE HOSPITALS. IF I DID NOT CHECK IN ON MY MOM THE DOCTORS WOULD FAIL TO GIVE MY MOM THE MEDICINE SHE SHOULD BE TAKING. AT ONE TIME DR AHMED INVESTIGATED WHY HER BLOOD COUNT WAS SIGNIFICANTLY HIGH, AROUND 3000, BUT AT THAT TIME SHE WAS GIVEN LARGE DOSES OF STEROIDS FOR NO CLEAR REASON TO HIM. THEY WERE HELD AND HER WHITE CELL COUNT CAME DOWN TO AROUND 11. ON ANOTHER DAY DR McFARLANE HAD MY MOTHER TAKING CEFTAZIDIME. DR AHMED COULD NOT FIGURE OUT WHY SHE WAS TAKING THAT ANTIBIOTIC. MY MOTHER BROKE OUT WITH A RASH AND BOILS FULL OF BLOOD AND LIQUID. THE ITCH AND PAIN WAS UNBEARABLE. DR LIANG STOPPED GIVING MY MOTHER LACTULOSE AND MY MOTHERS AMONIA LEVELS WENT UP TO 144. AFTER I COMPLAINED THEY PUT HER BACK ON IT AND HER LEVELS CAME DOWN TO 14. THEN HE TOKE HER OFF TYLENOL WHICH SHE SO

DESPERATELY NEEDED. LATER I CALLED A MEETING TO COMPLAIN ABOUT THE SERVICE MY MOTHER WAS RECEIVING AND SHE WAS BACK ON TYLENOL. ON ANOTHER OCCASION MY MOTHER BROKE OUT WITH OPEN SORES ON HER LEGS. HER LEGS WERE SWOLLEN AND FLUID WAS DRAINING FROM THEM. I WOULD GO TO HER HOUSE AFTER WORK EACH NIGHT MASSAGE AND WRAP THEM WITH TOWELS BECAUSE HER BEDDING WOULD BE DRENCHED. IN 1993 I WOULD GO TO MY MOTHERS HOUSE FOR SIX MONTHS AND INJECT HER WITH INTERFERON. I ACCIDENTLY PRICKED MY FINGER AFTER INJECTING HER. AFTER GOING FOR TESTS I FOUND I DIDNT HAVE THE VIRIS. THIS WAS A VERY DIFFICULT TIME IN MY LIFE BECAUSE MY HUSBAND WAS DYING FROM A VERY RARE LUNG CANCER AT A YOUNG AGE. THERE WERE MANY DAYS AND NIGHTS I SPENT WITH CARING FOR MY DEAR MOTHER. AT TIMES I WOULD BE WITH HER ALL NIGHT AT THE HOSPITAL ANG GO TO WORK AND SET THE LINES UP AT GM. FEEL VERY GRATEFULL TO OF HAD MY MOTHER FOR TWENTY ONE YEARS LONGER BUT ON THE SAME TOKEN I WISH SHE DID'NT HAVE TO DIE THIS WAY SUFFERING NEEDLESSLY WITH ALL THE AFFLICTIONS AND COMPLICATIONS THAT COME WITH THIS DESEASE. ONE MOTHER IN TORONTO LOST 3 PROFESSIONAL YOUNG MEN THROUGH BLOOD TRANSFUSIONS. ONE DIED

WITH AIDS. THIS STILL LAYS HEAVY ON MY HEART. TODAY. HOW DO YOU JUSTIFY THIS WHEN THERE WAS PREVENTION, YET WE CAN TAKE IN ALL THESE REFUGEES, IMMIGRANTS AND GIVE THEM MEDICAL, FOOD, SHELTER AND MORE MONEY A MONTH TO LIVE ON ALONG WITH SPENDING MONEY. OUR OWN CANADIAN PEOPLE RECEIVE LESS. THIS IS WHERE ARE TAX MONEY GOES. WE DONT HAVE ENOUGH MONEY OR JOBS FOR OUR OWN PEOPLE. THERE IS SOMETHING WRONG WITH THE SYSTEM. IT HAS FAILED US TREMENDOUSLY. MY MOTHER WAS A GODLY PERSON. SHE WAS MY BEST FEMALE FRIEND. WE WENT TO CHURCH TOGETHER, TRAVELED, HAD LOTS OF GREAT TIMES TO GETHER BEFORE SHE HAD THE BLOOD TRANSFUSION.

OVER THE YEARS THE DESEASE HAS TAKEN ITS TOLL ON US ALL FOR ALL THE PAIN AND SUFFERING AGGRAVATION IT HAS CAUSED THE MONEY WAS INTENDED FOR THE PEOPLE THAT WERE INFECTED WITH HCV AND THE FAMILY MEMBERS. THIS IS WHERE IT SHOULD GO. ACCORDING TO THE TRAN 2 FORM PAPER DISEASE LEVEL 6 MY MOTHER SHOULD OF QUALIFIED AT THAT LEVEL IN 1989 WHEN SHE HAD HER TRANSPLANT. THIS ALSO WILL BE ATTACHED. THE REST IS IN GODS HANDS.

SINCERELY,

[redacted]

OUR LAST VISIT TO LONDON OCT 12/2010
WITH DR GHENT AND HIS WIFE [redacted].
HE WAS AN AMAZING WONDERFUL DOCTOR,
MUCH THANKS GOES TO HIM FOR ALL HIS
HELP AND SUPPORT OVER THE YEARS.
MY MOTHERS LOOKS CHANGED DRASTICALLY
FROM ALL THE PAIN AND SUFFERING SHE
HAD TO ENDURE. I AM SURE GOD HAS
A SPECIAL PLACE UP IN HEAVEN FOR HER.

[redacted]

Shelley L. Woodrich

From: [redacted]
Sent: Wednesday, September 02, 2015 1:36 PM
To: kp@toughcounsel.com
Cc: Hepatitis C Class Action; jjcamp@cfmlawyers.ca; info@savonitto.com
Subject: 1986-1990 Hepatatis C Settlement Agreement - Phase 2 Sufficiency Schedule

To whom it may concern,
This email serves to provide my input and opinion on how the original settlement fell short and how the surplus should be allocated.
My father, [redacted], passed away at the very young age of 63 in the year 2000, after contracting HEPC from a blood transfusion. He died at a time when he should have been preparing to retire and enjoying his life. He never got to do that. Not by any fault of his own, but by the mistakes of the health care system. My father was not ready to die and we, his wife, his children and grandchildren were not ready for him to die.
Sorry, the below email was originally sent to the wrong email address.

When my father was first diagnosed, the doctors were convinced that he was an alcoholic and accused him of such. Thought he was lying when he denied it. They called my mother and his three children into a meeting to further accuse him to us and asked us to verify that he was not an alcoholic. This was a horrible time, when we first found out when his liver was failing and the doctors would not put him on a transplant list because they did not know about nor understand HepC and kept accusing him of being a drunk. My family was devasted by this treatment.
My father died at a time when I and his grandchildren needed him most. i was going through a very difficult divorce and my children needed their grandparents. My father was gone but my mother was also grieving and not available to help or comfort us.
I have four children. The oldest two got to have their grandfather for 12-15 years and miss him every day. My younger two don't remember him. But in either case, they wish they had him to take them camping and fishing etc. All their friends have a grandfather and he is missing from their lives and they feel it every day.
I got re-married and wanted my father to see that I am finally happy and have a good man. He will never get to see that.

My new husband has essentially become my mother's husband as well. He cuts her lawn, he does all her chores and repairs.
The cost my father's life? For his children $5,000 and his grandchildren $500. I think that was very unfair. There is no price on a life, no amount of money that can bring him back, but $5,000 and $500 respectively is a slap in the face.
Other people who contracted HEPC by their own fault got compensated a heck of a lot more than those of us who had no choice.
Respectfully,
[redacted]

To the Joint Committee,

I still hesitate before I say aloud or type the words "Hepatitis C". When I was 19, my face would flood with blood any time I heard the word Hepatitis, and it took a counselor to bring me to physically say the words "Hepatitis C" out loud. It is painful for me to talk about something that I've habitually kept a secret from my close friends and extended family members since I was young due to the negative stigma associated with the virus and also my fear of it. Yet I feel my experience living with Hepatitis C (Hep C) is unique and worth sharing. I also suspect that other class members struggle to speak about this topic and hope my experience might speak for some of them as well.

In order to address which areas of the settlement that I feel fall short, I feel I must first address how the contraction of Hep C has impacted me personally, as it is my belief that it is the impersonal nature of the compensation fund distribution and aid offered to class members that fails to fully meet the specific needs of each class member, especially in unique cases.

I would like to discuss this problem through my own experience, unique in the sense that I have suffered immensely, not as much from symptoms of the virus itself, but from treatments for Hep C, coping with my fear associated with having Hep C, and ongoing conditions that by medical standards are considered to be indirectly related to the virus. As a result, I have not qualified for additional compensation, other than to cover medical costs deemed appropriate. In my opinion, due to the lack of acknowledgement for the complex and unexpected health implications related not only to contracting Hep C, but living with and treating Hep C, I am perhaps one of many to have slipped through the cracks of this government aid system.

I first discovered that I had Hep C when I was 7 years old. I learned that I contracted Hep C through a blood transfusion at birth and have had Hepatitis my entire life. I can remember crying as I ran home from school one day in grade 5, because a Hepatitis vaccination nurse showed the class an educational video that used a cartoon monster to represent Hep B, and an uglier monster to represent Hep C. That monster depiction was how I understood the virus that I had as a 10-year-old, and the thought manifested as a great burden of fear in me. My anxiety over the matter persisted throughout my youth.

During my second year of university, I underwent the only available medical treatment at the time: 10 months on Interferon and Ribavirin. The physical symptoms of this treatment are known to be horrific, but for me, it was the psychological side effects that were particularly devastating. This treatment had a profound impact on my self-confidence, social engagement, and an already deep-seated anxiety. I reflect upon this period of my life as one of great loss. When contemplating the decision to undergo treatment, I thought about the side effects of the drug, the timeline, and I measured out the pros and cons. I took some time to imagine what it might be like to have the treatment and how relieved I'd feel to rid my body of that cartoon monster that I still felt possessed by, silenced by.

In practice, the experience of the treatment is far more brutal than what I had imagined. Before agreeing to the Hep C treatment, I didn't account for the isolation I would feel, or for the friendships that would fall apart when I wasn't myself, or for the lasting mental distress that wouldn't go away, even after my hair grew back and the treatment was completed. I didn't realize that I would be trading that Hep C monster for a series of new ones. I didn't account for these things because they aren't detailed on the treatment's list of side effects.

It has been 4 years since I've completed the treatment and my mental health has continued to suffer. I have been diagnosed with severe anxiety disorder, panic attacks, depression, and generalized anxiety disorder. I have suffered persistent long-term physical side effects from anxiety, including burning skin sensation, numbness in my hands, feet, and lips, chest tightness, fatigue, insomnia, muscle tightness, and pelvic floor dysfunction. Above all, my pelvic floor dysfunction has been the most challenging physical manifestation of anxiety. It took several years, five urologists, two emergency visits, and countless hours of diagnostic testing and surgical procedures to diagnose. It causes debilitating pelvic pain, severe urinary frequency, urinary urgency, sexual dysfunction, and has served as a barrier to my employment, romantic relationships, as well as to carrying out my daily life.

As you can see, the way in which Hepatitis C has affected me has been complex. It has been an ongoing domino effect of health problems. In the last year especially, I've spent the majority of my time either in bed or seeking medical attention. I've struggled to hold down a full time job, provide for myself as an adult, and I continue to do so. I have not been compensated for these disabilities since they are not covered by "the 1986/1990 Hepatitis C Class Act", and consequently our government wrings their hands of responsibility.

On top of all that, because I underwent the Hep C treatment before completing university, and have suffered from impaired health ever since, I have never been employed long enough to qualify for disability leave through an employer, employment insurance, or any other social aid program other than the "1986/1990 Hep C Class Act". Indeed, these funds have played a vital role in my survival, allowing me to provide for myself in times of unemployment. However, I have been living on my own for 7 years, and in that time have spent the majority of my compensation money. It is only a matter of time before those funds evaporate entirely, and I'm left with nothing but my disabilities and no safety net.

