

**ONTARIO
SUPERIOR COURT OF JUSTICE**

B E T W E E N :

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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HIS MAJESTY THE KING 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

B E T W E E N:

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

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THE GOVERNMENT OF NUNAVUT AND THE GOVERNMENT OF THE YUKON TERRITORY

Intervenors

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-

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Mis-en-cause

SUPPLEMENTAL MOTION RECORD
(Joint Committee Motion to Allocate 2019 Excess Capital)

May 18, 2023

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INDEX

TAB			PAGE #
30.	Affidavit of Heather Rumble Peterson, sworn May 18, 2023		3006 – 3011
	Exhibit A	Copy of the executive summary and the additional information linked thereto from Summer 2022	3012 – 3025
	Exhibit B	Copy of this executive summary and the Notice linked thereto from April 2023	3026 – 3038
	Exhibit C	Written submissions of class members and family class members commenting on the allocation of the 2019 Excess Capital	3039 – 3157
		Recommendation 1 – Fixed Payments for Non-Pecuniary General Damages or Death Benefits	3040
		Recommendation 2 – Family Member loss of guidance, care and companionship awards	3057
		Recommendation 3 – Lost or diminished pension benefits	3131
		Recommendation 4 – Loss of services in the home	3135
		Other suggestions received from Class Members	3144

**ONTARIO
SUPERIOR COURT OF JUSTICE**

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This is the 44th Affidavit
of Heather Rumble Peterson in the BC Action
and was made on May 18, 2023

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,
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-and-

**MICHEL SAVONITTO, in the capacity of the Joint
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PETITIONER

-and-

FONDS D'AIDE AUX RECOURS COLLECTIFS

-and-

LE CURATEUR PUBLIC DU QUÉBEC

Mis-en-cause

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PROVINCE OF QUÉBEC
DISTRICT OF MONTRÉAL

NO : 500-06-000068-987

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-vs-

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Mis-en-cause

AFFIDAVIT OF HEATHER RUMBLE PETERSON
(Sworn May 18, 2023)

I, HEATHER RUMBLE PETERSON, of the Town of Harrow, in the County of Essex, lawyer, MAKE OATH AND SAY:

1. I have previously sworn two affidavits, dated May 12, 2022 and March 23, 2023, in support of the Joint Committee's applications to have the Courts exercise their unfettered discretion to allocate the 2019 Excess Capital for the benefit of approved class members and family members. I swear this affidavit to outline the steps taken to notify class members and family class members of the allocation hearings and to provide the Courts with the written submissions commenting on the allocation of the 2019 Excess Capital received from them in response to that notice. I have been personally involved in and have personal knowledge of the facts deposed herein except where stated to be on information and belief and, where so stated, I verily believe them to be true.

2. In the summer of 2022, the Joint Committee's initial 2019 allocation applications filed in the Supreme Court of British Columbia, the Superior Court of Ontario and the Superior Court of Québec were posted on the settlement website along with an executive summary posted in the Important Notice section on the homepage informing the class members that these proceedings had been filed. Attached as **Exhibit "A"** to this affidavit is a copy of the executive summary and the additional information linked thereto.

3. In April 2023, a further executive summary was posted to the Important Notice section of the settlement website homepage together with a linked notice informing the class members of the changed financial circumstances of the Trust and inviting the class members to express their views in writing to be conveyed to the judges in advance of the hearing ("**Notice**"). The amended 2019 allocation applications prepared by Joint Committee were also posted on the

- 5 -

website. Attached as **Exhibit “B”** to this affidavit is a copy of this executive summary and the Notice linked thereto.

4. The Important Notice section of the settlement website homepage was subsequently updated to provide the video link for the allocation hearings once it was provided by the court office.

5. I am informed by Jason Lobo, the HCV settlement project manager at EPIQ who is responsible for the administration of the Settlement Agreement, that the Notice was sent by email to a total of 2,788 class members and family class members (2,366 under the Regular Plans and 426 under the HCV Late Claims Benefit Plan) on April 10, 2023 and by regular mail to a total of 11,583 class members and family class members (10,781 under the Regular Plans and 802 under the HCV Late Claims Benefit Plan) by April 28, 2023.

6. I am advised by Mr. Lobo that in response to the Notice as of May 15, 2023, a total of approximately 400 calls and 600 emails/letters were received/returned by the Administrator with the majority requesting more explanation about the Notice and/or updating their personal information in the Administrator’s records. To the extent possible, those communications that were purely administrative (eg: change of address) or do not provide information, commentary or suggestions concerning allocation of the 2019 Excess Capital are not included in this affidavit.

7. I am advised by Martine Trudeau, Kathryn Podrebarac and Chya Mogerman that they or their staff have spoken on the telephone with some class members and/or family class members and/or received a small number of written submissions directly, as did I. Some of those calls simply resulted in putting the class member or family class member in touch with the Administrator in order to address a question or issue pertaining to their compensation. Other calls amounted to oral submissions

made by the class member or family class member similar to the written submissions received by the Administrator. 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 some did. The written submissions received directly by the Joint Committee have been included herein.

8. The written submissions of class members and family class members commenting on the allocation of the 2019 Excess Capital are attached hereto as **Exhibit "C"** to this affidavit. These submissions have been redacted under the direction of the Joint Committee to remove names, addresses, telephone numbers, claim numbers and/or other identifying information to protect the privacy of the class members and family class members.

SWORN BEFORE ME at the City of Windsor, in the County of Essex, this 18th day of May, 2023.



Commissioner for taking affidavits


HEATHER RUMBLE PETERSON

Deborah Lorraine Tocco, a Commissioner, etc.,
Province of Ontario, for Strosberg Sasso Suits LLP,
Barristers and Solicitors.
Expires March 21, 2025.

*THE ATTACHED IS EXHIBIT "A" TO THE AFFIDAVIT OF
HEATHER RUMBLE PETERSON SWORN BEFORE ME
THIS 18TH DAY OF MAY, 2023*



COMMISSIONER FOR TAKING AFFIDAVITS

Deborah Lorraine Tocco, a Commissioner, etc.,
Province of Ontario, for Strosberg Sasso Sutts LLP,
Barristers and Solicitors.
Expires March 21, 2025.

HOME PAGE – TOP ITEM UNDER HEADING “IMPORTANT NOTICES”

JOINT COMMITTEE SEEKS ALLOCATION OF EXCESS CAPITAL TO CLASS MEMBERS –August 2022

The Joint Committee has filed applications asking the supervising courts in Québec, Ontario and British Columbia to exercise their discretion and allocate some of the Excess Capital identified by the 2019 Financial Sufficiency Review to create four new special distribution benefits for approved class members and family members.

Hearing dates are not yet scheduled. At the time of writing, the Joint Committee does not know whether Canada or the Provinces or Territories will oppose the granting of these orders for allocation of the 2019 Excess Capital for the benefit of claimants. Nor do we yet know whether the Federal Government will file applications seeking to have the Courts order that the 2019 Excess Capital be paid out to Canada.

To learn more about the Joint Committee’s recommendations to the Courts and next steps, review the information available [here](#).

LE COMITÉ CONJOINT DEMANDE L'ALLOCATION DU CAPITAL EXCÉDENTAIRE AUX MEMBRES DU GROUPE – Août 2022

Le Comité conjoint a déposé des procédures demandant aux tribunaux du Québec, de l'Ontario et de la Colombie-Britannique d'exercer leur pouvoir discrétionnaire et d'allouer une partie du capital excédentaire identifié au terme de la réévaluation des aspects financiers du Fonds de 2019 afin de créer quatre nouveaux bénéficiaires de distribution spéciale pour les membres reconnus et les membres de leur famille.

Les dates des audiences ne sont pas encore fixées. Au moment de la rédaction du présent communiqué, le Comité conjoint ne sait toujours pas si le Canada, les provinces ou les territoires s'opposeront à l'octroi de ces ordonnances d'allocation du capital excédentaire de 2019 au bénéfice des réclamants reconnus. Nous ne savons pas non plus encore si le gouvernement fédéral déposera des procédures en vue de demander aux tribunaux d'ordonner que le capital excédentaire de 2019 lui soit versé.

Pour en apprendre davantage sur les recommandations du Comité conjoint aux tribunaux et sur les prochaines étapes, veuillez consulter les renseignements disponibles [ici](#).

SECONDARY PAGE

SUMMARY OF THE JOINT COMMITTEE'S RECOMMENDATIONS TO THE COURTS - 2019 EXCESS CAPITAL

The Joint Committee's applications ask the Courts to allocate \$193,421,000 of the 2019 Excess Capital to create four new special distribution benefits for claimants approved under the Transfused HCV Plan, Hemophiliac HCV Plan, and the HCV Late Claims Benefit Plan (the "Plans").

The four recommendations made by the Joint Committee in these applications seek to further address concerns previously communicated to the Joint Committee and the Courts. Class members and family members continue to identify these areas as falling short of compensating for the losses and damages they have suffered.

While the 2019 Excess Capital is undoubtedly a large amount of money, the Joint Committee's recommendations are nonetheless limited by the funds available and the competing interests of the benefits it is seeking to obtain.

If the Courts grant the relief requested by the Joint Committee, approved class members and family members who have previously received one or more of the following benefits under the Plans, or claimants who are subsequently approved to receive benefits under the Plans, will be entitled to receive these corresponding 2019 special distribution benefits.

The Joint Committee's recommendations to the Courts and the value/cost of each are summarized below:

1. 6.8% of Fixed Payments

The Joint Committee recommends the creation of a 2019 special distribution benefit equal to **6.8%** of the value of the following fixed payments (shown in 1999 dollars), indexed to the dollar value of the year in which the benefit is paid out:

- the \$10,000, \$20,000, \$30,000, \$65,000 and/or \$100,000 fixed disease level payments under section 4.01(1)(a),(b),(c),(d),(e) of the Plans and the corresponding 8.5% special distribution benefit created from the 2013 Excess Capital;
- the \$50,000 fixed payment for the election made by living co-infected hemophiliacs under section 4.08(2) of the Hemophiliac HCV Plan or section 4.08(2)(Hemo) of the HCV Late Claims Benefit Plan and the corresponding 8.5% special distribution benefit created from the 2013 Excess Capital;
- the \$50,000 fixed payment for the election made by estates of infected persons who died before January 1, 1999 under section 5.01(1) of the Plans and the corresponding 8.5% special distribution benefit created from the 2013 Excess Capital;

- the \$120,000 fixed payment for the election made by estates and family members of infected persons who died before January 1, 1999 under section 5.01(2) of the Plans and the corresponding 8.5% special distribution benefit created from the 2013 Excess Capital; or
- the \$72,000 fixed payment for the election made by estates and family members of co-infected persons who died before January 1, 1999 under section 5.01(4) of the Hemophiliac HCV Plan or section 5.01(4)(Hemo) of the HCV Late Claims Benefit Plan and the corresponding 8.5% special distribution benefit created from the 2013 Excess Capital.

If the recommended allocation for fixed payments is granted:

- infected class members who received disease level benefits would be entitled to a special distribution benefit based on their current cumulative disease level and/or any progression in disease level that may hereafter occur in the following approximate amount(s) (shown in 2020 dollars):

Disease Level	6.8% Allocation per disease level	Cumulative Total (in 2020 dollars)
Disease level 1	\$1,097	\$1,097
Disease level 2	\$2,195	\$3,292
Disease level 3	\$3,292	\$6,584
Disease level 5	\$7,133	\$13,717
Disease level 6	\$10,974	\$24,691

- class members who received one of the following fixed payment benefits would be entitled to a special distribution benefit in the following approximate amount (shown in 2020 dollars):

Fixed Payment Type	6.8% (in 2020 dollars)
\$50,000 non-pecuniary general damages option for approved living co-infected hemophiliac class members	\$5,487
\$50,000 death benefit option for approved class members whose death prior to January 1, 1999 was caused by HCV	\$5,487
\$120,000 death benefit option for approved class members whose death before January 1, 1999 was caused by HCV	\$13,169
\$72,000 death benefit option for approved co-infected hemophiliac class members whose death before January 1, 1999 is not proven to be caused by HCV	\$7,901

The cost/value of this recommendation is approximately \$54,684,000 of the 2019 Excess Capital, before administrative expenses.

2. 50% of Loss of Guidance, Care and Companionship Payments

The Joint Committee recommends the creation of a 2019 special distribution benefit equal to **50%** of the value of the following loss of guidance, care and companionship payments (shown in 1999 dollars), indexed to the dollar value of the year in which it is paid out:

- the \$25,000 payment to a Spouse under section 6.01(a) of the Plans;
- the \$15,000 payment to a Child under age 21 at the date of death of the infected person under section 6.01(b) of the Plans;
- the \$5,000 payment to a Child age 21 or over at the date of death of the infected person under section 6.01(c) of the Plans and the \$4,600 special distribution benefit created from the 2013 Excess Capital;
- the \$5,000 payment to a Parent under section 6.01(d) of the Plans and the \$4,600 special distribution benefit created from the 2013 Excess Capital;
- the \$5,000 payment to a Sibling under section 6.01(e) of the Plans;
- the \$500 payment to a Grandparent under section 6.01(f) of the Plans; or
- the \$500 payment to a Grandchild under section 6.01(g) of the Plans.

If the recommended allocation for loss of guidance, care and companionship is granted, family members who received a loss of guidance, care and companionship benefit would be entitled to a special distribution benefit in the following approximate amount (shown in 2020 dollars):

Family Member	50% allocation (in 2020 dollars)
Spouse	\$18,593
Child < 21	\$11,155
Child 21 and >	\$7,139
Parent	\$7,139
Sibling	\$3,718
Grandparent/grandchild	\$372

The cost/value of this recommendation is approximately \$71,812,000 of the 2019 Excess Capital, before administrative expenses.

3. Increase Lost or Diminished Pension Benefits by 4% of Loss of Income

The Joint Committee recommends the creation of a special distribution benefit equal to **4%** of the combined value of the annual loss of income payment and the corresponding 10% special distribution benefit created from the 2013 Excess Capital, capped at \$200,000 per annum before 2014 and \$200,000 per annum indexed thereafter to compensate for lost or diminished pension benefits.

If the recommended allocation to increase lost or diminished pension benefits is granted, based on this formula, for example:

- an infected class member receiving an annual income loss benefit of \$50,000 would be entitled to a special distribution benefit of \$2,000 for each year of their income loss entitlement; while
- an infected class member with an annual income loss benefit of \$200,000 or more, would be entitled to a special distribution benefit of \$8,000 per year of income loss entitlement.

The cost/value of this recommendation is approximately \$6,653,000 of the 2019 Excess Capital, before administrative expenses.

4. Pay an additional \$2/hr for Loss of Services incurred from and after January 1, 2014

The Joint Committee recommends the creation of a special distribution benefit of **\$2/hour** for each compensable hour of Loss of Services under sections 4.03 and 6.01(2) of the Plans and the corresponding 2013 special distribution benefit, for the years 2014 and following, indexed to the dollar value of the year in which it is paid out

If the recommended allocation to pay an additional \$2/hour for loss of services incurred from and after January 1, 2014 is granted, for example, a class member receiving the maximum 22 hours of loss of services/week in 2020 would be entitled to a special distribution benefit in the approximate amount of \$3,400 for that year in 2020 dollars.

The cost/value of this recommendation is approximately \$60,272,000 of the Excess Capital, before administrative expenses.

INDEXING OF PAYMENTS

In the charts and examples mentioned above, the amount class members or family members would be entitled to receive under each of the Joint Committee's recommendations has been shown in 2020 dollars. If the Courts approve a recommendation and the amount becomes payable, the payment would be indexed up to the dollar value for the year in which the payment is made.

FURTHER INFORMATION

Please note that the above is only a summary of what the Joint Committee is asking the Courts to do: the materials that the Joint Committee has filed in the Courts must be referred to for full and accurate details.

The materials filed in Québec are found [here](#), the filed Ontario materials are [here](#), and those filed in British Columbia are [here](#).

HOW TO PROVIDE COMMENTS

The Joint Committee welcomes claimants' input about these applications. You can tell us what you think by writing to us through the administrator, [here](#):

Comments received will be provided to the Courts in future filings.

NEXT STEPS

Canada and/or the Provinces and Territories may oppose these requests for the 2019 Excess Capital to be allocated for the benefit of the class members and family members. Additionally, the Federal Government may bring its own applications asking for the 2019 Excess Capital to be paid out to Canada.

Hearing dates are not yet scheduled. How quickly they can be scheduled will depend on the positions Canada and the Provinces and Territories take on the Joint Committee's application, whether the Federal Government brings its own applications, and the availability of the three Courts to sit at the joint hearings.

Because the Courts in Ontario, British Columbia and Quebec jointly supervise the ongoing Hepatitis C Class Action settlement, all three Courts must hear the applications and must each reach substantially the same conclusions for their decisions to become effective.

UPDATES

Please monitor this page for news about progress of the Joint Committee's applications, including any dates for court hearings.

PAGE SECONDAIRE

RÉSUMÉ DES RECOMMANDATIONS DU COMITÉ CONJOINT AUX TRIBUNAUX – CAPITAL EXCÉDENTAIRE DE 2019

Les procédures déposées par le Comité conjoint demandent aux tribunaux d'allouer 193 421 000 \$ du capital excédentaire de 2019 pour créer quatre nouveaux bénéfices de distribution spéciale en faveur des membres reconnus en vertu du Régime à l'intention des transfusés infectés par le VHC, du Régime à l'intention des hémophiles infectés par le VHC et du Régime d'indemnisation pour les réclamations tardives (les « Régimes »).

Les quatre recommandations formulées par le Comité conjoint dans ses procédures visent à répondre davantage aux préoccupations ayant déjà été communiquées au Comité conjoint et aux tribunaux. Les membres du groupe et les membres de leur famille continuent d'indiquer que ces bénéfices ne suffisent pas à les indemniser pour les pertes et les dommages qu'ils ont subis.

Bien que le capital excédentaire de 2019 soit certainement un montant important, les recommandations du Comité conjoint sont néanmoins limitées par les fonds disponibles et les intérêts concurrents des bénéfices qu'il cherche à obtenir.

Si les tribunaux accordent les demandes formulées par le Comité conjoint, les membres reconnus des recours et les membres de leur famille qui ont déjà reçu un ou plusieurs des bénéfices de distribution spéciale 2016 dans le cadre des Régimes, ou les réclamants qui seront approuvés ultérieurement et qui recevront les indemnités prévues dans le cadre des Régimes, pourront recevoir ces bénéfices de distribution spéciale 2019.

Les recommandations du Comité conjoint aux tribunaux ainsi que leur valeur/coût sont résumés ci-dessous :

1. 6,8 % des Paiements Forfaitaires

Le Comité conjoint recommande la création d'un bénéfice de distribution spéciale 2019 égal à **6,8 %** de la valeur des paiements forfaitaires suivants (en dollars de 1999), indexée à la valeur en dollars de l'année au cours de laquelle le bénéfice est versé :

- les paiements forfaitaires de 10 000 \$, de 20 000 \$, de 30 000 \$, de 65 000 \$ ou de 100 000 \$ prévus aux articles 4.01(1)a), b), c), d) et e) des Régimes en fonction du niveau de maladie, et le bénéfice de distribution spéciale correspondant de 8,5 % créé à partir du capital excédentaire de 2013;
- le paiement forfaitaire de 50 000 \$ prévu à l'article 4.08(2) du Régime à l'intention des hémophiles infectés par le VHC et à l'article 4.08(2) (Hémo) du Régime d'indemnisation pour les réclamations tardives

pour les hémophiles co-infectés en vie ayant choisi cette option, et le bénéfice de distribution spéciale correspondant de 8,5 % créé à partir du capital excédentaire de 2013;

- le paiement forfaitaire de 50 000 \$ prévu à l'article 5.01(1) des Régimes en faveur de la succession des personnes infectées qui sont décédées avant le 1^{er} janvier 1999, ayant choisi cette option, et le bénéfice de distribution spéciale correspondant de 8,5 % créé à partir du capital excédentaire de 2013;
- le paiement forfaitaire de 120 000 \$ prévu à l'article 5.01(2) des Régimes en faveur de la succession et des membres de la famille des personnes infectées qui sont décédées avant le 1^{er} janvier 1999 et qui ont choisi cette option, et le bénéfice de distribution spéciale correspondant de 8,5 % créé à partir du capital excédentaire de 2013;
- le paiement forfaitaire de 72 000 \$ prévu à l'article 5.01(4) du Régime à l'intention des hémophiles infectés par le VHC et à l'article 5.01(4) (Hémo) du Régime d'indemnisation pour les réclamations tardives en faveur de la succession et des membres de la famille des personnes co-infectées qui sont décédées avant le 1^{er} janvier 1999 et qui ont choisi cette option, et le bénéfice de distribution spéciale correspondant de 8,5 % créé à partir du capital excédentaire de 2013.

Si l'allocation recommandée pour ces paiements forfaitaires est accordée :

- les membres infectés du groupe qui ont reçu des paiements forfaitaires en fonction de leur niveau de maladie auront droit à un bénéfice de distribution spéciale en fonction de leur niveau de maladie cumulatif et actuel ou de toute progression du niveau de maladie qui pourrait se produire subséquemment, et ce bénéfice pourrait se chiffrer au(x) montant(s) approximatif(s) suivant(s) (en dollars de 2020) :

Niveau de maladie	Allocation de 6,8 % par niveau de maladie	Total cumulatif (en dollars de 2020)
Niveau de maladie 1	1 097 \$	1 097 \$
Niveau de maladie 2	2 195 \$	3 292 \$
Niveau de maladie 3	3 292 \$	6 584 \$
Niveau de maladie 5	7 133 \$	13 717 \$
Niveau de maladie 6	10 974 \$	24 691 \$

- les membres du groupe qui ont reçu l'un ou l'autre des paiements forfaitaires suivants auront droit à un bénéfice de distribution spéciale se chiffrant au(x) montant(s) approximatif(s) suivant(s) (en dollars de 2020) :

Type de paiement forfaitaire	6,8 % (en dollars de 2020)
Option de 50 000 \$ à titre de dommages-intérêts généraux non pécuniaires au bénéfice des hémophiles vivants co-infectés approuvés	5 487 \$
Option de 50 000\$ à titre de prestation de décès pour les membres reconnus qui sont décédés avant le 1 ^{er} janvier 1999 et dont le décès a été causé par le VHC	5 487 \$

Option de 120 000 \$ à titre de prestation de décès pour les membres reconnus qui sont décédés avant le 1 ^{er} janvier 1999 et dont le décès a été causé par le VHC	13 169 \$
Option de 72 000 \$ à titre de prestation de décès pour les hémophiles co-infectés approuvés qui sont décédés avant le 1 ^{er} janvier 1999	7 901 \$

Le coût ou la valeur de cette recommandation est d'environ 54 684 000 \$ du capital excédentaire de 2019, avant les coûts d'administration.

2. 50 % des paiements pour perte de conseils, de soins et de compagnie

Le Comité conjoint recommande la création d'un bénéfice de distribution spéciale 2019 égal à **50 %** de la valeur des paiements suivants prévus pour indemniser la perte de conseils, de soins et de compagnie (en dollars de 1999), indexée à la valeur en dollars de l'année au cours de laquelle le bénéfice est versé :

- le paiement de 25 000 \$ à un conjoint en vertu de l'alinéa 6.01a) des Régimes;
- le paiement de 15 000 \$ à un enfant qui était âgé de moins de 21 ans à la date du décès de la personne infectée en vertu de l'alinéa 6.01b) des Régimes;
- le paiement de 5 000 \$ à un enfant qui était âgé de 21 ans ou plus à la date du décès de la personne infectée en vertu de l'alinéa 6.01c) des Régimes, et le bénéfice de distribution spéciale de 4 600 \$ créé à partir du capital excédentaire de 2013;
- le paiement de 5 000 \$ à un parent en vertu de l'alinéa 6.01d) des Régimes, et le bénéfice de distribution spéciale de 4 600 \$ créé à partir du capital excédentaire de 2013;
- le paiement de 5 000 \$ à un frère ou une sœur en vertu de l'alinéa 6.01e) des Régimes;
- le paiement de 500 \$ à un grand-parent en vertu de l'alinéa 6.01f) des Régimes;
- le paiement de 500 \$ à un petit-enfant en vertu de l'alinéa 6.01g) des Régimes.

Si l'allocation recommandée à l'égard de la perte de conseils, de soins et de compagnie est accordée, les membres de la famille qui ont reçu l'indemnité prévue pour perte de conseils, de soins et de compagnie auront droit à un bénéfice de distribution spéciale se chiffrant au montant approximatif suivant (en dollars de 2020) :

Membre de la famille	Allocation de 50 % (en dollars de 2020)
Conjoint(e)	18 593 \$
Enfant de moins de 21 ans	11 155 \$
Enfant de 21 ans et plus	7 139
Parent	7 139 \$
Frère ou sœur	3 718 \$
Grand-parent ou petit-enfant	372 \$

Le coût ou la valeur de cette recommandation est d'environ 71 812 000 \$ du capital excédentaire de 2019, avant les coûts d'administration.