Given all of the above, it is of my opinion that the surplus of funds goes towards the following:

1. Research that seeks to understand the entire impact of Hepatitis on one's life (beyond the medically listed symptoms) with a focus on the indirect physical and medical consequences of having Hepatitis C, and the entire impact of all Hepatitis treatments on Class Members' lives.

2. Providing a social aid program that seeks social and financial support for class members who require additional aid due unforeseen consequences arising from contracting Hepatitis C, especially in cases where class members do not qualify for additional compensation under the 1986/1990 Class Act.

3. To the class members themselves, as it is my belief that the amount of compensation distributed does not account for the entire impact of Hepatitis on one's life, including indirect symptoms and the mental distress associated with having Hepatitis C.

Thank you very much. I hope you take my letter into careful consideration.

[redacted]

THURSDAY, SEPT. 3/15

HEP C 86/90 JOINT COMMITEE.

I FEEL ALL THE SURPLUS SHOULD BE DIVIDED AMONG THE CLASS MEMBERS AND FAMILY CLASS MEMBERS.

IT IS OUR LAW SUIT AND WE WON.

I CANNOT UNDERSTAND WHY THEY WOULD WANT TO KEEP THIS MONEY IN TRUST.

WHO WOULD THEY KEEP IT FOR?

PLEASE KEEP US INFORMED.

[redacted]

RECEIVED
SEP 10 2015

SUTTS, STROSBERG LLP

[redacted]

LLP

Dear Mr. Strosberg, & Joint Com

I want to Thankyou for your
support and commitment to the Cl
Members and Family Class Membe
regarding the Hepatitis C Settle
In my opinion I firmly believe
there is a surplus in this Trust F
should without a doubt be awarde
Class Members First (if there are
surviving ??) then some of the surp
should be awarded to the Family memb
who had to watch and endure the Pain,
Suffering and the Loss of Our Loved One
due to the needless infection of Hep C
Thankyou again for considering our
input.

Sincerel

[redacted]

[redacted]

Shelley L. Woodrich

From: [redacted]
Sent: Friday, September 04, 2015 11:29 AM
To: hepc@strosbergco.com
Subject: Fw: re:"The Joint Committee want to Hear From You"

Subject: re:"The Joint Committee want to Hear From You"

Mr. Harvey Strosberg, Q.C.
Sutts Strosberg LLP
600-251 Goyeau Street
Windsor,Ontario N9A 6V4
Tel-1-866-228-0073
E-Mail: hepc@strosbergco.com

[redacted]

Original Claim# 6780 Sept 04,2015

Dear Mr. Strosberg,

I was advised by "Carol" in the office of the Administrator at Hep"C' Centre; That You Mr. Strosberg, would be a committee member, responsible for New Brunswick Claimants; and that I should get in touch with you.

I am the Approved HCV Personal Representative as well as the Dependent of the deceased HCV Infected Class Member, who was my husband [redacted], He passed away on March 13,1999.Of Hep"C".

I was receiving a compensation for loss of services in the Home,(Beside the original compensation payment).

I received full compensation up to the end of 2010, paid at the beginning of 2011.

However I was advised that for 2011 ,I would only received" part" payment up to March 31,2011. That was the DATE that I was told that the PRIMARY INFECTED PERSON's LIFE EXPECTANCY would be reached.FINAL Payment compensation for" Jan,Feb&Mar 2011" was received in february 2012.

My husband passed on March 13,1999, he would have been 72 years old on March 19.

So on March 31,2011. should he had lived; he would have been 84 year old ."Being born on March19,1927".

WHO KNOWS HOW LONG HE WOULD HAVE LIVED??? One thing is sure..... He did not deserved to die with HEP"C"

The last 9 months of his life was pure torture ,he was hospitalised for the whole time ,being between life & death.

He got into" Coted Mode" so many time,The staff at the Hospital would call and tell me that if I wanted to see him one last time that I should get to the hospital immediatelly; I would naturally. But often; after a while,they would tell me" He made it once more!". I averaged my visits four time a day to the hospital; and I had a business to take care off.

He passed away at 3 am. on March13, 1999. I was with HIM. My husband was born in Poland and was a Holocaust survivor.He came to Canada in 1948,and was a Canadian citizen.

I can assure you that my husband sickness as well as his early death affected me in many ways. Mentaly ,Physicaly & Financialy. I was born on May 07,1941;I am now 74 years old.

This letter " The Joint Committee Wants to Hear From You", was great news to me .I would be quite please If I would qualify for extra compensations.

Please do not hesitate to contact me If you need more Informations. I would appreciate that you would LET ME KNOW IF I QUALIFY FOR Extra Funds.

Thank You

Sincerely [redacted]

I would very much appreciate if you would " Please confirm reception of this letter " Thanks.

From: [redacted]
Sent: Saturday, September 05, 2015 9:52 AM
To: jjcamp@cfmlawyers.ca; info@savonitto.com; Hepatitis C Class Action
Subject: Hepatitis C Settlement Agreement

I would like to thank you for the opportunity to provide input into the matter of the surplus from the Hepatitis C Settlement Agreement funds.

I am the daughter of [redacted] who died of Hepatitis C complications in 1999, after having received an infected unit of blood during surgery several years earlier. I helped nurse him until the time of his death and saw how much he suffered as the result of this infection. He had stated sadly to my Mom, upon hearing about the possibility of a settlement payment, that he would never see that money, but that he hoped she would get enough to help her for the remainder of her life. My Mom is now 87 years old and has lived without her husband for 15 years. She did, after a very painful and difficult application process, receive funds from the Settlement agreement, which continued for several years. She had expected it for a longer time, but was told there had been an administrative error, and the funds stopped. I do not understand why the funds did not carry on until her death, as she is still without her husband.

I also believe that the $5,000 paid to the children of the Hepatitis C patients was not really an adequate amount. My brothers and I lost the love and guidance of our Father, my children lost their beloved Grandpa. This loss has left a great hole in all of our lives. I know that no amount can bring him back, or adequately compensate for his loss, but at the time, it almost seemed that the amount given was an insult, rather than a gesture of compensation.

I am sure there are many others who feel the way I do. Although much of the anger I have felt because of the senselessness of my Father's illness has passed, the loss and the grief are still present.

I am thankful that much advancement has been made in the cure for Hepatitis C, and only wish it had come in time for my Father. If more work is needed in this direction, it would seem right that some of the funds could be used to search for further treatments and cures. However, as the money was set aside for victims and families of Hepatitis C infection, I believe that, at least, more of it should be given to those it was intended for.

Again, thank you for requesting and considering my input. If you have any questions, please feel free to contact me at this email address [redacted] or by phone at [redacted] I have moved, so my current street address is [redacted]

Sincerely, [redacted]

[redacted]

September 7, 2015

Joint Committee Member
Kathryn Podrebarac
Via email: kp@toughcounsel.com

Dear Joint Committee Member:

Thank you for your letter "The Joint Committee Wants to Hear from You" received August, 2015. I appreciate the opportunity to provide information and input.

I am a 65 year-old male diagnosed with hemophilia at birth. Hemophiliacs are reliant on blood products to sustain life. It was devastating news when I learned that I had contracted hepatitis C from Blood I received in Canada *in 1986* while using blood products to treat major and minor bleeds.

Generally speaking, hemophiliacs have continued to suffer long after the Hepatitis C Settlement was reached on June 15, 1999. Those of us with chronic hepatitis C experience lives that are not only extremely challenging, but also unpredictable. It is also worthy to note that the mental anguish and distress we feel does not diminish over time. Since receiving tainted blood, we have been diagnosed with fibrosis and are at high risk for developing cirrhosis of the liver, liver cancer and/or end-stage liver disease. I understand that research is beginning to show that individuals fortunate enough to be cleared from the effects of the hepatitis C virus are experiencing a higher level of mental impairment amongst those with this chronic infection.

Personally, I have completed two grueling and lengthy hepatitis treatment regimes since contracting hepatitis C. The first treatment, completed in 2004, was unsuccessful and necessitated a long and stressful waiting period while a new treatment protocol was developed. This new protocol was not available to me until August 2013. I completed the year-long treatment in July 2014. During both treatment periods, I experienced many significant negative side effects/symptoms including the following: extreme fatigue, anemia, short-term memory issues, headaches, pyrexia, myalgia, rigors, insomnia, nausea, alopecia, irritability, arthralgia, anorexia, dermatitis, itching, depression, mood swings, and hypothyroidism. I have been unable to work since starting the treatment in 2013.

It has been slightly more than one year since I completed the latest regime. I am pleased to report that this treatment was successful; however, I continue to suffer significant symptoms on a daily basis and I am coming to terms with the possibility that they may not diminish over time.

.../2

In August 2015, I participated in an in-depth neuropsychological testing session and it was reported that identified mental impairment and cognitive deficits are suspect of hepatic dysfunction secondary to hepatitis C.

Over the last several months, I have had four significant falls which were attributed to on-going weakness from the 2013 hepatitis treatment regime. I am participating in a scheduled physical therapy program to strengthen specific muscle groups. As well, I am now required to take medications for hypothyroidism; another complication from the treatment.

In closing, I would like to say that hepatitis C is a life altering disease. With or without the antiviral approach, hepatitis C leaves hemophiliacs with lingering complications including (but not limited to) the following:

- Negative impact on longevity, i.e., premature death;
- Morbidity, i.e., pain and impaired health-related quality of life; and
- Economic consequences, i.e., direct health care expenses and indirect costs related to lost family income due to premature death or disability.

It is my recommendation that the Joint Committee appeal to the Courts for the surplus to be returned to the group of Class Members and Family Class Members that have been afflicted with hepatitis C. Individuals living with this chronic debilitating infection, and their families, are most deserving of this payout.

Thank you for the opportunity to comment on this important issue.

Sincerely,

[redacted]

cc: Michel Savonitto info@savonitto.com
Harvey Strosberg Q.C. hepc@strosbergco.com
J.J. Camp Q.C. jjcamp@cfmlawyers.ca

Shelley L. Woodrich

From: [redacted]
Sent: Tuesday, September 08, 2015 12:11 PM
To: Hepatitis C Class Action
Subject: HepC Joint Committee

Harvey Strosberg Q.C.
Sutts Strosberg LLP
600 - 251 Goyeau Street
Windsor, Ontario
N9A 6V4

Dear Mr. Strosberg,

I am writing on behalf of the wife, children, step-children and grandchildren of [redacted] who died in 2005 subsequent to contracting Hepatitis C from a blood transfusion during heart surgery in Toronto. I am his step-son. While we are grateful for the assistance we have received as a result of the Settlement Agreement, we would like to make a few comments on why we think the settlement fell short.

[redacted] wife, [redacted] is still in good health at 96 years of age. She continues to live by herself in the apartment that she shared with [redacted] As the years have gone by, his assistance in maintaining their home is missed more and more. Before he contracted Hepatitis C he was an extremely vigorous man and in excellent health (other than the emergency heart condition which the surgery cured). He helped [redacted] regularly with household chores, transportation and shopping. He also provided his wife with care and companionship which she has now missed for 10 years and will continue to miss. We, the children and step-children, benefited from [redacted] warmth, compassion and care. It was distressing to see him decline as a result of the disease although he mounted a brave and determined struggle. We have missed his enthusiasm for our efforts and his dedication to and love for his children and step-children.

His grandchildren have missed out on the warmth and the joy that he showed for all of them. As the years have passed they have become adults with many decisions and choices to make. They no doubt would have their grandfather's guidance and support as he tried to help them.

We appreciate this opportunity to state again that the sickness and loss of our father, step-father, husband and grandfather has been a very difficult experience which continues to have an impact as the years go by.

Yours truly,

[redacted]

To whom this may concern,

My name is [redacted] and I have received a letter requesting my input on how the surplus for Hepatitis C should be dispersed. I personally feel that the immediate family members of the deceased victims of Hepatitis C should be entitled to receive a portion of the surplus. In no way will money replace the loved ones we lost but it can surely reduce stress in our lives. The family members of victims of this disease are suffering and have been suffering due to failure to screen the blood properly prior to transfusion. My time with my grandmother had come to an end on the 25th of November in the year 2010. She was a lovely woman who did not deserve the symptoms suffered daily from this deadly and terminal illness. The times spent with her limited the activities due to the constant fatigue, pain and swelling she had experienced. Due to whatever the reason was for this contaminated transfusion whether it was negligence, inexperience, lack of knowledge or pure laziness my family and I now celebrate birthdays, Christmas's and family get together's without our Grandmother.

Secondly, I don't think the previous settlement was fair. The amount of money that was granted was barely enough to make ends meet for a month. If a human life was worth that little to the Hepatitis foundation then there are more questions that need to be answered. If you had the chance to meet her, you yourself would realize the amount of heartache my family and I suffered due to her early passing. Kindness and love was the only thing that flowed through her veins. She never took her frustration and pain out on anybody and always rendered positive thoughts. She always taught my family and I to live a positive life and never take it for granted. Through her passing, it's quite clear that lives can lie in the hands of other people. We should be able to trust that our health care professionals are experienced and knowledgeable in the field that they practise in without making preventable errors that could cost or be detrimental to another human being.

I hope this letter gets through to whoever is making this decision of the surplus.

Thanking you in advance,

[redacted]

1333251

[redacted]

September 9, 2015

VIA REGULAR MAIL

Harvey Strosberg Q.C.
Sutts Strosberg LLP
600 – 251 Goyeau Street
Windsor, ON N9A 6V4

RE: 1986-1990 Hepatitis C Settlement Agreement – Surplus Input FOR [redacted]

Dear Sir/Mam:

Please see attached my grandmother's letter regarding the input for the surplus. My grandmother, [redacted] has had her new address updated already late last month.

Sincerely,

[redacted]

September 10, 2015

Attention: Hepatitis C Joint Committee:

I received your correspondence a little over a month ago asking for my input in regards to the surplus monies that is currently in the Trust Fund. I was so overcome with anger that it has taken me this long to sit down and actually write this letter.

My father, [redacted] went for what we thought was routine surgery. Little did we know that years later he would be advised that because he had that surgery, he was now going to die because the Red Cross had knowingly given him contaminated blood. Our family was never the same again. My dad was a go-getter; nothing could stop him; and even after he came to terms with having this deadly diease, I think deep down he thought he could beat it. On October 27, 2010, Hepatitis C won and my father died after suffering for many years. In return for the Red Cross murdering my father, I was given a cheque for just a little over $6,000.00 and in order to cash this cheque, I had to sign papers stating that I would not ask for any further funds from them.

Just last week on TV it was announced that a family would receive over six million dollars from a police department for the accidental death of their family member. What the Red Cross did to my father was no accident; they knowingly gave him contaminated blood, which in turn led to his death. You ask me what I think you should do with the excess money? I'd like to ask you what you think should be done with it? Is $6,000.00 all my dad was worth. I cannot believe that correspondence like this is even sent to families. My mom is currently in a court battle with this so called Committee as they refuse to pay her the monies that they stated they would because the trust cannot afford to do so and then I get this letter advising of the $236 to $256 million surplus. Unbelievable! It seems the committee is more content to give the trust funds to lawyers then to the the Family Class Members!

Compensate the families to the fullest extent for the murdering of their family member; that's what I think you should do!

[redacted]

[redacted]

HARVEY STROSBERG QC.
SUTTS STROSBURGH LLP
600-251 GOYEAU STREET
WINDSOR, ONTARIO N9A 6V4
TELEPHONE 1-866 222 0073
E MAIL HEPC@STROSBERGCO. COM

11.09.2015

Dear Mr STROSBERG,

IN responce to your letter regarding the joint committee mandate to implement the 1986 – 1990 HC settlement agreement, as a family class member my responce is that I would like to put forward a claim of the surplus as I feel my brother was taken from his family a lot sooner, because of his contracting Hepatitis c.

Yours Sincerely

[redacted]

[redacted]

[redacted]

Sept 12, 2015

Harvey Strosberg Q.C.
Sutts Strosberg LLP
600-251 Goyeau Street
Windsor, Ontario N9A 6V4

RECEIVED
SEP 17 2015
SUTTS, STROSBERG LLP

Dear Mr. Strosberg;

Concerning the question about the Trust Fund surplus from the 1986-1990 Hepatitus C Settelment. The funds which are surplus should be dispursed to the members and familys of those who have already recieved compensation. Not withstanding that some members have signed off that they have no further claims as I have in the case of my sister Mrs Jean Foshiem of Camrose Alberta. Given the fact that the surplus is quite substantial everyone involved should be re-concidered for further compensation.

Yours Truly

[redacted]

Shelley L. Woodrich

From:
Sent: Sunday, September 13, 2015 10:14 PM
To: Hepatitis C Class Action
Cc:
Subject: Hep C Letter to Joint Committee (Sep 12, 2015)
Attachments:

September 13, 2015

Email: hepc@strosbergco.com

Mr. Harvey Strosberg, Q.C.
Sutts Strosberg LLB

Dear Sir:

The following information and documents refer to / Hep C claim # 1493. Included is a note from niece in email format following this letter and and a PDF hand written note from Ms. files (attached) for your information.

I would first like to introduce to you my sister ..
She was 2 years older than I. I like to think that she looked after me in a "big sister" kind of way until 1989 and then I looked after her.

was a divorced independent women with a home, car and successful career.
We were best friends.

She was a special loving aunt to her niece, my daughter . was childless so she was totally devoted to …… was part of life everyday. Sleepovers, cooking and baking lessons were regular occurrences for them. is now a mother herself and unfortunately her son will only know through stories and our memories of her.

loved music and had instruments at her home including an accordion and an electric keyboard. was the lucky recipient of these special fun music lessons with Dorothy.

favourite time of year was Christmas. At dinner, every year, without fail, she would say "This is my favourite dinner!!" but you had to see her face and hear the happiness in her voice to appreciate how she felt.
I miss that face.

and I had many wonderful times together. She was an easy person to be with. She was shy until someone said the first "hello" then you couldn't stop her from talking.

After a four month struggle was finally released from Hamilton's St. Joseph's Hospital in the fall of 1989. She suffered a brain infection caused by a severe staph infection which left her with mental problems and short term memory loss. She lived with my family until able to return to her home in Hamilton. Unfortunately in 1991, because of her job loss and being unemployable because of this illness, she was unable to afford her home and sadly had to sell. It was a very difficult time for her and her family at this time because she was unable to enjoy the life she had planned for. Dorty then went to live with our Father "Papa". He was happy for the companionship since our Mother had passed away in

1978 but it was difficult for a 50+ women to "go back home". Papa passed away in 1997 and again Dorty was without a home.

was my best friend. We shared every Saturday together. We chose in Hamilton as the best location for her to live because of its close proximity to St Joseph's Hospital. As you can appreciate she had many Dr's appointments and emergencies. I would drive to her apartment in Hamilton or bring her back to Burlington. She had lost her driver's licence due to her illness so she really enjoyed our Saturday routine. She would stay for dinner and I would drive her home. I looked after her finances and all her other matters.. Because I worked at I was always close by if any emergencies should happen. Many times during the week I would have to go after work to make sure she was ok or to drive her to the General Hospital or Dr's appointments. In loved doing this. I know she would do the same for me.

On January 27, 2005 called me at work. It was first thing in the morning - 8 am. She said she was in pain. A lot of pain. And she didn't know what to do. I told her to hang up and call 911 right away and I would meet her St Joseph's. Prior to this call I had assumed she had been feeling ok as she never informed me otherwise.

In Emergency she was fast-tracked through the paperwork and Dr. Goodacre, her Hep C Specialist was by her side so very quickly. It was reassuring to know that he would be looking after her. surgery was scheduled as soon as they could get a team together and that night she had her first surgery. and I stayed with her until the moment they wheeled her down the aisle. I will never forget her trying to look for us at the end of the hall and saying I'm so scared!" She had never called me !
That was the last thing she ever said and it still makes me cry when I think about it. never woke up after that first surgery. I know now that she was only being kept alive with life support. Her second surgery was February 1, 2005. I have no idea why this was performed. Not until February 5 when I questioned a different Dr did they say she was brain dead. The next morning February 6, three days after her birthday, , my husband and I held her hands when the devices were turned off. She was gone within 3 minutes.

It is so unfair that we have lost . She was so loved by our family and despite her illness never complained. She enjoyed life and loved our small family. She was deprived of her life early and living with Hep C was a devastating experience. A great deal of time and heartache was spent supporting her over the years but the heartache suffered now is felt much more. She was my only sibling and both parents have passed. I feel lonely without her even though I have my wonderful family. I will never forgive our Government for this horrendous catastrophe.

I have two attachments. One is a letter from my daughter Sabra Hanham. The second attachment is from .

I found the attached hand-written note in amongst her Hep C files. She was a diligent note maker. As a result of her memory loss I suggested she write and date everything so she wouldn't forget. I didn't realize she took me so seriously until after her death I found her notes, all dated, all referring to her experiences dealing with Hep C. This is the only undated note but I did want to share it with you.

I feel the money should be distributed to the survivors, if any, and their families. Only we know the heartache that this preventable disease has caused. We remember the faces so scared and of course knowing that there is no cure for many of them. never had a chance.

Thank you to the Members of the Joint Committee for allowing the Hep C families to express their very personal feelings.

Respectfully Submitted

From: "
To:
Subject: letter...
Date: September-13-15 12:04 PM

Our family lost a beautiful person. A woman who truly lived every moment of her life for others. A daughter, a sister, an aunt, who spent every moment of her life helping, caring for, and doing everything she could to make the lives of those around her better.

She did this though, in the midst of terrible and horrendous pain. Pain which we watched her endure every moment of everyday as she fought through a physical battle no one should have to witness, let alone endure.

My aunt was a constant in my life from the moment I was born. She was my mothers best friend and having no children of her own, spent her life making sure my life was filled with everything she knew. Love, humour and music.

THIS is the woman I knew, and this is the woman I chose to remember.

What I wish I could forget, but know I never will, is what I had to watch her go through for the last years of her young life.

Because of negligence which came from our medical system which is supposed to protect, my beautiful Aunt was wrongfully infected with a disease which in an extremely short time took everything from her. And ultimately took my Aunt from my family. Something I know should never have happened and something I or my family will never forgive.

Watching the person you love literally slip out of your life is a hard enough thing for anyone to go through. But it becomes more maddening, hurtful and heartbreaking when you know that this loss of a beautiful soul was something that could have been prevented. We watched a strong beautiful woman become a mere shell of herself, forced to deal with indescribable pain every single moment of her life once she had been unknowingly infected with diseased blood during a "routine" blood transfusion. We put trust in a system that is there to protect us. When we are sick, hospitals and doctors are supposed to make us better. In this case, it was the hospital and healthcare system that ultimately killed my aunt, my moms sister and best friend, and took from us the one thing that held our family together. For that I will never forgive.

I will never get to see her smile again, I will never for to hear the laughter that my mother and my aunt shared so naturally, and I will never be able to introduce my son to the woman I believe helped shaped my life and taught my entire family the meaning of togetherness.

Sent from my iPhone

#48 I'm ANGRY WITH RED CROSS + THE HOSPITAL FOR BEING:

- NEGLIGENT + IGNORANT BECAUSE THEY FAILED TO TEST THE BLOOD SUPPLY BEFORE GIVING BLOOD TO UNSUSPECTING DEATHLY ILL PATIENTS INCLUDING ME.. **NOW** I HAVE HEPATITIS C.

- I HAVE CONSTANT PAIN (a little @ this time) AND I KNOW THE PAIN WILL WORSEN A LOT + BE QUITE UNBEARABLE.

- THERE IS NO CURE!!

- ALSO, I HAVE A GREAT SISTER, ~~A NIECE, + BROTHER-IN-LAW~~ WHO ~~HAVE~~ HAS BEEN A GREAT HELP TO ME.

- I KNOW THAT THIS POISONOUS BLOOD causes a lot of horrible medical problems.

~~All my life I've heard.~~ FOR years throughout my life I've heard that our blood is SAFE FOR TRANSUSIONS because blood was ~~tested~~ TESTED FIRST... HA!!

However TESTING FOR BLOOD when I received a Donor's contribution in 1989 was non-existent ∴ I received poisonous blood that made me sick.

ALSO: WHY DID my Hepatitis C Diagnosis take 7 years??