3. Augmenter l'indemnisation pour la perte ou diminution des prestations de retraite de 4 % de la perte de revenu

Le Comité conjoint recommande la création d'un bénéfice de distribution spéciale égal à **4 %** de la valeur combinée de la perte annuelle de revenu et du bénéfice de distribution spéciale correspondant de 10 % créé à partir du capital excédentaire de 2013, plafonné à 200 000 \$ par année avant 2014 et à 200 000 \$ par année indexée par la suite pour indemniser la perte ou diminution des prestations de retraite.

Si l'allocation recommandée visant à augmenter l'indemnisation pour la perte ou diminution des prestations de retraite est accordée, à titre d'exemple, selon cette formule, :

- un membre du groupe infecté qui reçoit une indemnité annuelle pour perte de revenu de 50 000 \$ aurait droit à un bénéfice de distribution spéciale de 2 000 \$ pour chacune des années pour lesquelles il a droit à l'indemnisation pour perte de revenu;
- un membre du groupe infecté qui reçoit une indemnité annuelle pour perte de revenu de 200 000 \$ aurait droit à un bénéfice de distribution spéciale de 8 000 \$ pour chacune des années pour lesquelles il a droit à l'indemnisation pour perte de revenu.

Le coût ou la valeur de cette recommandation est d'environ 6 653 000 \$ du capital excédentaire de 2019, avant les coûts d'administration.

4. Payer 2 \$/hre de plus pour la perte de services domestiques encourue à partir du 1^{er} janvier 2014

Le Comité conjoint recommande la création d'un bénéfice de distribution spéciale de **2 \$/heure** pour chaque heure indemnisée à titre de perte de services domestiques en vertu de l'article 4.03 et du paragraphe 6.01(2) des Régimes, et en vertu du bénéfice de distribution spéciale correspondant de 2013, pour les années 2014 et suivantes, indexé à la valeur en dollars de l'année au cours de laquelle il est versé.

Si l'allocation recommandée visant à verser 2 \$/hre pour la perte de services domestiques encourue à partir du 1^{er} janvier 2014 est accordée, à titre d'exemple, un membre du groupe qui reçoit l'indemnisation maximale de 22 heures par semaine à titre de perte de services domestiques en 2020 aurait droit à un bénéfice de distribution spéciale d'un montant approximatif de 3 400 \$ pour cette année-là en dollars de 2020.

Le coût ou la valeur de cette recommandation est d'environ 60 272 000 \$ du capital excédentaire, avant les coûts d'administration.

INDEXATION DES PAIEMENTS

Dans les tableaux et les exemples susmentionnés, le montant que les membres du groupe ou les membres de leur famille auraient le droit de recevoir en vertu de chacune des recommandations du Comité conjoint a été indiqué en dollars de 2020. Si les tribunaux approuvent une recommandation et que le montant devient payable, le paiement sera indexé à la valeur en dollars de l'année au cours de laquelle le paiement est effectué.

RENSEIGNEMENTS SUPPLÉMENTAIRES

Veuillez noter que ce qui précède n'est qu'un résumé des procédures que le Comité conjoint a déposé auprès des tribunaux et qu'il faut se référer à ces procédures pour obtenir l'information complète et détaillée.

Les procédures déposées au Québec se trouvent [ici](#), les procédures déposées en Ontario se trouvent [ici](#), et les procédures déposées en Colombie-Britannique se trouvent [ici](#).

COMMENT TRANSMETTRE DES COMMENTAIRES

Le Comité conjoint invite les membres des recours à transmettre leurs commentaires concernant ces procédures. Vous pouvez nous dire ce que vous en pensez en nous écrivant, par l'intermédiaire de l'administrateur, [ici](#).

Les commentaires reçus seront également déposés auprès des tribunaux.

PROCHAINES ÉTAPES

Le Canada, les provinces et les territoires peuvent s'opposer à ces demandes du Comité conjoint visant à allouer une partie du capital excédentaire de 2019 aux membres du groupe et aux membres de leur famille. De plus, le gouvernement fédéral peut présenter ses propres demandes visant à demander que le capital excédentaire de 2019 soit versé au Canada.

Les dates d'audition devant les tribunaux ne sont pas encore fixées. La rapidité avec laquelle elles pourront être fixées dépendra des positions que le Canada, les provinces et les territoires adopteront à l'égard des procédures déposées par le Comité conjoint, de la question de savoir si le gouvernement fédéral présentera ses propres demandes et de la disponibilité des trois tribunaux à siéger lors d'auditions conjointes.

Étant donné que les tribunaux de l'Ontario, de la Colombie-Britannique et du Québec supervisent conjointement l'application de la Convention de règlement relative à l'hépatite C 1986-1990, les trois tribunaux doivent entendre les procédures et leur décision ne pourra prendre effet que si leurs conclusions respectives sont substantiellement les mêmes.

MISES À JOUR

Veillez consulter régulièrement la présente page afin d'être informé des prochaines étapes concernant l'attribution du capital excédentaire 2019, incluant les dates d'audition de ces procédures devant les tribunaux.

*THE ATTACHED IS EXHIBIT "B" TO THE AFFIDAVIT OF
HEATHER RUMBLE PETERSON SWORN BEFORE ME
THIS 18TH DAY OF MAY, 2023*



COMMISSIONER FOR TAKING AFFIDAVITS

Deborah Lorraine Tocco, a Commissioner, etc.,
Province of Ontario, for Strosberg Sasso Sutts LLP,
Barristers and Solicitors.
Expires March 21, 2025.

2019 EXCESS CAPITAL ALLOCATION HEARING DATE SET - NEW

The supervising courts in Ontario, British Columbia and Québec have set a date for the joint hearing of the Joint Committee's revised applications to have the Courts exercise their discretion and allocate the 2019 Excess Capital identified by the 2019 Financial Sufficiency Review to create four new special distribution benefits for approved class members and family members.

The joint hearing will be held by judicial videoconference on Tuesday May 30, 2023 beginning at 11:00 am EDT. Information on how you may attend the hearing by video-link will be provided on this site once it becomes available.

Canada, Ontario, British Columbia and Québec have indicated that they will take no position on the Joint Committee's applications to have the 2019 Excess Capital allocated for the benefit of claimants. The remaining provinces and territories have not yet provided their position. Canada will not be seeking to have an alternative allocation made.

To learn more about the Joint Committee's recommendations to the Courts and next steps, review the NOTICE and other information available [here](#).

AUDITION DE LA DEMANDE DU COMITÉ CONJOINT RECOMMANDANT D'ATTRIBUER LE CAPITAL EXCÉDENTAIRE 2019 AUX MEMBRES DU GROUPE - NOUVEAU

Les Tribunaux du Québec, de l'Ontario et de la Colombie-Britannique chargés de superviser la Convention de règlement relative à l'Hépatite C 1986-1990 ont fixé la date de l'audition conjointe des demandes modifiées déposées par le Comité conjoint leur recommandant d'exercer leur discrétion afin d'attribuer le Capital excédentaire 2019 identifié au terme de la réévaluation des aspects financiers du Fonds à la date du 31 décembre 2019 pour créer quatre nouvelles Indemnités de distribution spéciale au bénéfice des membres reconnus et des membres reconnus de leur famille.

L'audition conjointe se tiendra par visioconférence judiciaire mardi le 30 mai 2023 à 11 :00 a.m. HAE. Les informations pour assister à l'audition par lien vidéo seront communiquées sur ce site internet dès qu'elles seront disponibles.

Le Canada, l'Ontario et le Québec ont avisé qu'ils ne prennent pas position à l'égard des demandes du Comité conjoint visant à attribuer le Capital excédentaire 2019 au bénéfice des membres reconnus des actions collectives. Les autres provinces et territoires n'ont pas encore communiqué leur position. Le Canada n'entend pas formuler de demande.

Pour en savoir plus au sujet des recommandations du Comité conjoint et des prochaines étapes, veuillez prendre connaissance de l'AVIS AUX MEMBRES en cliquant [ici](#) .

NOTICE

PROPOSED ALLOCATION OF 2019 SURPLUS FOR THE BENEFIT OF CLASS MEMBERS

Every three years the financial sufficiency of the Hepatitis C 1986-1990 Trust Fund is reviewed to ensure that it is adequate to meet the expected needs of class members and family members.

On the most recent financial sufficiency review, the actuaries retained by the Joint Committee and by the federal government expressed the opinion that the Trust Fund is financially sufficient and that there is a **surplus**. They estimated the surplus was between \$195,037,000 and \$201,019,000 as at December 31, 2019. After that date, the financial markets declined substantially, which decreased the value of the Trust Fund. The surplus is now estimated to be about \$174 million as at June 30, 2022.

The settlement approval orders allow the Joint Committee and the governments to apply to the Courts where there is a surplus. The Courts have discretion to decide what to do with the surplus, including whether all or a portion of the surplus should be allocated or kept in the Trust Fund.

THE JOINT COMMITTEE'S RECOMMENDATIONS

In May 2022, the Joint Committee filed applications requesting the Courts to allocate the surplus for the benefit of class members and family members with a small balance kept in the Trust Fund. The Joint Committee's applications were recently amended to reflect the lower amount of surplus available for allocation, which required the Joint Committee's initial recommendations to be revised.¹ The federal government has confirmed that it will not oppose the Joint Committee's amended applications and that it will not apply for any portion of the surplus. Ontario, British Columbia and Quebec have also confirmed that they will take no position on the amended applications. The remaining provinces and territories have not yet provided their position on the applications.

A summary of the Joint Committee's revised recommendations is attached along with details about how you can access the full application records for more information. If the Courts accept the Joint Committee's revised recommendations, all of the surplus will be allocated for the benefit of class members and family members except about \$2 million (the "**Retained Amount**"), which will be retained in the Trust Fund.

WHY ARE YOU RECEIVING THIS NOTICE?

This notice is to allow you to express your views in advance of the hearings about the Joint Committee's recommendations or to make a request or recommendation regarding the Retained Amount. It also provides the details of when and how the hearings will be held.

¹ Note: The Joint Committee's applications are based on 2019 dollars. The estimated cost of the Joint Committee's revised recommendations is about \$160 million in 2019 dollars, which is about \$172 million in 2022 dollars.

HEARING DETAILS

The Joint Committee's applications to allocate the surplus will be heard at a joint hearing of the three Courts, to be held by judicial videoconference on **Tuesday, May 30, 2023 at 11:00 am EDT**.

Information on how you may attend the hearing by video-link will be provided on the home page of the settlement website <https://www.hepc8690.ca/home-e.shtml> once it becomes available.

HOW YOU CAN PROVIDE YOUR INPUT TO THE COURTS

If you wish to comment on the Joint Committee's recommendations or to make a request or recommendation regarding the Retained Amount, you may do so **no later than May 15, 2023** by email at info@hepc8690.ca or by regular mail at the following address:

PO Box 2370
Station D
Ottawa, Ontario
K1P 5W5

All written communications received by this date will be provided to the Courts for their consideration.

SUMMARY OF THE JOINT COMMITTEE'S FOUR RECOMMENDATIONS²

Recommendation 1 - 6.8% of Fixed Payments

The Joint Committee recommends the creation of a special distribution benefit equal to **6.8%** of the value of the fixed payments listed below, indexed to the dollar value of the year in which the benefit is paid out.

If the recommended allocation for fixed payments is granted:

- infected class members who received or become entitled to receive disease level benefits would be entitled to a special distribution benefit based on their current cumulative disease level and/or any progression in disease level that may thereafter occur in the following approximate amount(s) (shown in 2020 dollars):

Disease Level	6.8% Allocation per disease level	Cumulative Total (in 2020 dollars)
Disease level 1	\$1,097	\$1,097
Disease level 2	\$2,195	\$3,292
Disease level 3	\$3,292	\$6,584
Disease level 5	\$7,133	\$13,717
Disease level 6	\$10,974	\$24,691

- class members who received or become entitled to receive one of the following fixed payment benefits would be entitled to a special distribution benefit in the following approximate amount (shown in 2020 dollars):

Fixed Payment Type	6.8% (in 2020 dollars)
\$50,000 non-pecuniary general damages option for approved living co-infected hemophiliac class members	\$5,487
\$50,000 death benefit option for approved class members whose death prior to January 1, 1999 was caused by HCV	\$5,487
\$120,000 death benefit option for approved class members whose death before January 1, 1999 was caused by HCV	\$13,169

² Although separate applications have been filed with each of the three courts (Ontario, Québec and British Columbia), the Joint Committee's recommendations to each court are identical and meant to be applicable in a similar fashion in each jurisdiction.