Maybe if Hep C caught a few years earlier I probably would have a better chance for Treatments --

NOW even treatments + or Medications are too dangerous for me - - -

[redacted]

Attn: Members of the Joint Committee

RE: 1986-1990 Hepatitis C Settlement

In 1990, my grandfather, [redacted] was diagnosed with non A, non B, hepatitis after he received a blood transfusion in a Halifax hospital. After seven years of declining health and finally his death in 1996 at age 97, his family was told that he actually had contracted hepatitis C, not A, not B as had been previously told his family. Prior to his receiving the transfusion, he was an active 90 year old, walking 3 km daily and being a major contributor to the well being of the home he shared with his wife, my grandmother. From 1990 until 1996, his health declined significantly and he physically suffered extreme itching, bleeding, and insomnia. Despite the numerous creams prescribed to alleviate the symptoms, there was really no relief. During this time, he did not know what his illness was, and we were not told that he had Hep C and it was only upon his death that we learned the diagnosis.

Our grandfather's illness put an immense strain on my grandmother and my parents and my aunts and uncles. Our grandmother, in her late eighties at the time, made much effort to help our grandfather with creaming his body, washing his clothes and running their household on their own with no outside support. It was impossible. My mother and my aunts and one uncle, all working full time, took turns making weekend trips to Cape Breton to help her.

I remember most when it was decided that my grandfather would come to live in my childhood home with my parents while my grandmother lived with my uncle in Halifax. I remember vividly the work my parents did to ensure that my grandfather was as comfortable as possible. My mother, in particular, and my brother spent time assisting my grandfather with regular routine habits; bathing, feeding, creaming his body, and helping him through the night when needed. I remember that this put a lot of strain on my family, even though we all loved our grandfather.

Looking back, I feel angry and saddened because my grandfather was so healthy prior to this diagnosis and I am so sure that he would have lived longer had it not been for this mistake that was made. Further he was not ready to die – he kept saying "I am getting better" and had had no intention of dying as he was very active in his community in Cape Breton – walking the beach, playing the fiddle, participating in church parish community activities, and knowing the long history of his life and family.

In light of this and the questions asked by the Joint Committee, I do not feel that my grandmother, my mother, my aunts and uncle, and all of the grandchildren were sufficiently compensated. Thank you for reading this letter and for pursuing just settlements for all.

Yours truly,

[redacted]

From: [redacted]
To: Hepatitis C Class Action
Subject: 1986-1990 Hep C Settlement Agreement
Date: Monday, September 14, 2015 3:42:34 PM

September, 14, 2015

Dear Mr. Harvey Strosberg Q.C,

I was diagnosed with Hepatitis C in 2010. Up until 2009 I had been working in Forestry related work. I started to feel very tired all of a sudden and went to see my family doctor. After extensive testing and many hospital visits I was told I had Hepatitis C and cirrosis of the liver. I was told I would no longer be able to work.

I applied for the Hepatitis C Class action and was approved. I spent the next two years waiting and worrying. My case finally went to court before receiving a settlement of $316,467.07. I was told this would be a one time payout.

At the time I had to give up work I was just 53 years old.I still had 12 years left to work. I was making approx. $45,000 a year. The money I was paid out only averaged $26, 637 per year. This is a lot less then I was use to making and living off. Plus I had to pay for all my medical exspenses, the many trips to the hospital, medications, hotel stays because of travel. This really ate into the sttlement payout.

Over the last two years I have been extremely sick. My wife and son whom I reside with had to both take many days off work to care for me, arrange for me to get to appointments because I was to sick and weak to take care of myself. It has been a very stressful time. The emotional strain on all my family and the financial strain was extensive.

My brother [redacted] was also diagnosed with this terrible sickness and my whole family was devastated when we lost him because of this horrible sickness.

I would like to be able to live out the rest of my days without having to worry about being able to survive financialy; to not have to worry about paying bills and put food on the table. My family has suffered so much. I suggest you take this surplus and pay it out to people like me. People who need it to survive. I believe I deserve to live the rest of my life the best I can with out the extra stress and worry financially.

My case file number is HC-11-21705

Sincerely,

[redacted]

RECEIVED
SEP 22 2015

Sept 15, 2015

[redacted]

Mr. Harvey Strosberg Q.C.
SUT[illegible]OSBERG LLP
Sutts Strosberg LLP
600 - 251 Goyeau St.
Windsor, Ont. N9A 6V4

Re: 1986 - 1990 Hepatitis C Settlement Agreement.

Dear Mr. Strosberg,

If I understand the joint committee's letter to me, you are unsure of what to do with the surplus left in the Trust Fund.

My father died a slow and painful death because no one bothered to read his chart, and unnecessarily transfused him, giving him the Hep. C virus in a Hamilton, Ontario Hospital. He was undergoing a routine surgery there.

My siblings and I looked after him until the time of his death.

Without question, the surplus should go to the victims or their remaining families for the pain and suffering they endured. Should they wish to donate the money to the liver foundation or other charity, that is up to them. Give the surplus to the victims.

Sincerely,

[redacted]

Dear harvey & hep c

My name is i am writing in regards to the notice i recieved about the surplus hep c has. my father was a hemophiliac A. While my mother Anna was 7 months pregnant with me they found out that my dad recieved tainted blood. my mom had to be tested right away. Today my mom and i are ok. But my dad died Nov 26/91 at the age of 36, I was 2 1/2 years old. today i am 26 and a single mother to a 2 year old son who also has hemophilia A. My dad never got the chance to see me grow up. my first day of school, birthdays, holidays. I never got the chance to sit and talk with him or go places with him. and now he will never get the chance to be a grandfather to my son. I miss my dad, every day, I wish i could just have him here with us. But this government and country took that away from me. and you ask if this money should be kept in trust? Well i say NO this money belongs to all those victims and their families who fought so long and hard for - it belongs to us. and to keep it would not be right. no amount of money will replace a life. But it's not Hep C's to keep it. It belongs to the people from the class actions, who have lost loved ones like my dad. So please don't keep this money in trust it belongs to families who are still grieving their loss after all these years.

Thank you

I am writing this with a heavy heart. I have had to go through some memories that had been long buried.

I am writing this for [redacted], now deceased, a devoted mother who lost the only son that loved her unconditionally, for [redacted], now deceased, his loving wife of 30 years, for [redacted], son, who just could bring himself to write his own letter and for me, [redacted], his daughter.

This is our story.

My father, [redacted], better known as [redacted], hadn't been feeling well, his so called doctor sent him for B12 shots. Luckily, his doctor went on vacation, so he was sent to another doctor, my Mother who always went with him to his appointments asked this doctor if getting a second opinion was a good idea. I honestly don't remember how my dad got to Hamilton for testing but I do remember him sitting on the edge of his bed telling us he had cancer, Hodgkin's. Talking with Dr. Meyer, we knew we could beat this. The best cancer to get, if you had to get cancer.

My mom or I always went with my dad to his treatments, appointment, everything, he was never alone.

The first treatment seemed to go well, but after we got him home, he wasn't right, something was seriously wrong. We rushed him back to Hamilton. He was having a reaction to the chemo, his blood had congealed in his body. The only solution was a blood transfusion. He didn't want it. We fought him about it. We were told he would likely die that night if he didn't have it. He finally gave in and had the transfusion. Only to find out years later that was the bag that would eventually kill him. That bag of blood that would send him though years of hell and suffering. He never knew which bag it was but I did. The bag, we talked him into. I wouldn't tell you how I feel about that.

The doctors changed his chemo, but the second treatment he stayed at the hospital. The same thing happened, more blood, but he was a strong man still and he came through it. They discovered it was the Agent Orange that was the problem and removed it from his chemo. Would the chemo still work, we didn't know, the doctor's didn't know. His treatment was a trial at this point.

Against the odds, the cancer was beaten then the Hep C showed its ugly head along with an infection in his eyes. I don't know the name of it. He could only see at night. I don't even know if it had a name. The doctors tried and tried to find someone or some organization, some company to pay for the Interferon A, *but to no avail, would it have helped, we will never know. It was not something we could pay for; we simply did not have the resources for it.*

Over the years that followed, he suffered, he could not work because of his sight, he had to rely on his wife to support him, being a very proud man and that played hell with him. Between my mom and me, we paid the bills and made the best of it. He was in Hamilton for months at a time and we would go up every night to visit and take him out for coffee. We never missed a night. She worked from 6am-2pm and I had just gotten money from a car accident I had been in and I worked part-time. We never complained and neither did he. It was what it was.

I honestly don't know how we paid for anything. I have no idea. Spending money we didn't have on gas, parking, and meals etc. Dad had to go on welfare, then disability. We just had to keep him happy, we didn't know how long he had and we did the best we could.

I try to find the good in this. For me, with the countless trips to Hamilton for doctors' appointments and treatments, I got to know my father as a friend, as an adult. I wasn't his little girl anymore; I was his caregiver, his confidant. I never would have had that time with him if he hadn't gotten sick. I always got along with my parents. I am glad I was there to help them; I have no regrets about that.

But in the end, he had had enough, after the cirrhosis took over, after the toxins had gone to his brain and he had stopped all treatment. He passed on November 26, 1993 at 4:25 pm with his favorite doctor with him. Mom and I were in the hall, I couldn't leave her alone and I couldn't be with him, if I knew he stayed one more minute because of me I could not have lived with that. He as all curled up, he hadn't spoken in a week, not the image I needed to remember.

So, there was Mom and I, to pick up the pieces and move on. My dad left no will, so I settled everything, his life insurance didn't pay from his work because he died in the wrong month. His other insurance policy paid but it was only seven thousand, but to find out if he had died sooner, they would have paid from me to finish college. Did I mention I had to drop out after my first year to care for my father? Just something else I had to do. We had a funeral to pay for, rent, bills, credit cards. I went into a deep depression. I had no one to care for and I was lost. I honestly didn't know what to do. After six months and a swift kick from my mom, I found a job and went back to work. My mom and I actually bought a small house. It was cheaper than rent and I had my insurance money for the down payment. We made it work.

Well, it wasn't a year after my dad died that I came home to find my mother on the floor of the kitchen with the phone in her hand, she was having a major heart attack. For some reason and I am glad, she survived. Three hits with the paddles and some anti-coagulate, she pulled through.

Was it the stress of the years of my father's illness, listening to him cry at night (that we never mentioned), watching him waste away, becoming weaker and weaker that contributed to her heart attack, we don't know. So, in the years that followed I took care of her and my Grandmother the best that I could. They died within 36 days of each other, [redacted], May 13, 2010 in my arms and [redacted] June 8, 2010. They are both buried with my father.

I would like to meet the person that made the decision to get blood from the US Prison System. I would like to look at that face. That is what the lady told me from the Red Cross when she confirmed that is where my father got the first bag of blood from and that it was tainted.

If it wasn't for that one bag of blood, my father could still be alive today. His mother lived to 94 and he still has a brother and a sister that are living.

Was the money enough for the families? I don't think so. Was it enough for the victims? I don't think so. Like what was said in the web cast, there is no other way to compensate people, we can't cure the Hep C and we can't bring people back. The money did help my mother because she could no longer work after her heart attacks but was it enough. No. Was I fully compensated for the loss of my father, No.? His Mother, No. His Son, No.

Writing this I shed a lot of tears. I have tried over the years not be angry and not to blame other from what had happened to my parents but there is blame. It is with the Red Cross, our health system and our Government and they should pay. Dad did not get Hep C from a tattoo or lifestyle; he didn't get Cirrhosis of the liver from alcohol. He got it from the Red Cross, our health system and our Government.

That one bag of blood; that was meant to save his life.

Thank you

[redacted]

[redacted]

September 2015

To Whom It May Concern,

I am writing in reference to your request in regards to the surplus money in the Trust Fund with the 1986-1990 Hepatitus C. Settlement. I first would like to express my personal feelings and how this tragic experience has affected me and my family. There is a deep sense of grief and sadness at the loss of my grandfather. He was only 54 years old. I was his only grandchild and from what I have been told by family members he was very proud of me and that I was named after him. I was too young to know at the time what happened to him. Now at the age of 25 and married with a young child of my own my aunt felt it was time for me to know the truth about the cause of his death. Throughout my years growing up I did have questions about where he was and what happened to him. Now when I find out his life was cut short from the tainted blood that was administered to him I feel a greater loss since the reason for his death could have been prevented. I dwell now on the memories of what could have been for him and me. In all the years that have passed I could have had an awesome relationship with him. He could have watched me grow and we could have enjoyed going places and doing things together but all that has been taken away from me. Then I am sad when I look at my baby girl and realize he has also missed out on watching her grow. His life was cut short and how unfortunate he was taken away from us so soon. I know there are many others that have suffered from the loss of a loved one through this tragic mishap and my heart goes out to them as well. Money can't replace all those lost years or bring my grandfather back but I feel in my heart if he were to know today that I and other family members were compensated in some way then his death was not in vain. So through all of this being said I believe it is only in the best interest of all Class Members and Family Class Members to receive the surplus money. I thank you for your attention to this matter.

Yours Sincerely,

[redacted]

RECEIVED
SEP 16 2015
SUTTS, STROSBERG LLP

Harvey Strosberg, Q.C.
Sutts Strosberg LLP
600-251 Goyeau St.
Windsor, Ontario N9A 6V4

The surplus should be divided up among the class members and family members regardless of age or health condition

Perhaps a monthly pension or one lump payment.

After all there is no real cure as anyone who has Hepatise C knows very well, plus serrious damage to the kidneys after a transplant if they get one.

If and when they reach 65 years of age, the class members are cut off, put the problem still remains, so does the financial cost and hardships that goes along with it.

After all, was it not the victims who the agreement was set up for.

It appears after age 65, the powers that be don't want to know any victims exist, out of site, out of mind type thing.

To Whom It May Concern:

I believe that the surplus from the hepatitis C settlement claim should be divided amongst the parties affected.

Sincerely

[redacted]

Shelley L. Woodrich

From: [redacted]
Sent: Sunday, September 20, 2015 5:19 PM
To: Hepatitis C Class Action
Subject: Hep C Compensation

Dear Mr. Strosberg and members of the Joint Committee.

I'm writing to you regarding the death of my Mother, [redacted] You've requested input as to how surplus funding should be allocated, and our family would like to make a proposal.

Considering how little the initial payment was, compared to a typical wrongful death suit, we propose a two million dollar payment to the estate of my late mother, to be divide among our family as we see fit. Furthermore, we would agree to wave all future loss of support payments of any type from the Trust Fund and to be removed from the Family Class Members list. We would consider the case settled at that point.

Thank you in advance for your time and efforts.

Sincerely,

[redacted] and Family.

[redacted] [redacted]

Sept 21

Sir or Madame

My name is [redacted] my Brother [redacted] had this bad disease Hepatitis C. he passed away 3 years ago our Family really suffered for his passing we have 3 more Brothers ~~to~~ who has Hepatitis C. Gerald white who lives in Nova Scotia [redacted] [redacted] who just started Treatment you ask for our Input about the Money is left my idea would be to help our Familys to be able to spend more time with our Brothers when they are hospitalised we couldn't spend the time with But we just couldn't afford it

Thank you

[redacted]

[redacted]

From: [redacted]
Sent: Monday, September 21, 2015 7:13 PM
To: jjcamp@cfmlawyers.ca; Hepatitis C Class Action; info@savonitto.com; kp@toughcounsel.com
Subject: hepc8690 surplus

September 21 2015

[redacted]

To the estate of [redacted]

Joint Committee Members
J.J. Camp Q.C.
Camp Fiorante Matthews Mogerman
Michel Savonitto
Savonitto & Ass. Inc.
Harvey Strosberg Q.C.
Kathryn Podrebarac
Podrebarac Barristers Professional Corporation

To The Joint Committee
Following the meeting on August 25 2015, with regards to the 1986-1990 Hepatitis C Settlement Agreement Surplus, we strongly feel the surplus should accept late applications and redistribute the surplus of money using the original formula to the Class Members and the Family Class Members as it was original intended.
Respectfully yours

[redacted]

[redacted]

Youtube Video Click HERE

From: [redacted]
To: Hepatitis C Class Action
Subject: Re: Hepatitis C Clam # 7522[redacted]
Date: Tuesday, September 22, 2015 9:58:37 PM

September 22, 2015

The Joint Committee,

Harvey Strosberg Q.C.

Suits Strosberg LLP

600-251 Goyeau Street

Windsor, Ontario N9A 6V4

hepc@strosbergco.com

We are writing to you in reference to a letter we received regarding surplus in the Hepatitis C Claim and how it should be used.

We feel that this money should be paid out to the families to compensate for their losses.
In our situation [redacted] lost everything she owned due to her medical condition. The cost of her medications and many trips to the doctors, forced her to re-mortgage her house which was paid for. She could not afford to keep up with her life insurance policies and in return she left nothing but debt to her family when she passed. Un paid bills included: credit cards, pharmacy bills, gas bills, car repair, Wells Fargo (re-mortgage) ect... and no life insurance to cover cost of funeral or accumulated expenses that followed.

At the time we were unaware that there was any compensation for our family when [redacted] passed. We gathered the information needed and submitted it as it was given to us.

We believe the surplus should be paid out to the families with claims such as ours. No family should ever have to go through the pain and suffering our family had to experience.

[redacted] Family # 7522

Sincerely,

[redacted]

From: [redacted]
To: Hepatitis C Class Action
Subject: Fwd: Hepatitis C Clam # 7522[redacted]
Date: Tuesday, September 22, 2015 9:49:49 PM

September 22, 2015

The Joint Committee,

Harvey Strosberg Q.C.

Suits Strosberg LLP

600-251 Goyeau Street

Windsor, Ontario N9A 6V4

hepc@strosbergco.com

We are writing to you in reference to a letter we received regarding surplus in the Hepatitis C Claim and how it should be used.

We feel that this money should be paid out to the families to compensate for their losses.
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At the time we were unaware that there was any compensation for our family when [redacted] passed. We gathered the information needed and submitted it as it was given to us.

We believe the surplus should be paid out to the families with claims such as ours. No family should ever have to go through the pain and suffering our family had to experience.

[redacted] Family # 7522

Sincerely,

[redacted]

[redacted]

Harvey Strosberg, Q.C.
Sutts Strosberg LLP
600 – 251 Goyeau Street
Windsor, ON N9A 6V4
Telephone: 1-866-228-0073
Email: hepc@strosbergco.com

RE: 1986-1990 Hepatitis C Settlement – Disposition of Surplus

Reference: Written correspondence from 1986-1990 Hepatitis C Settlement Joint Committee post marked August 4, 2015

Attention: Joint Committee Member

As I understand it, the Joint Committee and the federal government have identified a surplus in the 1986-1990 Hepatitis C Settlement Trust Fund estimated at between $236 and $256 million. It is also my understanding that the Joint Committee, of which you are a sitting member, have applied to the courts to have all or part of the surplus allocated in favor of the Class Members and Family Class Members.

The letter requests that I, as a Class Member, provide input regarding the disposition of this surplus.

I believe that the intention and spirit of the original settlement and associated trust fund was and is intended to both compensate and support the affected class members over the course of their lifetimes and subsequently to their dependants after their death. At the time of the original settlement, I had been asymptomatic. However, I have recently been diagnosed with liver cancer (hepatocellular carcinoma), which has been attributed to Hep C. I am now more fully aware of the impact this has had on my quality of life and the burden this disease has placed on my family. I also was not aware of the availability of additional funding as my disease progressed and continues to progress. Perhaps other class members and their families are also unaware.

It would be my contention and recommendation that the surplus be allocated to the Class Members or Class Member Families and that these funds NOT be retained in the trust fund and NOT returned to the Federal government or any other competing body or organization.

Furthermore, I would request that surplus amounts allocated to Class Members/ Family Class Members be provided as a lump sum payment based on disease level in keeping with the original settlement.

Respectfully

[redacted]

1338911

RECEIVED
OCT 15 2015
SUTTS, STROSBERG LLP

Sept.27/2015

Members of the joint committee, I am writing this letter today to express my opinion as to what should happen with the 236 million dollar surplus from the class action hepatitis c suit. My family joined this suit after my grandfather died of the disease, and the years after, while the law suit was in court, were a struggle both emotionally , and financially for them. It is my opinion, and, since all initial claims have been satisified, that any surplus money should be divided equally among the surviving members of the class action suit. Sincerely, [redacted]

[redacted]

RECEIVED
OCT 15 2015
SUTTS, STROSBERG LLP

Sept.27/2015

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[redacted]

[redacted]

Sept.27/2015

Members of the joint committee, I am writing this letter today to express my opinion as to what should happen with the 236 million dollar surplus from the class action hepatitis c suit. My family and I joined this suit after my father died of the disease, and the years after, while the law suit was in court, were a struggle both emotionally , and financially. It is my opinion, and, since all initial claims have been satisified, that any surplus money should be divided equally among the surviving members of the class action suit. Sincerely, [redacted].

[redacted]

From: [redacted]
To: Hepatitis C Class Action
Subject: FW: Hepatitis C Final Copy
Date: Monday, September 28, 2015 8:32:25 PM
Attachments: Mins Medical.zip

The Joint Committee, September 28, 2015

Harvey Strosberg Q.C.

Sutts Strosberg LLP

600-251 Goyeau Street

Windsor, Ontario N9A 6V4

hepc@strosbergco.com

We are writing to you in reference to a letter we received regarding surplus in the Hepatitis C Claim and how it should be used.

We feel that this money should be paid out to the families to compensate for their losses.
In our situation [redacted] lost everything she owned due to her medical condition. The cost of her medications and many trips to the doctors, forced her to re-mortgage her house which was paid for. She could not afford to keep up with her life insurance policies and in return she left nothing but debt to her family when she passed. Un paid bills included: credit cards, pharmacy bills, gas bills, car repair, Wells Fargo (re-mortgage) ect... and no life insurance to cover cost of funeral or accumulated expenses that followed.

At the time we were unaware that there was any compensation for our family when [redacted] passed. Attached is the letter to the doctor requesting medical forms needed to submit such a claim as well as the response we received from her doctor five months later.

We believe the surplus should be paid out to the families with claims such as ours. No family should ever have to go through the pain and suffering our family had to experience.

[redacted] Family # 7522

Sincerely,

[redacted]

Dr. Park Parry *June 7, 2010*

We have recently been contacted by the Hepatitis C claims centre with regards to updating Medical information of our Mother and your former patient Mrs [redacted] of Dresden. It is their belief that a follow up is necessary to complete her file.

Her Medical records have been requested as well as the accompanying forms be filled in and completed. Upon Moms passing, Dr. Brisban had said to us that the complications she had incured, were most likely due to the Hepatitis condition she had contracted through the tainted blood transfusion. We respectfully ask for your assistance in this matter at your earliest convenience.

As a family we do appreciate everything that you were able to do in the care of our mother, she thought very highly of you and your staff. We do realize it will not be an easy task as some time passed and we will pay the fees that will incur. Please call [redacted] when complete and we will pick up the documents.

Thank You

[redacted]

Shelley L. Woodrich

From:
Sent: Monday, September 28, 2015 2:26 PM
To: kp@toughcounsel.com; Harvey T. Strosberg Q.C.; jjcamp@cfmlawyers.ca; info@savonitto.com
Subject: Hep c claimant

Good morning,
My name is and I am claimant # 4675 Hep c only goes to level 6. At level 6, you have received a transplant. I would like to tell you about why I believe there should be a level 7 & 8.
Level 7 is comatose
Level 8 is recovering from being comatose

Dr Lilly at Toronto General Hospital in Toronto knows me very well and calls me his worst case ever. You see, they use what they call a MEL score to try and figure out how long your body can go before you need a transplant. Well, it didn't work for me. They left me too long and I ended up in a sepsis coma for many months. When I woke up, I was completely paralyzed. Every muscle in my body had atrophied. I couldn't move, talk, blink......nothing. My brain was damaged too. I couldn't remember very much at all. Friends would come and see me and I wouldn't know them. I knew my family, but many memories were gone. I was in horrific pain and I couldn't speak to tell anyone.
You will no doubt read my file, but what myself and my family went through and what I pulled myself out of, now 8 yrs later, is not in that file. All of my Dr's look at me and tell me "you shouldn't be here,you should be dead". Dr Lilly says it was my husbands drive and not taking no for an answer when the Dr's didn't want to waste a liver on someone that had "0" chance of living. I was in multiple organ failure at the time. They called my family members in at least 3 times and notified them that It was doubtful I'd make it through the night. He stopped listening after the 3rd time. He would say, "you don't know her, she's strong and she has a lot of people praying for her. It was our faith in God that kept him going.
I was like a newborn baby. Even had a diaper on and I was 49 yrs old. Had to learn to talk, hold a spoon, spell again and yes, I tried my darnedest to walk. I was on dialysis when I woke up and told I would be on it the rest of my life. Ha! I was off it before I came home! I Abe nerve damage, mostly on the right side of my body and when I woke up, both of my feet had what is called drop foot. My poor feet had atrophied so badly that laying in bed my toes were flat on the mattress and I couldn't lift them up back into normal position.such pain.........
Silent pain...........
I was in hospitals a good part of a year and finally signed myself out of St John's rehab hospital, because I couldn't take it anymore. They kept trying to straighten my leg and make me lie straight on a mat. So much pain............ Come to find out after I convinced my family Dr to take an X-ray of my hip, that I had another rare event happen while in the coma. It's called heterotrophic oxiffication where muscle turns into bone. They found it in my hip and then about a year later in my back. Then, in 2010 to top it off, they found a brain tumor that had calcified while I was in the coma.......
I'm better now!
Now, 8 years later, I'm missing a vital muscle in my back so I cannot retain my weight from the waist up, but with the help of 2 canes I can walk a little bit! I mostly use a walker around the house and a scooter outside to walk my dogs in the good months. Winter is hard. My brain tumor is dormant so far, my feet still do not work, but I can drive a car. I still have a hard time remembering many things, so I take notes or set alarms. My husband still loves me and I've been told that many marriages do not make it through such ordeals. They had me on addictive drugs and I've gotten myself off of everyone of them by my self. I'm still in pain, but I can manage it with meditation. I have trouble with depression sometimes, but my furry friends make up for all the human friends I have lost. So life is good.