\$72,000 death benefit option for approved co-infected hemophiliac class members whose death before January 1, 1999 is not proven to be caused by HCV	\$7,901
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Approximately \$54,684,000 of the 2019 surplus is required to fund this benefit.

Recommendation 2 - 50% of Loss of Guidance, Care and Companionship Payments

The Joint Committee recommends the creation of a special distribution benefit equal to **50%** of the value of the loss of guidance, care and companionship payments payable to family members³ following the death of the HCV infected person.

If the recommended allocation for loss of guidance, care and companionship is granted, family members who have received or become entitled to receive a loss of guidance, care and companionship benefit would be entitled to a special distribution benefit in the following approximate amount, indexed to the dollar value of the year in which the benefit is paid out:

Family Member	50% allocation (in 2020 dollars)
Spouse	\$18,593
Child < 21	\$11,155
Child 21 and >	\$7,139
Parent	\$7,139
Sibling	\$3,718
Grandparent/Grandchild	\$372

Approximately \$71,812,000 of the 2019 surplus is required to fund this benefit.

Recommendation 3 - Increase Lost or Diminished Pension Benefits by 4% of Loss of Income

The Joint Committee recommends the creation of a special distribution benefit that increases lost or diminished pension benefits for those who have received or become entitled to receive loss of income benefits by an additional **4%** of the annual loss of

³ Family members must have been alive when the infected class member passed away to be eligible for benefits. References to Child under age 21 and Child 21 years of age or older refers to the Child's age at the time the infected class member passed away.

income payment capped at \$200,000 per annum before 2014 and \$200,000 per annum indexed thereafter, payable retroactively and prospectively.

If the recommended allocation to increase lost or diminished pension benefits is granted, based on this formula, for example:

- an infected class member receiving an annual income loss benefit of \$50,000 would be entitled to a 2019 special distribution benefit of \$2,000 for each year of their income loss entitlement; while
- an infected class member with an annual income loss benefit of \$200,000 or more before 2014 would be entitled to a special distribution benefit of \$8,000 per year of income loss entitlement; and
- an infected class member with an annual income loss benefit of \$200,000 or more in 2014 or after would be entitled to a special distribution benefit of 4% on the indexed value of \$200,000 per year of income loss entitlement.

Approximately \$6,653,000 of the 2019 surplus is required to fund this benefit.

Recommendation 4 - Pay an additional \$1.49/hr for Loss of Services incurred from and after January 1, 2019

The Joint Committee recommends the creation of a special distribution benefit of **\$1.49/hour** for each compensable hour of loss of services benefits received or entitled to be received, for the years 2019 and following, indexed to the dollar value of the year in which it is paid out.

If the recommended allocation to pay an additional \$1.49/hour for loss of services incurred from and after January 1, 2019 is granted, for example, a class member who received the maximum 22 hours of loss of services/week for 2020 would be entitled to a special distribution benefit in the approximate amount of \$1,700 for that year and any subsequent years of entitlement, indexed to the year of payment.

Approximately \$25,365,000 of the 2019 surplus is required to fund this benefit.

Costs of Administration

Approximately \$1,400,000 of the 2019 surplus is required to administer the requested special distribution benefits described above.

FURTHER INFORMATION

Please note that the above is only a summary. The materials that the Joint Committee has filed with the Courts must be referred to for full and accurate details. The material filed with each Court is identical in substance. **The applications can be reviewed at the following links: Ontario <here>, British Columbia <here>, Quebec <here>**

AVIS

ALLOCATION DU CAPITAL EXCÉDENTAIRE 2019 AU BÉNÉFICE DES MEMBRES DES RECOURS

Tous les trois ans, une réévaluation des aspects financiers du Fonds du Règlement relatif à l'Hépatite C 1986-1990 est effectuée afin de s'assurer que les obligations financières envers les membres infectés et les membres de leur famille puissent être honorées.

Au terme de la plus récente réévaluation financière, les actuaires retenus par le Comité conjoint et par le gouvernement fédéral ont exprimé l'opinion que le Fonds était financièrement suffisant et qu'il existait un capital excédentaire (ou surplus). Les actuaires ont estimé qu'en date du 31 décembre 2019, ce surplus s'élevait à un montant entre 195 037 000 \$ et 201 019 000 \$ (le « surplus 2019 »). Toutefois après cette date, les marchés financiers ont reculé substantiellement, entraînant une diminution de valeur du Fonds de sorte que le surplus au 30 juin 2022 est d'environ 174 millions de dollars.

Les ordonnances ayant approuvé le Règlement et tout particulièrement l'Annexe F, prévoient la possibilité pour le Comité conjoint et pour les gouvernements de s'adresser aux Tribunaux s'il existe un surplus. Les Tribunaux ont discrétion pour décider ce qu'il advient de ce surplus, incluant s'il doit être en tout ou en partie alloué ou conservé dans le Fonds.

LES RECOMMANDATIONS DU COMITÉ CONJOINT

En mai 2022, le Comité conjoint a déposé des procédures demandant aux Tribunaux d'exercer leur pouvoir discrétionnaire et d'allouer une partie du surplus pour les membres reconnus et les membres de leur famille. Les procédures du Comité conjoint ont été récemment modifiées afin de tenir compte du montant moins élevé de surplus disponible, ce qui a requis de réviser ce qui avait été initialement recommandé.¹ Le gouvernement fédéral a indiqué qu'il ne conteste pas les demandes modifiées du Comité conjoint et ne déposera pas d'autre demande à l'égard du surplus 2019. L'Ontario, le Québec et la Colombie-Britannique ont indiqué qu'elles ne prennent pas position sur la demande du Comité conjoint et s'en remettent à la discrétion des Tribunaux. Les autres provinces et territoires n'ont pas encore fait part de leur position.

Un résumé des recommandations modifiées du Comité conjoint ainsi que les détails concernant la façon de consulter les procédures et les pièces déposées, dans leur version intégrale, sont joints au présent avis. Si les Tribunaux approuvent les recommandations modifiées du Comité conjoint, le surplus sera alloué entièrement au bénéfice des membres reconnus des recours et des membres reconnus de leur famille, à l'exception d'environ 2 millions de dollars qui seront conservés dans le Fonds.

POURQUOI RECEVEZ-VOUS CET AVIS?

Cet avis a pour but de vous permettre d'exprimer votre opinion avant les auditions sur les demandes modifiées du Comité conjoint ou de formuler une demande à l'égard du montant non visé par les recommandations et conservé dans le Fonds. Il contient également les informations quant à la date, l'heure et le lieu prévus pour la tenue des audiences.

¹ Les demandes du Comité conjoint sont faites en fonction de dollars de 2019. L'évaluation des recommandations modifiées du Comité conjoint est d'environ 160 millions de dollars de 2019, soit environ 172 millions de dollars 2022.

DÉTAILS CONCERNANT LES AUDITIONS

Les demandes du Comité conjoint demandant d'allouer le surplus 2019 seront entendues lors d'une audition conjointe tenue simultanément devant les trois Tribunaux par visioconférence **mardi le 30 mai 2023 à 11h00 a.m. HAE.**

Les informations pour vous permettre d'assister à l'audition via internet seront publiées sur la page d'accueil du site internet du Règlement au <https://www.hepc8690.ca/home-f.shtml> dès qu'elles seront disponibles.

COMMENT TRANSMETTRE VOS COMMENTAIRES AUX TRIBUNAUX

Si vous souhaitez transmettre votre opinion sur les recommandations formulées par le Comité conjoint ou formuler une demande ou une suggestion à l'égard du montant non visé par les recommandations, vous pouvez le faire **d'ici le 15 mai 2023** par courriel au info@hepc8690.ca ou par la poste régulière à l'adresse postale suivante :

Casier postal 2370
Station D
Ottawa, Ontario
K1P 5W5

Toutes les représentations écrites reçues avant l'expiration du délai seront acheminées aux Tribunaux pour considération.

RÉSUMÉ DES QUATRE RECOMMANDATIONS DU COMITÉ CONJOINT²

Recommandation 1 – 6,8% des Paiements Forfaitaires

Le Comité conjoint recommande la création d'un bénéfice de distribution spéciale 2019 égal à **6,8 %** de la valeur des paiements forfaitaires (en dollars de 1999), indexée à la valeur en dollars de l'année au cours de laquelle le bénéfice est versé.

Si l'allocation recommandée pour ces paiements forfaitaires est accordée :

- les membres infectés du groupe qui ont reçu des paiements forfaitaires en fonction de leur niveau de maladie auront droit à un bénéfice de distribution spéciale en fonction de leur niveau de maladie cumulatif et actuel ou de toute progression du niveau de maladie qui pourrait se produire subséquemment, et ce bénéfice pourrait se chiffrer au(x) montant(s) approximatif(s) suivant(s):

Niveau de maladie	Allocation de 6,8 % par niveau de maladie	Total cumulatif (en dollars de 2020)
Niveau de maladie 1	1 097 \$	1 097 \$
Niveau de maladie 2	2 195 \$	3 292 \$
Niveau de maladie 3	3 292 \$	6 584 \$
Niveau de maladie 5	7 133 \$	13 717 \$
Niveau de maladie 6	10 974 \$	24 691 \$

- les membres du groupe qui ont reçu l'un ou l'autre des paiements forfaitaires suivants auront droit à un bénéfice de distribution spéciale se chiffrant au(x) montant(s) approximatif(s) suivant(s):

Type de paiement forfaitaire	6,8 % (en dollars de 2020)
Option de 50 000 \$ à titre de dommages-intérêts généraux non pécuniaires au bénéfice des hémophiles vivants co-infectés approuvés	5 487 \$
Option de 50 000\$ à titre de prestation de décès pour les membres reconnus qui sont décédés avant le 1 ^{er} janvier 1999 et dont le décès a été causé par le VHC	5 487 \$
Option de 120 000 \$ à titre de prestation de décès pour les membres reconnus qui sont décédés avant le 1 ^{er} janvier 1999 et dont le décès a été causé par le VHC	13 169 \$

² Bien que des procédures distinctes aient été déposées auprès de chacun des trois tribunaux (au Québec, en Colombie-Britannique et en Ontario), les recommandations du Comité conjoint qui y sont formulées sont identiques et censées être applicables de manière similaire dans chaque juridiction.

Option de 72 000 \$ à titre de prestation de décès pour les hémophiles co-infectés approuvés qui sont décédés avant le 1 ^{er} janvier 1999	7 901 \$
---	----------

Le coût ou la valeur de cette recommandation est d'environ 54 684 000 \$ du surplus 2019, avant les coûts d'administration.

Recommandation 2 – 50% des paiements pour perte de conseils, de soins et de compagnie

Le Comité conjoint recommande la création d'un bénéfice de distribution spéciale 2019 égal à **50 %** de la valeur des paiements prévus pour indemniser la perte de conseils, de soins et de compagnie (en dollars de 1999), indexée à la valeur en dollars de l'année au cours de laquelle le bénéfice est versé.

Si l'allocation recommandée à l'égard de la perte de conseils, de soins et de compagnie est accordée, les membres de la famille³ qui ont reçu l'indemnité prévue pour perte de conseils, de soins et de compagnie auront droit à un bénéfice de distribution spéciale se chiffrant au montant approximatif suivant:

Membre de la famille	Allocation de 50 % (en dollars de 2020)
Conjoint(e)	18 593 \$
Enfant de moins de 21 ans	11 155 \$
Enfant de 21 ans et plus	7 139
Parent	7 139 \$
Frère ou sœur	3 718 \$
Grand-parent ou petit-enfant	372 \$

Le coût ou la valeur de cette recommandation est d'environ 71 812 000 \$, avant les coûts d'administration.

Recommandation 3 – Augmenter l'indemnisation pour la perte ou diminution des prestations de retraite de 4% de la perte de revenu

Le Comité conjoint recommande la création d'un bénéfice de distribution spéciale égal à **4 %** de la valeur combinée de la perte annuelle de revenu et du bénéfice de distribution spéciale correspondant de 10 % créé à partir du capital excédentaire de 2013, plafonné à 200 000 \$ par année avant 2014 et à 200 000 \$ par année indexée par la suite pour indemniser la perte ou diminution des prestations de retraite.

Si l'allocation recommandée visant à augmenter l'indemnisation pour la perte ou diminution des prestations de retraite est accordée, à titre d'exemple, selon cette formule, :

- un membre du groupe infecté qui reçoit une indemnité annuelle pour perte de revenu de 50 000 \$ aurait droit à un bénéfice de distribution spéciale de 2 000 \$ pour chacune des années pour lesquelles il a droit à l'indemnisation pour perte de revenu;

³ Pour avoir droit à l'indemnité, le membre de la famille doit avoir survécu au décès de la personne infectée. Les catégories Enfant de moins de 21 ans et Enfant de 21 ans et plus réfèrent à l'âge de l'enfant à la date du décès de la personne infectée.