I would like to tell you that when we call the Hep c administration staff, they are mostly very helpful. Joan, who has since retired, went out of her way to both listen and help us out all she could. Usually returning our call within a day. I have nothing but praise for the admin personnel.

My problem is, I am now disabled and there is now guideline or allowance for disabilities in the class action suite. No ones fault, but it needs to be amended and addressed. Please, I'm not asking you to give me a big lump sum, like I believe a lot of people were hoping for when they heard there was a surplus. My husband had a very good job working 13 yrs for a company in Tampa Florida. He was let go because we could not move back to head office because of my illness. We now live on his odd job and what Hep c gives us monthly. He is my caregiver and this takes much of his time now. We were paying for a personal trainer to come and work with me because Dr Lilly said I was putting on too much weight and needed to get it off. Being immobile, it's very hard to stay fit. My trainer was a great help and i lost 14lbs in 9 months! Plus, something spectacular was happening! She was pushing me harder then any of my physiotherapist's ever had. She was the one that had me try 2 canes and walk! I was walking! Bit by bit, I was walking a little further and further! Finally spring came and she had me outside and I could walk a kilometer! Me! I could do it! I might need to sit on my fanny 4-5 times but I walked a kilometer! Then when I phoned hep c to see why they wouldn't approve my trainers fees, they said it wasn't in there guidelines. She was $50 an hour......... we couldn't afford her any longer. I gave up and crawled back into my hole...... Slowly, I gained back all my weight. Then I got a letter in the mail from you and hope came trickling back in.

All I ask, is that you review my claim for more aid due to my disability, a direct cause of hepatitis "C"

Thank you so very much and I know after listening to Katherine at the Hamilton meeting, that you will continue to take excellent care of us and our settlement moneys!
Keep up the good work,

God bless you

Harvey;

You want to know what I have thought about the whole issue?

While the settlement was appreciated, I sometimes think about how simple it would have been to avoid everything. All they had to do is do further testing... thats all!!!

You know, as a hemophiliac my lifespan has already been shortened!!

And having to take interferon and ribavirin for a year and a couple months to hopefully get rid of the "HEP C" virus, and having flu ~~like~~ like symptoms all through that time period wasn't very pleasent!!

But, through it all I kept thinking "You know, this could have been avoided."!

I did manage to kick out the "HEP C" virus, but, apparently a lot of people Were not so fortunate.

And, also the <u>cure</u> damaged my internal organs. So that now I have "TYPE II" diabetes, thus shortening my lifespan even ~~shorter~~ further!!

Yes, the settlement was appriciated, but the amount wasn't even as much as a year's ~~[illegible]~~! wages!!, ~~and I would have to~~.

I think personally, if you asked most people on the street if they would like the money, or to have 10 more years or so tacked on their lives, I think most people would take the extra time to see their kids grow up, or just be around for a little longer.!!

As respect to the surplus, Perhaps, find out how many have had a claim, and just pass it out to all the survivors!!! evenly...!!!

I didn't ask to have HEP C and I also did not endulage in a risky lifestyle;! to aquire HEP C.
I am just one of those people that may have reciaved some ~~blood products~~ ~~that~~ tainted blood products from an Arkansas prison!!

Yes, I was disappointed in the amount of the settlement, but, I do appreciette your hard work in recieveing a settlement.

In, short thanks for allowing me to vent a little!!, and I hope you will be sucessful in your future ventures.

Yours Truly

[redacted]

From: [redacted]
To: Hepatitis C Class Action
Date: Thursday, October 01, 2015 10:22:04 PM
Attachments: Hepc (3).docx

This is scribed by [redacted] daughter of [redacted]
Thank you,

Mrs. [redacted]

September 23, 2015

HepC Committee

Re: [redacted]
#1300681

My husband, [redacted] died at the age 64 in 2000. Since then I have lived alone as a widow. I have received "Loss of Service" over the years and my last payment being January 2016. I have received a lump sum each year but it is not equal to a husband bringing home a monthly salary. I am now 80 and found over the years financially difficult to make ends meet. With cost of living increasing, medical costs, prescriptions dental expenses, I am finding it very challenging to live and maybe forced to move from my townhome.

Please consider me as candidate for extra payments as it would be most helpful in my senior years.

Yours truly,
Mrs. [redacted]

From: [redacted]
To:
Cc:
Subject: FBO the Estate of [redacted] Hepatitis C Class Actions - Claims Request - QUESTIONS & GUIDANCE
Date: Sunday, October 04, 2015 10:22:58 AM

Hello Mr. Strosberg,
As the Director of [redacted] Estate, I want to register aq Claim for additional compensation based on his death from Hepatitis C.
Please let me know my next steps & possible outcome for our loss.
Best regards...[redacted]

Briefing Notes Relating To The Hepatitis C 8690 Class Action Settlement: September 25, 2015

I, [redacted] [redacted] make the following statement with regard to the Hepatitis C 1986 – 1990 Class Action Settlement:

[redacted]

[redacted] Date of signature October 06, 2015

I, [redacted]
concur with and have assisted in the preparation of the following statement with regard to the Hepatitis C 1986 – 1990 Class Action Settlement:

[redacted]

[redacted], Date of signature October 06, 2015

Without Prejudice.

Issues:

1. The Settlement, as it exists, is deficient in a number of crucial areas. Before any surplus funds are disbursed, such as a scheme to split the funds amongst the current claimants, I strongly believe that there are a number of outstanding issues that must be resolved. In my opinion any surplus and currently existing funds should be used to rectify the plan by providing the following benefits retroactively and ongoing and improving the fairness to those that have been further victimized by the inherent settlement inequalities:
    - 1.1. Pension plans, similar to those available to the gainfully employed, should be available to the surviving victims.
    - 1.2. Dental plans, similar to those available to the gainfully employed, should be available to the surviving victims.

1.3. Medical plans, similar to those available to the gainfully employed, should be available to the surviving victims.

1.4. Retroactive Canada Pension Plan contributions as per the deductions made over the course of the compensation period or in some way adjusted through the establishment of a separate pension fund to provide for the victims in the retirement phase of their life.

1.5. It is imperative that an adjustment to the compensation be instituted, such that a level of fairness is applied across the range of victims, because there is a disparity in compensation that exists amongst the class members. It is discriminatory that my life, happiness and future be considered worth so much less than somebody else, just because they have had better timing with their infection; thus, had the opportunity to develop their career, get an education and live up to their potential before being reduced both physically and emotionally.

1.6. There needs to be consideration and compensation for the impact on family members. Impact on family members is not addressed in any way whatsoever, but there has been a devastating loss in my family and I suspect several other victims lives as well.

1.7. Loss of income by family members, due to the time invested in care required by the victim, travel and expense associated with attendance at medical appointments and delay in career path development is not compensated until the victim is at a disease level 6. We, and a number of others who elucidated their situations at the recent meeting on Aug 25 2015, have experienced considerable financial distress long before disease level 6.

2. The settlement as it currently exists clearly discriminates against mothers who elected to raise their children.

2.1. The settlement language provides for university students or those infected prior to the age of eighteen to receive the Average Industrial Wage, but I would ask why mothers have been left out of this section? It is a well-known fact that career delays caused by motherhood have lead to difficult and discriminatory outcomes for women's career development and my question is specifically why would a university student be compensated for a lifestyle choice while a mother is penalized for a natural consequence of being human?

2.2. The fund categorically discriminates against mothers, to the extent that this may be elevated to a human rights issue. It is typical that mothers who were working on contract employment and raising children have not had three years of full time contiguous employment. In order to qualify for loss of wages, I had to use three years from my very first employment years 1978, 1979, 1980, before I became a mother. I did not get the chance to develop a career because as soon as my children were in school I started getting very sick, so just when I should have been back to full time employment I was debilitated by the rapid onset of the infection. An undeniable and verifiable pattern developed - I would secure full time employment but would have to be let go because I physically could not continue, there were numerous occasions when I was carried from work to emergency.

3. There are two instances of considerable significance where the Administrator has requested information from a doctor who has either refused or outright lied.
   - 3.1. The first situation is with regard to the ongoing episodic vomiting that I have experienced since the onset of the disease, which had a deleterious impact on my dental health leading to ruined teeth and gums. This significant health issue must be resolved quickly as it affects the overall level of my well-being.
   - 3.2. With regard to the intense vomiting, I experienced from the onset of the disease.
     - 3.2.1. My symptoms developed rapidly within about one year of the surgery that was the source of the transfusion. I suffered numerous symptoms including gastrointestinal distress associated with vomiting on an episodic basis. Episodes varied in length from about a week to several months, during which time I experienced vomiting and diarrhea on a daily basis, occurring multiple times a day. Because of this repeated acidic attack, my tooth enamel eroded and the health of my gums was reduced, leaving me in a state necessarily requiring a complete dental replacement. My dental surgeon advised me that, given the state of my health, the most suitable option in my case, and in the long term a less expensive choice, would be dental implants on both my upper and lower jaw, providing me continued dental health and higher quality of life on into the future. This is not optional or cosmetic surgery, the ability to eat a proper meal is very high on the list of important activities associated with good health and long life. Since this was caused directly as a result of being infected with Hepatitis C, I approached the administrator to provide funding for my dental replacement. I did not have these symptoms prior to my infection, they arose along with the other symptoms at the time of the onset of the disease.
     - 3.2.2. It is clear to me that, if an ongoing parade of TV commercials are broadcast to warn of the dangers of the acidity of fruit juice to tooth enamel, then a never ending barrage of stomach acid would certainly have an even greater impact due to the higher degree of acidity or lower pH level. Fruit juice has a pH = 3.5 while stomach acid has a pH = 0.8 to 2. This dental erosion is commonly seen in people suffering from bulimia nervosa who purposefully induce vomiting on a regular basis as part of their illness. The acid content of the stomach which comes into contact with the enamel erodes and damages the teeth. The digestive enzymes in vomit also damage the gums, which leads to significant dental complications.
     - 3.2.3. I brought this situation to the attention of the Administrator and indicated that since it is directly related to my disease and since the symptom has appeared every year on the Treating Physicians Form that I would expect to be compensated for the replacement of my teeth. I was instructed the Administrators office to obtain a letter from Dr. Marotta explaining the effects of vomiting on my teeth.

I argued that I had not seen Dr. Marotta since I completed the interferon treatment (now fifteen years ago) and that Dr. Marotta is not a dental surgeon. In addition, he has made it clear that he does not want to provide any further medical or legal paperwork. I argued that Dr. M. Dube, who has overseen the Aids and Hepatitis C clinics in Sudbury, and has been my Treating Physician for the duration is the physician who can verify the observations. I was told that I had to obtain a letter from Dr. Marotta because he was the physician who initially prescribed my treatment.

3.2.4. I attended an appointment with Dr. Marotta to explain my issue. He was arrogant and dismissive in demeanor and chose to avoid providing any of the requested opinions regarding my vomiting condition, despite the fact that he had recorded this condition in an earlier consultation. Instead, he decided to glorify his treatment regime by providing a short letter to the administrator, despite my specific instructions that he not do so because it was not germane and may only complicate the issue, which contained fallacious data regarding my condition, to the extent I am forced to wonder if he was reading the file of another patient entirely.

3.3. This is the first example of how the information requested by the administrator places the victim between an intractable administrator and an uncooperative physician leaving the victim helpless and alone.

4. The second disturbing administrator–patient–physician interaction is a case of similar repugnance, where again I was advised by Joan of the Administrator's office that I should be assessed at Disease level 5, due to the ongoing listing of thrombocytopenia on my Treating Physicians Form.

4.1. Once again, I had my Treating Physician, Dr. M. Dube fill out the form. He did so based on my clinical information from several prior appointments I have had with him over the last fifteen years; during which time he has had the opportunity to make his own observations and record this clinical data in my file.

4.2. The form was returned with a yellow zip line on the section requesting a report from a gastroenterologist, hepatologist or internist.

4.3. I called and spoke with Mathew of the Administrator's office to ask if I could have a guideline as to what would be required in the report since I am not a patient of any of these specialists. He refused, and in fact, when I pressed that an email or letter would be very helpful to bring to the specialist, he became indignant and provided no such advice or information.

4.4. After a year, I finally managed to get an appointment with Dr. Tilbe in Sudbury. He became obsessed with issues other than my ongoing thrombocytopenia, but did eventually write a letter (available: Dr. Tilbe letter of June 26, 2014) that had absolutely nothing to do with the request that I made in the initial appointment. It appears to me that Dr. Tilbe is not concerned with considering my medical history in order to make a proper medical diagnosis.

4.4.1. I asked my Treating Physician, Dr. Dube to arrange an appointment with another gastroenterologist and we selected Dr. H. Boudreau, but she sent a letter back to Dr. Dube stating that I had a gastroenterologist and she was shredding my appointment request.

4.4.2. I attended another appointment with Dr. Tilbe, to explain again that the Administrator has requested that I get a report from a gastroenterologist regarding a specific assessment relating to the thrombocytopenia condition that has persisted since my interferon treatment. This time I recorded my conversation with him, because I have reached a point of disgust with the behavior of the specialists I have had to depend on over the course of this disease (see section 5). He did eventually come to realize that I was actually already a class member and that the reason for this appointment was for him to look at my clinical history, which resides in Dr. Dube's records, to make remarks pertaining to the reason for my persisting thrombocytopenia.

4.4.3. I would think that if, my thrombocytopenia began as a result of the treatment and persisted thereafter, then a causal relationship exists between the treatment and the onset of thrombocytopenia (available: Dr. Marotta letter of November 27, 2001), which is then directly related to the Hepatitis C. Although Dr. Tilbe did agree that this would be the case during my consultation, he wrote a letter (available: Dr. Tilbe letter of June 02, 2015), which I obtained a copy of from my Treating Physician Dr. Dube, that can only be described as misleading, juvenile and unprofessional I was aghast at the language and lack of any reasonable assessment of my clinical history. He did not access my file and did not pay attention to the several statements that I made with respect to the reason for the appointment.

4.4.4. Dr. Tilbe is in no way interested in discussing a patient-Administrator issue, is less interested in looking at fifteen years of information to assist a patient with a legal matter and it appears as though he is especially obsessed with refusing to provide any medical assessment or information relating to funding from the settlement.

5. I had a very rapid onset of symptoms and debilitation due to the transfusion.

5.1. I was taken to emergency quite a number of times at the onset of symptoms, which resulted in a diagnosis of "there is something wrong with your liver".

5.2. Upon receipt of a letter from the Red Cross April 21, 1993, saying that I had Hepatitis C and should consult a doctor, My family physician Dr. M. O. Yankowski booked me in with a specialist, but a repeated pattern emerged:

5.2.1. Get appointment with gastroenterologist;

5.2.2. Attend tests proscribed by gastroenterologist;

    - 5.2.3. Attend a second appointment to discuss test results with gastroenterologist;
    - 5.2.4. Receive notice that the gastroenterologist has left Sudbury.
  - 5.3. This pattern was repeated four times and it took about eight years to finally get treatment from a visiting gastroenterologist, Dr. Marotta. Upon completion of half of the treatment, I experienced severe side-effects to the medication, to the extent that Monique (Dr. Marotta's assistant) called me urgently to ask if I had taken my injection, she said "...if you take your next needle, it might kill you." I was taken off the treatment and apparently upon completion of their treatment Dr. Marotta no longer wants to see patients.
  - 5.4. A pattern emerged during the meeting on August 25, 2015 as the attendees stated their cases. It was repeated several times that their Father, Mother, Spouse or other family member had died in the early 1990's or those that survived had experienced severe symptoms in the same very short time frame.
  - 5.5. Although anecdotal, these stories are a good representation of an issue that I believe the doctors have not embraced. At the time the settlement was crafted, the epidemiology of the disease was a rather long, slow onset after initial infection from a small amount of virus.
  - 5.6. The main difficulty arising from this is the lack of understanding of how this has affected the family, long before the advanced stages of the disease are finally reached. The amount of care and loss of income, family interaction and natural love and affection is much greater than perhaps realized at the time.

6. The current level of compensation I receive is based on my early career employment because this was the only time that I was able to find three contiguous years of earned wages. This is due to the fact that I was a stay-at-home mother, working contract employment, until my children were school aged. It was exactly at that point that the rapid onset of the symptoms and debilitating effects of the disease took over, preventing me from furthering my career.
  - 6.1. Notwithstanding the remarks in 2, 2.1 and 2.2, this has in effect forced me to live at an entry level wage, the poverty level, throughout my entire lifetime because the cost of living allowances do not take into account the fact that the position I held included:
    - 6.1.1. A full pension with a substantial contribution from the employer.
    - 6.1.2. A dental plan that would even extend to immediate family.
    - 6.1.3. Pharmacological coverage that would extend to my immediate family.
    - 6.1.4. Long term disability coverage.
    - 6.1.5. Contributions to the Canada Pension Plan.
  - 6.2. The specific job that my settlement claim is based on is currently garnering approximately $50,000 a year plus all aforementioned benefits. Therefore, on the balance of probability, had I continued in the same position, without taking into account any increase in education or advancement from that position to higher positions with the

same employer, I would be earning twice what I receive from this settlement not including the ancillary benefits and pensions listed in 6.1.1, 6.1.2, 6.1.3, 6.1.4 and 6.1.5.

- 6.2.1. I have had several discussions with Mathew from the Administrator's office regarding the wage I would be making if I stayed at that level (Prov. Gov. Clerk 2). The result of these conversations was that I should provide information that shows what the earnings would be had I been in that position at present and any other information that supports the fact that my earning potential would have been greater than the current poverty level I am forced to live within.
  - 6.2.1.1. I acquired the necessary information as per Mathew's request:
    - 6.2.1.1.1. Confirmation of my full time status with the government, which my claim is based on, from the records department of the Provincial govt.
    - 6.2.1.1.2. Government job postings that were equivalent to the position that I held stating the pay scale for that job.
    - 6.2.1.1.3. https://www.gojobs.gov.on.ca/Jobs.aspx (see Clerk 2 Positions)
  - 6.2.1.2. I was advised to acquire this information, but upon presenting it to Matthew, he verbally invalidated my argument and obstinately refused, despite repeated requests, to provide any of these numerous objections to me in writing. Although I followed his directions and provided the requested documentation proving that, based on a balance of probability, I would be making a higher wage; he unilaterally decreed in a phone conversation that I did not qualify. I provided the proof that I was a full time employee and that the same position that my claim was based upon included all of the items in section 6.2. He claimed that my argument is invalid because I was not working at that job when I got sick. This made no sense to me. I asked for his refusal in writing and again received nothing. It is unacceptable to me that Mathew is able make unilateral determinations pertaining to my claim without actually following some sort of protocol.

7. The situation with regard to the victim reaching retirement age and suddenly being subjected to a substantial reduction in income is likely to lead to victims being forced from their homes or unable to afford care required to survive to the age they would have otherwise lived.
   - 7.1. It is tremendously troubling that there has been no allotment of the total settlement fund allocated to a sensible pension plan for survivors. If the settlement truly is a compensation for loss of income, it would logically follow that part of that prospective income, would have been contributing into the Canada Pension Plan. It is tremendously unusual that the deduction is made from the level of compensation paid, that is, the compensation is reduced by the amount that would be paid to the Canada Pension Plan, but the funds are not paid into the Canada Pension Plan on behalf of the victim.

7.1.1 There was no notification to me that the deductions were not being paid into the Canada Pension Plan; I naturally assumed the deductions were being responsibly allocated. I only found out recently that this was not the case.

7.2. You must rectify this issue, with payments made retroactively to reflect the state that the victim would be in at present had those funds been placed in the pension at each of the years that compensation has been received. I did not claw myself back to the land of the living only to live out the twilight of my life in abject poverty worse than the poverty that I am experiencing during what should have been my most productive years.

8. Dental care is an important aspect of health and well-being.

8.1. I am confused as to why a dental plan is normally available to those who are gainfully employed, yet as class members, we are not provided with a dental plan as part of the loss of income package.

8.2. The loss of income compensation in my case is essentially at the poverty level and any extraneous expenditure weighs heavily on my overall financial position. In other words, I have to make decisions such as buy food or have the teeth to eat it, a rather awkward set of choices.

8.3. The position that my compensation is based upon included a dental plan that would also extend to my children and husband. The lack of such a plan has been the cause of significant stress, financial hardship and has affected my overall health, as I have not been able to acquire the dental care I need in a timely manner.

8.4. Further exacerbating my situation is the information outlined in 3.2.3

9. Rapid onset of symptoms and high degree of damage in the short term, as is evidenced by the numerous statements made during the meeting on August 25, 2015 and my personal experience (see sections 5.4, 5.5. and 5.6) although anecdotal, seem to point to death or serious debilitating disease occurring in a very short timeframe, compared to what was considered the typical disease progression of several decades, until the manifestation of symptoms and disease.

9.1. This situation requires some revisiting to assess the family loss and possible career delays that may have occurred as a result of a mother, wife, husband, father, or other family member depended upon or expected to be available to be relied on is suddenly incapacitated to the extent that they become a draw on the temporal and financial resources of the family.

9.1.1. In my personal situation, it can be argued that my lack of income during that time is directly related to the loss of our family home, which can only be described as a family tragedy that has a lasting effect.

9.1.2. Since I was only able to be awake for 3 hrs to 4 hrs per day, my husband was obliged to travel from London, Ontario to Sudbury, Ontario on a weekly basis. This was during his studies for a PhD in physics. The interference with his commitments to the program of study caused considerable stress and the travel was time consuming and expensive. Eventually he was required to take a leave of absence for medical reasons in order to provide the support to me, feed the children and assist with the settlement submissions as per the agreement as it was presented.

9.1.2.1. Unfortunately, the agreement as presented was subject to delays and the approved medical leave, that was originally for one term, was extended to one year. When he attempted to return to his studies he was not welcome due to the delays in progress that his, officially approved leave, had caused in the research of his supervisors.

9.1.2.2. The delay in career path is devastating for the individual, costly in terms of lifetime income and the individual may never be able to reach the full potential that would have been realized had they been able to graduate at the time they would have done without the delay.

9.1.2.3. In the interim, the living standards have had a significantly affect and as such have an enduring effect on the children's psychological well being. My children were afraid and confused. They thought that their mother was dying and they were terrified. They were also hurt and confused by the assertion of most people that Hepatitis C is a disease of intravenous drug users.

10. Social stigma

10.1. The first thing that the administrator said to me was "how do we know you're not an intravenous drug user" and when I expressed my astonishment at that statement she then said well you could have caught it from a toothbrush.

10.2. As my disease was disclosed to friends, they systematically became more and more distant until they were all gone. I have had people in social situations refuse publically to shake my hand because they were afraid that they would catch Hepatitis C.

10.3. In addition, not knowing whether the blood transfusion came from a prison inmate is extremely unsettling.

10.4. This stereotyping has engendered a disturbing classification of myself and other claimants as 'unclean' or somehow of a reduced class and status which has had a degenerative impact on my own self esteem and well being.