- un membre du groupe infecté qui reçoit une indemnité annuelle pour perte de revenu de 200 000 \$ aurait droit à un bénéfice de distribution spéciale de 8 000 \$ pour chacune des années pour lesquelles il a droit à l'indemnisation pour perte de revenu.

Le coût ou la valeur de cette recommandation est d'environ 6 653 000 \$, avant les coûts d'administration.

Recommandation 4 – Payer 1,00 \$/hre de plus pour la perte de services domestiques encourue à compter du 1^{er} janvier 2019

Le Comité conjoint recommande la création d'un bénéfice de distribution spéciale de **1 \$/heure** pour chaque heure indemnisée à titre de perte de services domestiques pour les années 2019 et suivantes, indexé à la valeur en dollars de l'année au cours de laquelle il est versé.

Si l'allocation recommandée visant à verser 1 \$/hre pour la perte de services domestiques encourue à partir du 1^{er} janvier 2019 est accordée, à titre d'exemple, un membre du groupe qui reçoit l'indemnisation maximale de 22 heures par semaine à titre de perte de services domestiques en 2020 aurait droit à un bénéfice de distribution spéciale d'un montant approximatif de 1 700 \$ pour cette année-là et toute année indemnisable subséquente, indexé à la valeur en dollars de l'année au cours de laquelle il est versé.

Le coût ou la valeur de cette recommandation est d'environ 25 365 000 \$, avant les coûts d'administration.

Coûts d'administration

Une somme d'environ 1 400 000 \$ sera requise pour financer les coûts d'administration des bénéfices de distribution spéciale recommandés et ci-haut décrits.

RENSEIGNEMENTS SUPPLÉMENTAIRES

Veillez noter que ce qui précède n'est qu'un résumé des procédures que le Comité conjoint a déposé auprès des tribunaux et qu'il faut se référer à ces procédures pour obtenir l'information complète et détaillée. Les liens pour y accéder sont les suivants : procédures déposées au Québec se trouvent [ici](#), les procédures déposées en Ontario se trouvent [ici](#), et les procédures déposées en Colombie-Britannique se trouvent [ici](#).

*THE ATTACHED IS EXHIBIT "C" TO THE AFFIDAVIT OF
HEATHER RUMBLE PETERSON SWORN BEFORE ME
THIS 18TH DAY OF MAY, 2023*



COMMISSIONER FOR TAKING AFFIDAVITS

Deborah Lorraine Tocco, a Commissioner, etc.,
Province of Ontario, for Strosberg Sasso Sutts LLP,
Barristers and Solicitors.
Expires March 21, 2025.

Class Member Submissions 2019 Allocation Hearing

Recommendation One – Fixed Payments

From: [REDACTED]
Sent: Wednesday, May 10, 2023 5:22 AM
To: HepC8690 <info@hepc8690.ca>
Subject: RECOMMANDATION DE DISTRIBUTION

RECEIVED

3041

MAY 10 2023

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À qui de droit,

SUJET : Claim ID : [REDACTED] Claim ID : [REDACTED]

Quelque soit la décision du Comité conjoint, par la présente, j'aimerais vous soumettre une demande de distribution aux ayants droits.

Compte tenu du fait que rouvrir la succession ainsi que les comptes en banque de la succession impliqueraient des formalités conséquentes, des coûts exorbitants et injustifiés, il serait souhaitable que vous distribuez les sommes aux ayants droits vous-même en tenant compte de la quote-part de chacun des héritiers.

Je demeure à votre disposition pour des informations supplémentaires.

Je vous prie d'agréer mes sincères salutations.

[REDACTED]
Au bénéfice de la succession de [REDACTED] Claim ID : [REDACTED] et de [REDACTED]
[REDACTED] Claim ID [REDACTED]

[REDACTED]
Envoyé à partir de Courrier pour Windows

From: [REDACTED]
Sent: Wednesday, May 10, 2023 5:39 PM
To: HepC8690 <info@hepc8690.ca>
Subject: Surplus Rightfully Owed

RECEIVED

3042

MAY 10 2023 [REDACTED]

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Hi,

I would like to see the surplus sent out to people like myself who we trusted the health care system of our government but in turn we were unwilling, unknowingly infected with Hepatitis C.

I find living with the fear throughout my life whether i would live would see my retirement years is irresponsible of the government and Canadian Red Cross system.

My story didn't stop with just myself being infected through a hospital but my unborn child as well. Do the right and responsible thing and support those who are/were infected at no fault of their own, give us the surplus!

Thank you
[REDACTED]

Get [Outlook for Android](#)

-----Original Message-----

RECEIVED

3043

From: [REDACTED]
Sent: Thursday, May 4, 2023 11:41 AM
To: HepC8690 <info@hepc8690.ca>
Subject: Recommandation

MAY 04 2023

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Bonjour,

Après avoir reçu et lu votre dernier avis pour Allocation du Capital Excédentaire 2019 Je suis pour la recommandation numéro 1 que je trouve juste et équitable pour tout les gens infectés Nous avons tous subi d'une façon où d'une autre des séquelles et des moments difficiles après avoir été infectés Alors les surplus devraient être répartis pour tous vivants où décédés

Bien à vous

[REDACTED]
Claim ID [REDACTED]

Envoyé de mon iPad

RECEIVED

3044

MAY 10 2023



To whom it may concern:

Another round of what should be done with the surplus of the HEPC Class action Lawsuit.

Money will never replace the brother and friend I lost almost 20 years ago when he was only 49 years old but, as I have commented in the past, the funds were meant for claimants/families of those affected with HEPC and this guideline should continue to be followed.

Sincerely,



May 3/2023

May 8, 2023

RECEIVED

MAY 10 2023

Joint Committee Member
Via email: info@hepc8690.ca

Dear Joint Committee Member:

Thank you for your letter "The Joint Committee Recommendations regarding retained amount" May 2023. I appreciate the opportunity to provide information and input.

I will soon be 65 years of age, a male that was 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.

I have completed a grueling and lengthy (1½ yrs) hepatitis treatment regime since contracting hepatitis C. During the treatment period I experienced many significant negative side effects/symptoms including the following: extreme fatigue, anemia, short-term memory issues, headaches, fever, muscle pain, rigors, insomnia, nausea, irritability, arthralgia, anorexia, diarrhea, dermatitis, itching, depression, and mood swings. Not only was my health directly affected during this treatment time my income, which is based on commission sales, was significantly reduced.

I am pleased to report that this treatment was partially 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.

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 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, i.e. at the very minimum Recommendation 1 – 6.8% of Fixed Payments. 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 Signature]

RECEIVED

MAY 10 2023

May 8, 2023

Joint Committee Member
Via email: info@hepc8690.ca

Dear Joint Committee Member:

Thank you for your letter "The Joint Committee Recommendations regarding retained amount" May 2023. I appreciate the opportunity to provide information and input.

I am soon to be 74 years of age, a male that was 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 9 years 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.

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.

I have had four significant falls which were attributed to on-going weakness from the 2013 hepatitis treatment regime. I continue to this day to participate 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., **i.e. at the very minimum Recommendation 1 – 6.8% of Fixed Payments.** 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

From: [REDACTED]
To: [HepC8690](#)
Subject: Hepatitis C 1986-1990 Trust Fund
Date: April 14, 2023 12:26:19 PM
Importance: High

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REGARDING ALLOCATION OF 2019 SURPLUS IN THE HEPATITIS C 1986-1990 TRUST FUND

CLAIMANT NUMBER [REDACTED]

[REDACTED]

It is our opinion that the Joint Committee applications & amendments to the Courts in May 2022 regarding the Allocation of 2019 Surplus in the Hepatitis C 1986-1990 Trust fund be accepted to allocate the surplus for the benefit of class members and family members.

Regards,

[REDACTED]

From: [Chya Mogerman](#)
To: [Chya Mogerman](#)
Subject: RE: Hepatitis C
Date: May 12, 2023 10:56:00 AM

From: [REDACTED]
Date: May 9, 2023 at 5:08:07 PM PDT
To: JJ Camp <JJCamp@cfmlawyers.ca>

My name is [REDACTED] claim [REDACTED] I'm writing you for the purpose of the 2019 surplus I'm a level 4 disease was a 13 year old kid when I get hepc been sick for 36 years do to multiple blood transfusions got multiple doses of tainted blood still alive but sick the money that I get from the settlement is not enough the disease took my childhood away and left me in the position to be on welfare do to not enough school because always being teased and or beating up for many years so I didn't become the man that I should have been mony that I get is based on low income I hope that the courts bistribute the surplus in what's hapend and what is happening with the disease levels according to sickness

From: [REDACTED]
To: [HepC8690](#)
Subject: Distribution of surplus funds
Date: April 18, 2023 10:07:20 AM

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My name is [REDACTED], Claim # [REDACTED]

My recommendation is for Proposal 1

From: [REDACTED]
To: [HepC8690](#)
Cc: [REDACTED]
Subject: Concerns and disappointments
Date: April 15, 2023 12:44:39 PM

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I'm sure you've read many sad stories worse than mine. I am thankful after many years to have suffered little and not been overcome by the disease and stigmas surrounding what I was put through because of terrible decision making in the government who I trust to care for the people under its trust. Please see my points at the least for my frustrations are that still money is honoured over people in Canada to date.

- No life insurance companies would qualify me for many years. Now the price still is outrageous 25 plus years later.
- I could not get mortgage insurance for many years and now it seems its available but at the same price as my mortgage.
- I began my career as a nurse to provide care and earn a descent living wage. The CBS blood concerns rerouted me to not apply for better paying roles and continue in my pursuit of a RN position. (One more year of schooling) I stayed an RPN because of these concerns which is 10-15\$ an hour less than I should have made as an RN, also opening me up to hospital ER and surgical jobs available.
- I lost Friends due to the stigma of my disease at the time of my marriage having 2 people drop out of my wedding Party for fear they had the possibility of contracting the disease. I haven't seen them since.
- I was instructed to not begin planning for children, my husband and I met with specialists and had to plan our pregnancy accordingly with my treatments.
- More than a quarter century now I've had to live with many fears and concerns over the transfusion I received causing so many turns in my life. I was 45 before I had an alcoholic drink because I was so afraid I would leave my family destitute and the disease would turn on me so that I had to be perfect. It's not a life when you fear so much from 1 day and someone else's HORRIBLE decision to buy blood from prisons and give it to me as a 17 year old girl fighting for My life as a cancer survivor, only to fall into this pit after I picked up my life to start again.

To see there is still 175 million dollars available is wonderful if you're trying to make money available, but it never really addresses the facts listed above. It's really such a disappointment that it seems now you are again worried about Money while the people have been set out and lives changed for more than 25 years are unaddressed. The same face as the persons before who cared more for the control of funds than the people they would affect. When this began My husband worked long hours to pay for the interferon and gave me needles himself, we walked through this together and I'm happy that I have a blessed life now with kids and my health. But we did this, we paid for this we worked long hours and we set up appointments with doctors and experts to overcome what the CBS did to me. Some small minded person who cared more for making his Boss happy than how it would affect hundreds and thousands of peoples lives. I am only one story and I see history repeating. An ounce of generosity would not be not \$1,000 dollars that's an insult to what we all had to endure in scorn and fears and doors closing for us because of CBS.

Can You understand my position.

Thank you for reading this.



Chya Mogerman

From: info@hepc8690.ca
To: [REDACTED]; HepC8690
Subject: RE: Allocation of surplus funds

From: [REDACTED]
Sent: Tuesday, April 11, 2023 8:10 AM
To: HepC8690 <info@hepc8690.ca>
Subject: Allocation of surplus funds

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Sent from [Mail](#) for Windows

Any surplus of the Funds should be allocated to the Victims of the Hep C Nightmare. We are all suffering to some degree with a multitude of health issues and our lives have been shortened on top of quality of life when your suffering everyday ! Respectfully!! [REDACTED]

From: [Chya Mogerman](#)
To: [Chya Mogerman](#)
Subject: FW: Allocation of 2019 Surplus
Date: May 15, 2023 5:34:54 PM

From: [REDACTED]
Sent: Sunday, April 30, 2023 1:26 PM
To: HepC8690 <info@hepc8690.ca>
Subject: Allocation of 2019 Surplus

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Good Day

On behalf of myself [REDACTED] I would like to recommend that the vast amount of surplus be allocated for the benefit of class members and family members with a small balance kept in the Trust Fund. Since most of the funds have been distributed over the years and the surplus has grown .The surplus should be distributed to the families that were affected by this injustice that happened. By leaving the funds in an account will not benefit anyone . We victims have suffered enough since this scandal about tainted blood was revealed. Think about the victims and consider what I and others have written.

Thank you

[REDACTED] , Claim number [REDACTED]

Sent from [Mail](#) for Windows

From: [REDACTED]
To: [HepC8690](#)
Subject: FW: Joint committee's Recommendation
Date: April 28, 2023 8:47:07 AM

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Sent from [Mail](#) for Windows

From: [REDACTED]
Sent: April 28, 2023 7:29 AM
To: info@hepc8690.ca
Cc: [REDACTED]
Subject: Joint committee's Recommendation

Good Day

On behalf of my siblings [REDACTED] [REDACTED] (sister) , [REDACTED] [REDACTED] (brother) and [REDACTED] [REDACTED] (myself) we would like to recommend that the vast amount of surplus be allocated for the benefit of class members and family members with a small balance kept in the Trust Fund. Since most of the funds have been distributed over the years and the surplus has grown .The surplus should be distributed to the families that were affected by this injustice that happened. By leaving the funds in an account will not benefit anyone . We victims have suffered enough since this scandal about tainted blood was revealed. Think about the victims and consider what I and others have written.

Thank you

[REDACTED]
Sent from [Mail](#) for Windows

From: [REDACTED]
To: [HepC8690](#)
Subject: Re: Surplus for benefit of class members
Date: May 5, 2023 3:18:19 PM

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Claim ID [REDACTED]

On Fri, May 5, 2023 at 5:16 PM [REDACTED] wrote:

I recommend that surplus be distributed to remaining living HCV infected members. It's the member who's medical condition was affected. The compensation which was allocated to us was peanuts for all the hardships we had to endure. My life would have been enriched had it not been affected with HCV. Thank you for letting me voice my opinion.

From: [REDACTED]
Sent: Monday, May 1, 2023 4:09 PM
To: HepC8690 <info@hepc8690.ca>
Subject: Re: Hepatitis C 1986-1990 Trust Fund
Importance: High

We would like the following statement to be included in the presentation to the Courts by the Joint Committee being held by judicial video conference on Tuesday, May 30, 2023.

"It is our opinion that the Joint Committee's recommendations, applications & amendments to the Courts in May 2022 regarding the Allocation of 2019 Surplus in the Hepatitis C 1986-1990 Trust Fund Retained amount, be accepted to allocate the surplus for the benefit of class members and family members."

Thank you,

[REDACTED]

From: [REDACTED]
Sent: Friday, April 14, 2023 3:26 PM
To: HepC8690 <info@hepc8690.ca>
Subject: Hepatitis C 1986-1990 Trust Fund
Importance: High

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REGARDING ALLOCATION OF 2019 SURPLUS IN THE HEPATITIS C 1986-1990 TRUST FUND

[REDACTED]

It is our opinion that the Joint Committee applications & amendments to the Courts in May 2022 regarding the Allocation of 2019 Surplus in the Hepatitis C 1986-1990 Trust fund be accepted to allocate the surplus for the benefit of class members and family members.
Regards,

[REDACTED]

Class Member Submissions 2019 Allocation Hearing

**Recommendation Two - Family Member
Loss of Guidance, Care and Companionship**

From: [REDACTED]
To: [HepC8690](#)
Subject: 2019 Financial Sufficiency Review
Date: April 28, 2023 8:21:05 AM

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CLAIMANT NUMBER:?

[REDACTED] (Grandson) [REDACTED]
[REDACTED]
[REDACTED]

I request that the Trust Fund allocate the Excess Capital identified by the 2019 Financial Sufficiency Review be distributed to approved class members and family members.

-----Original Message-----

RECEIVED

3059

From: [REDACTED]
Sent: Wednesday, May 10, 2023 6:22 AM
To: HepC8690 <info@hepc8690.ca>
Subject: Allocation of funds

MAY 10 2023

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Good morning,

It is and will always be my belief that families of loved ones should continue to be compensated for this terrible preventable tragedy. Those who have been affected and are still living should be compensated to help with they're daily lives, as many cannot work. The families of those who have sadly passed should also continue to be compensated. My husband's words to me prior to his death was to make sure I fought to receive what what we deserved. Notice I said we. It is we because this tragedy affected all family members. Of course there will never be a dollar amount to compensate for the loss of my husband, as I've said before, and I'm sure other families will tell you this as well. Do what is right and just. Thank you.

[REDACTED]
Sent from my iPhone

-----Original message-----

From: [REDACTED]

3060

Sent: Saturday, May 6, 2023 2:53 PM

To: HepC8690 <info@hepc8690.ca>

Subject: Re: Allocations of surplus funds [REDACTED]

MAY 09 2023

May 6, 2023

I am sorry I do not know my original claim number.

My updated email is:

[REDACTED]

Date of birth is:

[REDACTED]

I am also writing as the executor of my mother's estate . Her name was:

[REDACTED] Her birth date was [REDACTED] and her [REDACTED] She

was also the mother of [REDACTED] believe her claim number was [REDACTED] A registered letter was sent

April 5th, 2017 with a copy of her death certificate and a certified copy of her will and two (2) codicils as instructed. A

cheque dated June 5, 2017 was received and deposited June 19, 2017.

On behalf of my mother's estate I wish to express that her wishes would have been the excess of funds be dispersed to

family members who have lost their loved ones.

If you need any further information please do not hesitate to contact me.

Sincerely

[REDACTED]

Sent from my iPhone

> On May 4, 2023, at 8:35 AM, HepC8690 <info@hepc8690.ca> wrote:

>

> Good morning.

>

> Thank you for your input the on how you would like the excess capital to be used. We will be forwarding it to be used at the May 2023 meeting.

>

>

> Please make sure we have the claim number and the following information.

>

> Updated address

> Updated phone number

> Updated email

> If you cannot remember your claim number, please provide us with your date of birth, and if your surname has changed, please provide us with the one you used when you were accepted as a class member.

>

> Thank you,

>

>

> The Hep-C 1986-1990 & Late Claims Administrator PO Box 2370, Station D

> Ottawa, Ontario, K1P 5W5

> 1-877-434-0944

> Option 1: 1986-1990 Settlement Plan

> Option 2: Late Claim Benefit Plan

> info@hepc8690.ca

> Fax : (613) 569-1763

>

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>

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>

>

>

>

>

>

> -----Original Message-----

> From: [REDACTED]

> Sent: Monday, May 1, 2023 9:17 AM

> To: HepC8690 <info@hepc8690.ca>

> Subject: Allocations of surplus funds

>

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>

>

> I wish to express the views of myself and family that the surplus funds should be paid out to the family members who have suffered the loss of a loved one to Hep C.

>

> It has been 37 years since my brother [REDACTED] received a blood transfusion in January 1986 that contained Hep C.

>

> I firmly believe these funds should and must be paid out to all the members of every family who lost their loved one.

>

> Sincerely,

[REDACTED]



> Sent from my iPhone

From: [REDACTED]
Sent: Friday, May 5, 2023 1:10 PM
To: HepC8690 <info@hepc8690.ca>
Subject: Writing in behalf of my dad and grandparents [REDACTED]

RECEIVED

3063

MAY 10 2023

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Good day,

I'm writing on behalf of my dad [REDACTED] his claim number id is [REDACTED] I believe the money shall go to my dad and his in laws and his children's and his sister inlaw and brother in law. His grandchildren as well.

My grandmother [REDACTED] claim I'd is [REDACTED] is no longer with us she has passed away 🙏 is now reunited with her daughter.

My grandfather [REDACTED] I'd number is [REDACTED] believe he should get the funds that would be given to my grandmother my grandfather suffered alot losing my mom his daughter. The rest should be given to there children his father in law his grandchildren and great grandchildren.

Thank you

[REDACTED]

Sent from my Bell Samsung device over Canada's largest network.

From: [REDACTED]
Sent: Tuesday, May 9, 2023 4:14 PM
To: HepC8690 <info@hepc8690.ca>
Subject: Questions regarding the administration of the Settlement Agreement [REDACTED]

RECEIVED

3064

MAY 10 2023

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Hello,

My mother passed on November 10, 1998 at the age of 78 as a result of HepC. During the first distribution for compensation, our family of 8 questioned why the brothers and sisters were getting so much compensation while the grand-children were receiving so little. My mother was 78 when she passed. She left behind 8 adult children and 11 grand-children and one great-grandchild.

By then, her brothers and sisters were in their late 60's and were estranged. Her grand-children aged 3 to 13 were constantly with her and spent the Summers with her at her camp site. They were all very close to her. I find it atrocious that most of the funds went to family that were estranged.. I mentioned this previously during a meeting in Montreal held for HepC families and survivors years ago. and got the support of many participants at that time.

I can understand the loss when a person passes at a young age and leaves behind young brothers and sisters who will miss their companionship for the rest of their lives but allowing a pittance to the grand-children and nothing to the great-grand-children is to me, a travesty of justice – especially since those children were close to their grandmother.

All this to say, I don't agree with recommendation 2 and would establish a different criteria for compensation for loss of companionship and guidance based on the age of the patient specially when grand-children and great-children are involved.

Respectfully,
[REDACTED]

Sent from Mail for Windows

From: [REDACTED]
Sent: Thursday, May 11, 2023 10:19 AM
To: HepC8690 <info@hepc8690.ca>
Subject: Allocation 2019 hépatite C [REDACTED]

MAY 10 2023

3065

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A qui de droit,

En réponse à votre avis de l'allocation du capital excédentaire 2019 au bénéfice des membres des recours, je m'objecte à la recommandation 2 pour les raisons suivantes.

Ma grand-mère est décédée à l'âge de 78 ans lorsque j'en avais 28. J'ai passé ma jeunesse avec ma grand-mère et nous avons toujours été très proches. Elle a eu la chance de rencontrer son arrière-petit-fils, un ans avant son décès très prématuré.

Je trouve la recommandation 2 injustifiable. Bien que grand-maman est eut 12 petits enfants qui ont passé leurs étés avec elle "au camping" et qui se sont préoccupé d'elle durant ses années de maladie, vous nous offrez une pittance. Au contraire, ses frères et ses soeurs, qui étaient éloignés et se voyaient extrêmement rarement (ou pas du tout) reçoivent une allocation respectable, c'est un insulte pour ses petits enfants qui été très proches d'elle.

Ses frères et ses soeurs avaient plus de 70 ans lors du premier déboursement. Ses petits-enfants avaient entre 28 et 3 ans et son arrière-petit-fils avait un ans à l'époque.

Je recommande fortement de revisiter cette partie des paiements pour prendre en considération l'âge des récipiendaires et la relation qui existait en ce temps et lieu.

Ma mère a mentionné cette injustice lors de la rencontre qui a eu lieu à Montréal des années passées. Plusieurs membres présents ont supporté son point de vue.

Je vous invite à communiquer avec moi si vous avez des questions à mon adresse courriel ou au par téléphone au [REDACTED]

Merci

Note: Changement d'adresse stp à
[REDACTED]

RECEIVED

APR 28 2023

The 1986-1990 Hepatitis C Claims Centre

P.O. Box 2370, Station D

Ottawa, Ontario K1P 5W5

Attn: Hep C Claims

CLAIMANT NUMBER: [REDACTED]

[REDACTED]

[REDACTED]

(WIDOW)

I request that the Trust Fund allocate the Excess Capital identified by the 2019 Financial Sufficiency Review be distributed to approved class members and family members.

[REDACTED]

Dear Sir,

RECEIVED

MAY 10 2023

May 4/2023

3067

I am writing, with response to the letter I received, on the recent financial sufficiency review.

I think it is only fitting to disperse some of the money to family members; seeing there is a surplus, sitting there.

It will not bring the loved one back, but is only fair to the family members, to receive some compensation, for a life that was taken far too soon, if it wasn't for contacting Hep C.

Sincerely

à qui de droit ;

P.1. de 5

Lorsque mes frères ont commencé à recevoir le traitement qui était censé leur donner une meilleure qualité de vie, ils étaient heureux. Mais ce même traitement les a tués, alors lorsqu'ils ont reçu la terrible nouvelle, ils étaient dévastés. Tout ça s'est déroulé très vite mais la souffrance qu'ils ont dû endurer était terrible. C'était une période de notre vie à tous, parents, frères, sœurs, amis, conjointes, enfants qui fut un enfer. Enfer parce qu'on avait les mains liées. Que pouvait-on faire. Moi personnellement, de voir la peine de ma mère et mon père, me dérangeait beaucoup. Quand on a dû aller chercher notre père dans sa chambre d'hôpital pour l'apporter voir son fils mourir dans une autre chambre et ensuite le retourner dans sa chambre. Je ne voudrais jamais vivre ça à nouveau. Parce que c'était pas une affaire de quelques semaines, non c'était et c'est toujours une affaire de toute une vie.