11. Throughout this lengthy and onerous process, the Administrator has been nothing but an obstacle, obstinately fixated on reduction of assistance and categorically unhelpful; this is not an isolated incident or an individual personal experience.

11.1. Numerous conversations with other attendees following the meeting on August 25, 2015 followed a nearly identical theme: the particulars of which always revolved around the lack of support provided to the sick and ailing or to families of those who have lost their battle.

12. Why are the claimants in the Class isolated? There should be a means by which the class members can communicate in a general manner through a website or bulletin board with the

option for them to decide if they wish to share their personal contact information with another member put in place to allow for communication between affected persons. This would facilitate the exchange of information and may in fact be supportive for many of the victims.

Shelley L. Woodrich

From: [redacted]
Sent: Wednesday, October 07, 2015 9:01 PM
To: Hepatitis C Class Action
Subject: 1986 -1990 Hept. C settlement

Mr. Strosberg,
I am not sure if this is the right department or not but I will give it a try. I am a Family Class member (?), a daughter of a man who passed away due to receiving tainted blood. Our family was part of the settlement. We received information of the Joint Committee Sessions this summer too late, as most of our family are no longer at the addresses you have. Is there a way or a place to provide address and information updates? Thank you for your help in this matter. We would like to be kept up to date as to the decisions regarding the trust fund.

[redacted]

Shelley L. Woodrich

From: [redacted]
Sent: Thursday, October 08, 2015 11:59 AM
To: Hepatitis C Class Action
Subject: RE: Claim 1179
Attachments: image2a0ec4.JPG

Hopefully you can direct this email to somebody involved in paying for the new Hep C medicines. Currently my Canadian Red Cross Tainted Blood HepC has risen from Level 3 to Level 5 scary stuff. Now as I die a little bit more each day..Hep-C compensation and SunLife Insurance are "debating" who will pay for the drug while i sit at home stressed beyond measure. In my view Hep C compensation should pay for Harvoni..get the drug into me..then fight with sunlife over who pays. This paperwork is destroying my faith. For the victims following behind me..somebody/anybody needs to Step UP..think of me..the victim...and get me this drug..that i don't really want to take already suffering from so many other health problems sincerly [redacted] claim 1179

Shelley L. Woodrich

From: [redacted]
Sent: Monday, October 12, 2015 2:39 PM
To: Hepatitis C Class Action
Subject: LETTER #2 RE:--1986-1990 HEP C SETTLEMENT AGREEMENT TRUST FUND SURPLUS

Importance: High

To: Harvey Strosberg, Q.C.

Sutts Strosberg LLP
600-251 Goyeau Street
Windsor, Ontario, N9A 6V4

Dear Sir,

This letter is in response to the Confidential letter I received from the Joint Committee concerning the huge SURPLUS of an estimated $236 million to $256 million in the HepC Settlement fund. I have several concerns about various areas of the settlement that fall short. There are far too many shortcomings in how these funds are being administered, and about how victims of the Contaminated-Blood Scandal of 86/90 are being treated, and have been treated over the years. However, rather than produce a "manifesto", I will focus here, for obvious reasons, on one main policy only, and its disastrous two-fold effects which have affected me most unfairly, and which have been extremely injurious to my physical and emotional health and well-being, as well as to the well-being of my loving family.

As an aside, I must insert here that I wish that I had a podium from which to more fully speak my truth and my opinions. If I were to be fortunate enough to be granted such a podium, I would then find myself in a position to speak strongly to various other critical issues, and not find myself feeling the need to restrict my focus to one crucial issue only, given the circumstances of this being an e-mail letter that will obviously be better presented and accepted with a single-focus only.

The particular policy I refer to above as my particular, and singular, focus in this letter is that of HepC /86/90 being declared as the "Last Payee", a policy---actually an "escape-clause", as it turns out(!)--which is highly deleterious to the victims that the Settlement fund is supposedly here to serve in various ways:...for example, by assisting with providing much-needed information, assisting with funding options, helping with the various difficult processes that victims have to had to go through and endure, and to compensate for damages done to these victims, FAR too many of them who, after suffering for years, are now dead!! Unthinkable!!!

And yes, we have been victimized, and traumatized, AND we are all trying our ultimate best to become Survivors! ---We are victims who unknowingly received transfusions of contaminated blood from within a medical system in which we, as patients, had had to place our trust and our faith, ---and as a result, we have each been forced to bear the many damages done and caused by the unthinkable actions, and unconscionable NON-actions, of the Canadian Blood Agency "personnel", --AND-- quite frankly, what amounted to outright CRIMINAL NEGLECT by the Canadian Blood Agency.

I, myself, am a victim of a contaminated blood transfusion that I was given in Dec./98, blood which, unbeknownst to me, was contaminated with the HepC virus.--This evil virus was quiet for years, but I began to become suspicious of its beginning to act up three or four years ago.----

Then the disastrous and traumatic events happened during the summer of 2014.--- I was diagnosed with liver cancer, hepatocellular cancer, four tumors, caused by the HepC virus which I had contracted in Dec./98 through having been given a contaminated blood transfusion. I had major surgery (successful) on Oct. 15,2014, but I spent more than two months in hospital, and much longer in recovery. My cancer was found to be potentially invasive, unfortunately.--Just shortly afterwards, while I was still recovering, I suffered a recurrence in March, 2015.--- Unfortunately, surgery was not an option this time.---I had an extremely tricky, and highly risky, RFA procedure, one that had been devised and done only once before in all of Canada!!! --Fortunately for me, it appears to have been successful, except that the 3-mo.-follow-up CTScan shows four nodules, too small to be characterized a this point.---If they remain too small, that's a good thing for me!-- But if they grow, I'm in serious trouble once again, and I might not even make it through this time.--I won't be able to receive any information for a full three months when I have yet another CTScan. All of this waiting is extremely hard, emotionally and physically. It takes a huge toll on myself, my husband, and my entire family.

Prior to all of this, I was an active, vibrant, energetic woman who was deeply and actively involved within my social network of friends and colleagues, within my community here in Kingston, and within my wonderful and fun-loving family, also all living here in Kingston.

Now on to my concerns about the HepC funds:-----A major concern is the completely unfair policy declaring the HEPC86/90 Settlement Fund as the "last payee".----I believe this to be completely unfair.---It is a policy that denies victims their rights to quick and easy reimbursement and compensation.---Not only that, this policy is dangerous to the health and recovery of HepC-86/90 victims. I will refer here to myself and to my case, in particular.--Case in point here is that I had worked extremely hard for hours and hours on end to go through all of the red tape with HepC-86/90 in order to get their approval for a 12-week course of Harvoni treatment, the new drug which my doctor had prescribed in order to cure my HepC. (Note:---A 12-week course cost approximately $80,000!!)---After a couple of months of red-tape, I finally did get my approval from HepC-86/90, and was ready to get started on this highly successful treatment, which would not only cure my HepC, but also remove my risk of yet another recurrence of my liver cancer! However, I received a major blow just before HepC-86/90 signed the final papers for me to get started and to receive my much-needed reimbursement for the high cost of Harvoni treatment. The blow to which I refer is that the Ontario government finally decided that they were possibly going to start covering Harvoni through the ODB. Of course, this was great for all those HepC sufferers who had no other insurance coverage!!----But it was certainly not great for me, personally, given my particular situation, having just recently received my final approval for reimbursement from hepC-86/90, and ready to start my treatment upon my medication delivery within a few days. The horrible blow for me was that even though the government had not yet made a FIRM decision concerning coverage, HepC-86/90 immediately, and without even notifying me personally, removed themselves from any and all responsibility for reimbursement of the $80,000 cost of my treatment, and dropped me like a hot potato, denying any responsibility whatsoever for reimbursing me as promised. They justified this removal of my right to coverage by citing their legal "out" of declaring themselves as the "last payee"-----meaning that, therefore, if there was ANY chance WHATSOEVER that I might somehow be able to get Harvoni paid for through a different insurance source, that HepC-86/90, as the "last payee", would therefore now be denying me their previously promised reimbursement.

The disastrous, two-fold effects resulting from this highly unfair "last payee" policy were twofold:

...........(#1)...it took so long to make it through all of the new Ont. government, "special committee" bureaucratic red-tape for approval of acceptance into their program that I had to wait MONTHS longer before I finally was issued ODB coverage approval, and even at that, I was initially only approved for 2/3 of the treatment which had been prescribed by my doctor! So to drag out the approval process even longer yet, I had to go through yet another mess of completely tangled-up red-tape, and spend more time waiting desperately to get started on my curative Harvoni treatment to which I had long ago been entitled, and then ultimately denied(!!) by HepC-86/90!.. HepC-86/90 cheated me out of what was rightfully mine, and out of months of my life----perhaps even much more, as you will read below in (#2).

...........(#2)...The second absolutely, and utterly disastrous part of this two-fold effect was that during this long drawn-out, and completely unfair process of trying to get the treatment that I was rightfully entitled to, I suffered a recurrence of my liver cancer!----Hepatocellular cancer ---which was caused by the very HepC virus for which I had been so unfairly denied my prescribed curative Harvoni treatment, my previous approval having been withdrawn and reimbursement denied by the HepC 86/90 Settlement Fund using its "last-payee" policy as an escape route . And the "pay-off" for me??---The horrifically disastrous consequence of being diagnosed with a recurrence of the dreaded hepatocellular cancer in my liver! with the result that I again had to wait MONTHS before I could begin the Harvoni which would cure my Hep C, and remove the future cancer risk!! --Why the wait this time?--Because I had to wait for the special RFA procedure to be developed, and then go through the procedure, another stay in hospital, followed by a recovery period until I could again become well enough to undertake the course of Harvoni treatment which, BY RIGHTS, I ought to have been able to have fully and successfully completed LONG BEFORE my recurrence!!--Had the HepC-/86-90 process unfolded properly, and FAIRLY, on my behalf, I would have ALREADY completed my 12-week Harvoni treatment, and the odds are very high that I would NOT have suffered that recurrence at all,nor would I have had to undergo the risky procedures that I had to suffer through in the spring of this year!

Is it any wonder now that there is now a huge SURPLUS of $236 million to $256 million??!!--That "Last Payee" escape clause certainly did "save" the

"Settlement Fund" a huge bundle of money!!-- However, I sincerely believe that this policy, as well as others not being discussed here, also contributed to the unthinkable number of eventual deaths of innocent victims, and unbearable pain for so many families, parents and children, who had to watch their loved ones endure years of suffering, and then lose them again when they eventually succumbed and died. ....Simply NOT FAIR, in any sense of the word!!!

In conclusion, I respectfully submit that it is my strong opinion that a full three-quarters (3/4) of the current "surplus" should be allocated in favor of Hep C-/86/90 Class Members as compensation for having been forced to suffer needlessly, through no fault of their own, and who have had to continue to endure this travesty of justice for far too many years, ---and that the remaining one-quarter (1/4) should be allocated to family members who have lost loved ones who have suffered and died as a result of the contaminated blood transfusions of /86-/90.

Respectfully yours,

[redacted]

[redacted] [redacted]

The Joint Committee,
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RECEIVED
OCT 15 2015
SUTTS, STROSBERG LLP

Date:

We are writing to you in reference to a letter we received regarding surplus in the Hepatitis C Claim and how it should be used.

We feel that this money should be paid out to the families to compensate for their losses. In our situation [redacted] lost everything she owned due to her medical condition. The cost of her medications and many trips to the doctors, forced her to re-mortgage her house which was paid for. She could not afford to keep up with her life insurance policies and in return she left nothing but debt to her family when she passed. Un paid bills included: credit cards, pharmacy bills, gas bills, car repair, Wells Fargo (re-mortgage) ect... and no life insurance to cover cost of funeral or accumulated expenses that followed.

At the time we were unaware that there was any compensation for our family when [redacted] passed.

We believe the surplus should be paid out to the families with claims such as ours. No family should ever have to go through the pain and suffering our family had to experience.

[redacted]

Sincerely,

[redacted]

[redacted]

PARSONS et al. vs. THE CANADIAN RED CROSS SOCIETY et al. Court File No. 98-CV-141369 CP00
KREPPNER et al. 98-CV-146405
Plaintiffs Defendants

ONTARIO
SUPERIOR COURT OF JUSTICE
PROCEEDINGS COMMENCED AT TORONTO

JOINT MOTION RECORD
VOLUME VI OF VIII
(Joint Committee Motion to Allocate 2019 Excess Capital)

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