- [redacted] préférait le printemps et il est mort le [redacted] le jour d'anniversaire des 4 ans de mon fils [redacted] a été enterré le [redacted] le jour de sa fête.

- [redacted] préférait l'automne et il est mort le [redacted]

- [redacted] préférait l'hiver et il est mort le [redacted]. Il avait prié pour voir une dernière fois la neige qu'il aimait tant. et le 8 il ya eu une très grosse tempête de neige.

- [redacted] préférait l'été et il est mort le [redacted].
Nous avons perdu nos frères, 3 d'entre eux en 6 mois, soit en 1990.

[redacted] est mort en 1994.
Je pense que mon père voulait être là jusqu'au dernier. Il est mort en 1995.

Inutile de mentionner le chagrin que ma mère vivait. Elle était tellement dévastée et épuisée que ce fut un soulagement quand elle nous a quitté à son tour en 2014. Elle avait fini de souffrir.

Moi personnellement, je devais me diviser entre mes enfants âgés à l'époque de quelques mois et un autre âgé de 3 ans.

Je ne pouvais pas passer assez de temps avec mes frères, comme je l'aurais voulu.

En plus les premières années de mon rôle de mère fut grandement entravé par tout ce qui se passait. Je pleurais constamment et j'essayais de ne pas le laisser paraître devant les enfants.

Ce n'était pas facile de vivre tout ça. Je devais essayer de trouver une gardienne pour aller voir mes frères mourir et non pour aller au resto ou m'amuser.

alors vous voyez, je n'ai rien oublié de tout ça. Ça va être avec moi jusqu'à mes derniers jours. Mes frères me manquent tellement encore aujourd'hui. Ça m'arrive encore de pleurer. Ils étaient si gentils. Ils n'auraient jamais dû à avoir à vivre ça.

(P.S) En plus nous avons perdu un neveu et ma mère était vivante pour voir son petit-fils " [REDACTED] " mourir de la même façon cruelle que ses fils. [REDACTED] est mort en 1977

Bien à vous

[REDACTED]

Bon parlons maintenant de la façon dont tout se déroule avec le soi-disant montant d'argent que nous devions recevoir, si toutefois il en reste après que tout le monde ait prit ~~sa~~^{une} part. La vraie raison de tout ceci c'est pour qu'un certain groupe se paie et s'il reste quelque chose, nous devions recevoir un petit montant. N'oubliez pas que cet argent est du "blood money" qui nous revient à nous les héritiers légitimes de nos frères. Ils nous ont donné cet argent légalement. Ils ont souffert et ils sont morts avant même d'avoir pu y goûter eux même.

N'oubliez pas légalement, nous avons droit à cet argent au complet.

N'oubliez pas le "KARMA"

Laissez-moi ma franchise; mais je suis frustrée.
Merci tout de même...



From: [REDACTED]
Sent: Monday, May 1, 2023 6:59 AM
To: HepC8690 <info@hepc8690.ca>
Subject: Indemnisation - SIDA - Hépatite C

3074

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MAY 01 2023 [REDACTED]

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Bonjour,

D'abord, je vous remercie pour cette opportunité de partager le calvaire subi depuis la perte de mes quatre frères : [REDACTED] – avril 1990 – [REDACTED] – septembre 1990 – [REDACTED] – novembre 1990 et [REDACTED] – juillet 1994.

J'avoue ne pas être en mesure de justifier cette infime somme de 3 700 \$ pour la perte de mes grands frères à un si jeune âge. Pas un! Pas deux! Pas trois! QUATRE! J'ai dû apprendre à vivre sans eux depuis l'âge de 23 ans à une période où je tenais à retourner aux études, ce pour quoi il a fallu attendre plusieurs années parce que je devais prendre soin d'eux avec mes sœurs évidemment. Chaque anniversaire me rappelle qu'ils pourraient être avec nous si cela n'avait pas été du scandale de la Croix rouge, de la négligence médicale. Voir mes frères souffrir le martyre, voir leur épouse et leurs enfants endurer cette torture, voir mes parents agoniser pendant plusieurs années était tellement douloureux et surmenant.

Enfin, je m'en voudrais de ne pas vous rappeler que cette tragédie a créé un désarroi insurpassable au sein de notre famille. Un prisonnier faussement accusé s'en sort avec des millions après 15 – 20 – 25 ans d'emprisonnement. Mes frères ont eu la peine de mort. Ma vie et celle de ma famille ont été affectées depuis 1984 où on a appris leur sort. J'en rage chaque fois que j'en parle. Jamais ma vie n'a été la même. Leurs souffrances physique et psychologique sont restées dans ma mémoire et, surtout, le supplice de mes parents. [REDACTED] a quitté ses enfants de 4 ans et de 5 ans ainsi que la femme de sa vie; [REDACTED] n'a pas vu son fils finir l'école, se marier; il ne nous fera plus rire avec ses blagues très drôles. [REDACTED] ne chantera plus à l'église, ne jouera plus à son piano; n'aura jamais la chance de se marier tout comme [REDACTED] il ne travaillera plus à ses véhicules pendant que maman préparait son souper. C'est très pénible de perdre un être cher, mais en perdre quatre de façon atroce est tellement injuste. Votre indemnisation n'a jamais égalé une vraie consolation pour ma famille.

Sincèrement,

[REDACTED]

From: [REDACTED]
Sent: Monday, May 8, 2023 12:04 PM
To: HepC8690 <info@hepc8690.ca>
Subject: REGLEMENT RELATIF A L'HEPATITE C

MAY 09 2023

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CLAIMS ID: [REDACTED]
CLAIMS ID: [REDACTED]
CLAIMS ID: [REDACTED]
CLAIMS ID: [REDACTED]

Bonjour, mon nom est [REDACTED] je viens tout juste de recevoir 4 lettres par la poste, une pour chaque frère, c'est comme tourner le fer dans la plaie. Quatre frères décédés et un neveu. Je suis la soeur de [REDACTED] décédé le 24 avril 1990, [REDACTED] décédé le 30 septembre, 1990, [REDACTED] décédé le 9 novembre 1990, et de [REDACTED] décédé le 8 juillet 1994, et la matante de [REDACTED]. Eh oui tellement jeunes, ils ont tous été tués, c'est vraiment le bon mot à utiliser, si on connaît, les circonstances. Certaines personnes disent que c'est seulement des frères, que ce ne sont pas vos enfants, mais ils sont les enfants de ma pauvre mère qui a tellement pleurer jusqu'à en faire un stroke. Elle disait souvent se sont tous mes bébés que j'ai portées, qui partent un après les autres, en l'espace de moins d'un an. Ces personnes ne peuvent pas s'imaginer ce que nous avons vécu " un enfer". Mentalement, financièrement, pour moi personnellement, je demeure à Ottawa, je devais aller souvent au Nouveau Brunswick avec ma petite fille, étant mère Celibataire a ce moment. Au début avant de déménager à Ottawa j'étais en Science Infirmière, que j'ai dû laisser avec toute l'attention négative qui nous entourait. Horrible de voir mes frères détériorer, devenir des squelettes, tenir un bol pour que mon frère [REDACTED] pour qu'il ne vomisse que du sang, ce ne sont que quelques images qui reste marqué pour toujours. Ce sont les meilleures personnes que j'ai été béni d'avoir dans ma vie. Leur passage a été coupé très court à cause d'un crime qui aurait pu et aurait dû être évité, absolument éviter. ce ne sont pas seulement mes frères comme dirait certaine personne. J'ai grandi avec eux et nous étions très proches.. Ils étaient, mes meilleurs amies et mon inspiration. ils auraient fait bouger des montagnes pour rendre service. Ils étaient toujours présents et prêts à m'aider en tout temps. si vous saviez à quel point je manque leurs honnêteté, leurs humanité, leur franchise et leur présence. je me console en me disant qu'ils ne souffrent plus de douleur physique mais aussi de douleur mentale, la honte, le rejet qu'ils ont dû vivre a cause de ce crime.

Nos voisins ont arrêté de nous parler, de nous visiter, les gens chuchotaient à chaque fois qu'on sortait ,etc etc. Même certains employés de l'hôpital laissaient leur cabaret de nourriture à la porte de leur chambre. Mes frères étaient tellement blessés et tristes par ce geste.. je pourrais continuer à écrire pour des jours , et essayer de decrir en detail l'impacte que ça eu sur notre famille et plusieurs autres familles, la fatigue, l'épuisement, le stress et de voir ma pauvre mère pleurer jour et nuit et mon père que devait supporter son propre fardeau de combattre son cancer. Essayez seulement de vous imaginer 3 personnes manquantes à notre table à Noël en moins d'un an. Le plus difficile c'était de les voir souffrir et de ne pas être capable de les aider . A ce jour je n'oublierai jamais quand mon frère [REDACTED] m'a dit que tous les Hémophiles étaient atteints d'un virus mortel , a cause du sang contaminé et de la négligence criminelle de certaines personnes ,qui savaient que le sang était contaminé. Nous sommes malheureusement tous impliqués dans cette tragédie qui aurait pu être évitée. Malheureusement mon frère avait raison.. . Désolé que ma lettre soit si longue et en détail, mais, on aimerait moi et ma famille en finir une fois pour toute, Qu'on nous donne ce qui nous revient .

Et bien pour Revenir à l'argent dont le gouvernement retient et que nous revient., définitivement ca nous ramera pas nos frères et effacer notre peine et le vide que nous avons pour toujours .Si je comprend bien le gouvernement vient tout juste de remettre à chaque employé du gouvernement Fédérale \$2,500\$ à chaque employé pour retourner au travail , **VRAIMENT**, et tout l'argent qu' il a donné pendant la COVID, oui définitivement plusieurs personnes l'avaient besoin, mais tellement on ont pris avantage.Cette argent qu'ils nous doit ou je devrais dire qu'il doit à mes frères et mon neveu, ca nous revient, C'est définitivement ce que mes frères veulent.

Tistement
[REDACTED]

From: [REDACTED]
Sent: Wednesday, May 10, 2023 1:09 PM
To: HepC8690 <info@hepc8690.ca>
Subject: Recommendations [REDACTED]

RECEIVED

3077

MAY 10 2023

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I support recommendation number 2.

My father passed away in 2004 as a result of receiving tainted blood. He was our only parent and I will never forgive that our loss could have been prevented. He should have been here to enjoy his family and watch his grandchildren grow up. I think he would have been proud.

[REDACTED]
Daughter of [REDACTED]

Sent from my I phone

MAY 10 2023

2023

Again the Claimants/Families have been asked for our (the family of [REDACTED]) opinion on what should be done with the surplus of funds regarding the HEPC Class Action Lawsuit.

It has been almost 20 years since the passing of our older brother [REDACTED]. For me it feels just like yesterday. I relive the last few hours of his life (Dec. 26th) over and over just to see if there was more I or my husband could have done for his pain and suffering, but with the same outcome. To this day my husband and I really do not celebrate Christmas, unfortunately the Christmas season is a constant reminder.

I will say again as in my last letter (below):

The surplus monies should be given to those that it was intended for at the beginning (claimants/family members), not returned back! No amount of money can replace the loss and suffering of losing a loved one – but this fund was set up to help those affected with HEPC!

2015

The Claimants/Families have been asked for our (the family of [REDACTED]) opinion on what should be done with the surplus of funds regarding the HEPC Class Action Lawsuit.

My brother, [REDACTED] was a very special person right from birth being the oldest sibling. He did, however, unfortunately have the misfortune of being diagnosed with Cancer (Hodgkin's Disease), and had to endure the many hospital stays for both Chemotherapy and radiation and of course their side effects. Then he was given the good news that he was a candidate for one of the newer treatments of cancer, a bone marrow replacement, done in Ontario (Toronto).

*Since I live in Ontario, I was able to visit him quite frequently while this treatment was on going. He would always try and be positive when I visited but I could always see through him and knew this is not how he thought his life would turn out, but he was excited about the possibility of **remission**. When this treatment was over, he **BEAT THE ODDS**, and was in **REMISSION!** Only to find out the blood transfusions received in Ontario were that of the **TAINTED BLOOD!***

My personal last memories of [REDACTED] was when he came for a visit in October of 2003. My belief is that he was making his 'rounds' so to speak, and to visit and spend time with his siblings, as I suspect he was

told by his doctor that his time was running out. His visit this time around was different, he was very skinny with a protruding stomach, tired and lethargic, but he being [REDACTED] said no he was fine!

He was to return home to New Brunswick in November, but just days before the flight he was in my bathroom and yelled for me to help him. He was vomiting blood. I immediately called 911 and he was taken to the Bowmanville Hospital for a few days given various meds and also to drain the excess fluid in the empty cavities of his body. When he was finally able to be discharged we had asked about the flight to New Brunswick and were told absolutely not for him to fly. Once back at my place I realized he was having some difficulty with walking and making it up the stairs. I rented him a walker and also a port-a-potty to have in his room on the second floor as he was having difficulty with making it on his own to the washroom (more symptoms of liver failure). He never really came out of that bedroom on his own again until that fateful day Dec. 26th 2003. I didn't hear him call out my name that morning, as he normally would, as he loved his popsicles. I went to check in on him and realized he was in distress. I felt his body and it was cold to the touch. I immediately called 911 and this time he was taken to Oshawa General where he succumbed to this horrendous disease only minutes after being taken to emergency!

So now the business of having his remains flown back to New Brunswick for the funeral. We had to rely on the Government death benefit to bury him. We were very lucky that my parents had the fortitude to purchase a burial plot next to theirs years ago as the Government assistance was not enough.

In summary, I know I have been in a little more in detail of [REDACTED] last days with us, but think people need to know the pain and suffering of those affected by the TAINTED BLOOD and the HEPC disease!

The surplus monies should be given to those that it was intended for at the beginning (claimants/family members), not returned back! No amount of money can replace the loss and suffering of losing a loved one – but this fund was set up to help those affected with HEPC!

MAY 10 2023

3080

To whom it may concern,

My recommendations on the retained amount:

I feel the funds were for the claimants and their families. Some of those families have lost the person who was infected due to this dreadful disease – my family being one of them. Please make sure that the claimants and remaining families of those claimants are given the funds that they were awarded.

My brother, [REDACTED] loved his family, took care of his mother when she was dying, took care of his kitty children, took care of everyone in general. He really didn't have anything bad to say about anyone. We lost him far too early. He battled Cancer by having a radical new bone marrow replacement in Ontario which ultimately is how he contracted HepC...what are the odds successfully in remission for Cancer oh wait you now have HepC!

Those are my thoughts about the surplus in the plan...give it to the people!

Sincerely,

[REDACTED]

MAY 10 2023

TO: Whom it's may concerns;

This is for a reclamation or claim about family that have lost loved one in 1986 - to 1990 & also 1995 through blood transfusion: which they received Hepatitis C and the AIDS virus. I pray that it not done selfishly so that lawyer and others put more money in their pockets just like the last times which a larger amount was taking out of what we received. Reconsider that it's us that have lost love ones: I believe it's murder what happen to my brothers and so many others:

It's was devastating for me and all my family specially I had to come down from Ontario each time; this was not easy and very costly.

— I have lost first my brother

on April 24/1990: than

on September 30/1990

on November 9/1990 and my brother

on July 8/1995. This is from my two brothers: which were not named:

— we have lost two sisters now since than they have decease:

in May 2018

and

on March 31/2021.

— I am a strong believer in Jesus so let this be done fairly and consider our lost. For my God is sitting on his throne in heaven and he will judge the ones that are dishonest in this situation

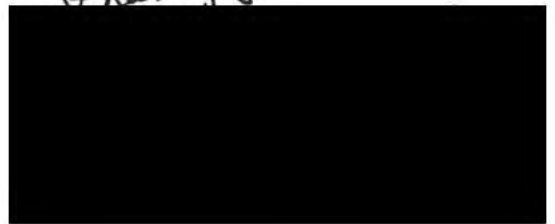
Your's truly

P.S. I am no longer living in Ontario my
new is as followed below:



This letter must be kept Private do not
share on any internet sites: no mesanger
no Utube
no Face book
no twiter
or any other
commueation.

Thank; youn truly



P.S: my (our) mother also is decease on June 9/2014

From: [REDACTED]
Sent: Saturday, May 6, 2023 8:16 PM
To: HepC8690 <info@hepc8690.ca>
Subject: Hépatite C8690 [REDACTED]

3083

MAY 09 2023

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Mai 06 2023

A qui de droit,
Je suis [REDACTED]
[REDACTED]

Soeur de quatre frères hémophiles décédés entre 1990 et 1994
[REDACTED]

Claim ID: [REDACTED]

Voici mon opinion regardant ce qui a trait aux décisions prises pour le retour collectif de l'hépatite C 1986-1990 .
A t'elle (mon opinion) de l'importance ou de la valeur.
Pourquoi remuer le passé que jamais on ne pourra oublier, à remuer le fer dans la plaie qui ne guérira jamais. Donnez nous ce qui nous revient de droit une fois pour toute et que l'on en finisse avec tout ce tralala. Ma famille et moi même, nous ne sommes pas les seuls familles éprises par cette tragédie qui aurait pu être évité et nous en sommes conscient de ce fait. N'attendez pas que l'on soit tous mort avant d'en finir avec ce règlement.

ASSEZ c'est ASSEZ

Bien à vous



From:
Sent:
To:
Subject:

[REDACTED]
Sunday, April 30, 2023 5:35 PM
HepC8690
Ephatite C

3085 MAY 0 1 2023

RECEIVED

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A qui de droit:

Cette lettre est pour but de vous faire part de mes 4 frères décédés par le sida(Ephatite C). En [REDACTED] j'ai perdu un frère le [REDACTED], le [REDACTED] mon frère [REDACTED] nous quitte ainsi que mon frère [REDACTED] le [REDACTED] Ensuite, en [REDACTED] mon frère [REDACTED] est décédé. Ça été des épreuves très, très, difficiles et qui nous touches encore aujourd'hui.Des épreuves qui a aussi placé de lourdes conséquences sur mon mariage durant ces années.Je croit fortement que ma famille et moi-même, sommes des candidats pour le montant que nous méritons après tout les peines d'avoir non seulement perdu nos frères mais de les avoir vue tant souffrir. Cette lettre est ma recommandation pour le montant \$\$ que j'ai le droit de recevoir. En cas où vous avez besoins plus d'informations, vous pouvez me rejoindre par e-mail ou par téléphone [REDACTED] ou par adresse postale:

[REDACTED]

Sincèrement,

From: [REDACTED]
Sent: Tuesday, May 9, 2023 5:02 PM
To: HepC8690 <info@hepc8690.ca>
Subject: [REDACTED]

3086

RECEIVED

MAY 10 2023 [REDACTED]

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To whom it may concern:

I am expressing my view regarding the allocation of surplus in trust for Hepatitis victims and there family members.

My Name is [REDACTED] formerly [REDACTED]

My mother [REDACTED] lost her life at the age of 59 due to infected blood given to her while she was in hospital care. Due to the negligence I have had to live 20 painful years without a Mother . My children [REDACTED] and [REDACTED] (d [REDACTED]) had to grow up with no memory or experiences of their Grandmother.

My mother was taken from us much to early due to incompetence! Frankly there is NO amount that can justify my mothers life. The amount of compensations that has been offered to the victims is actually shameful! Nevertheless my request is to offer the families a full reimbursement of the maximum amount in trust now. Have we not suffered long enough by the loss of our mother or other family members?

Sincerely,

[REDACTED]

Sent from [Mail](#) for Windows

From: [REDACTED]
Sent: Monday, May 8, 2023 12:34 PM
To: HepC8690 <info@hepc8690.ca>
Subject: Lettre d'opinion.

3087

MAY 09 2023

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À qui de droit,

Mon opinion concernant les montants excédentaires est qu'aucune sommes d'argent pourra remplacer le soutien émotionnel, d'estime de sois, de valorisation ou affectif dont ma famille et moi ont été priver par la perte de mon père [REDACTED] décédé en 1990 ainsi que 3 oncles dans les années qui ont suivi ([REDACTED] suite à une transfusion de sang contaminée.

Pour un enfant de 4 et 5 ans ce fut un choc psychologique (avec conséquence) avec lequel nous devons vivre et qui nous affecte encore aujourd'hui mon frère et moi.

C'est pour toutes ces conséquences que je crois fortement que nous **méritons** c'est montants.

Sincèrement,
[REDACTED]

Envoyé de mon iPhone

From: [REDACTED]
Sent: Tuesday, May 9, 2023 8:37 AM
To: HepC8690 <info@hepc8690.ca>
Subject: Allocation of 2019 surplus

RECEIVED
MAY 10 2023

3088

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Claim Id: [REDACTED]

I support and vote for recommendation 2. Please accept my input to the courts.

Regards,

[REDACTED]

From: [REDACTED]
Sent: Friday, May 5, 2023 10:51 AM
To: HepC8690 <info@hepc8690.ca>
Subject: Référence Claim ID: [REDACTED]

RECEIVED

3089

MAY 08 2023

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OBJET: Opinion sur les recommandations formulées

Tel que souhaité, moi [REDACTED] (claim ID [REDACTED]), je vous transmets mon choix en rapport aux recommandations suggérées.

Je favorise la **RECOMMANDATION 2**, en tant que frère de la personne décédée ([REDACTED]) ayant pour cause le VHC.

Merci du suivi,

[REDACTED]

From: [REDACTED]
Sent: Monday, May 8, 2023 9:58 PM
To: HepC8690 <info@hepc8690.ca>
Subject: Claim ID: [REDACTED]-Allocation of 2019 Surplus - [REDACTED]

RECEIVED 3090

MAY 10 2023

[REDACTED]

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To whom it may concern,

My Father, [REDACTED] died after receiving tainted blood during a heart operation at [REDACTED] Hospital in 1989. He died in February of 1997 after fighting his Hep C diagnosis for many years.

Although I find your recent letter with 4 recommendations of the allocation of the remaining funds confusing, I will try to respond.

If there is money to be dispersed, I would suggest "Recommendation 2".

Your initial payment to my family was distributed between his 4 children, his grandchildren and his siblings. I found this allocation to be spread thin and perhaps to the wrong people. A more direct payment to just the children would be more beneficial than including siblings and grandchildren. This no longer affects the [REDACTED] claim as all his siblings are deceased. ([REDACTED] and [REDACTED] My sister, [REDACTED] died during Covid along with 2 of my nephews, [REDACTED] and [REDACTED] So that is 5 of his family members that have died since the initial pay out.

It has been 26 years since my father passed away and with no disrespect, how long do you think we are all living for.....disperse the money and close this chapter of this horrific Canadian public health scandal.

I will attend the May 30th online hearing to see if there is more information.

Sincerely,

[REDACTED]

--

[REDACTED]



From: [REDACTED]
Sent: Tuesday, May 9, 2023 1:43 PM
To: HepC8690 <info@hepc8690.ca>
Subject: Joint Committee and Courts , Claim ID: [REDACTED]

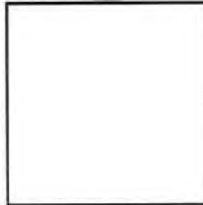
RECEIVED
MAY 10 2023

3092

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I have had this letter for a few days and it's hard to know what to say. Here goes.
My brother [REDACTED] well never be forgotten by me, all I have are the memories, they well stay with me forever.
My special memories are going on hunting trips and going fishing. [REDACTED] was very funny and the best one to be on hunting with, he made a good many jokes. He loved making us all laugh.
I sure miss the life hepatitis C took from me and from all of [REDACTED] family and friends.
Hepatitis C as become a common name around my family. I have two more brothers with hepatitis C, they have been very sick as well.
I believe the excess money should be shared between the familys that has lost their love ones because of hepatitis C.
Sincerely [REDACTED]
Claim ID [REDACTED]

On May 9, 2023 1:13 p.m., [REDACTED]



May 4, 2023

To Whom It May Concern,

RECEIVED

MAY 10 2023

I favour Recommendation 2.

Thank you for informing me about the surplus and the possible forms of allocation.

Please let me know by mail what the final decision will be.

Yours truly,

[REDACTED]

Claim ID: [REDACTED]

and

Claim ID: [REDACTED]

P.S. → landline → [REDACTED]

cell → [REDACTED]

From: [REDACTED]
Sent: Sunday, April 30, 2023 5:10 PM
To: HepC8690 <info@hepc8690.ca>
Subject: Re: NOTICE/ AVIS - ALLOCATION OF 2019 SURPLUS / ALLOCATION DU CAPITAL EXCÉDENTAIRE 2019

RECEIVED

MAY 04 2023

3094

CAUTION: This email originated from outside of Epiq. Do not click links or open attachments unless you recognize the sender and know the content is safe. Report phishing by using the "Phish Alert Report" button above.

Bonjour, je m'appelle [REDACTED] résident au [REDACTED]. Nom numéro de dossier chez vous est le [REDACTED]. Je suis d'avis que vous devriez diviser équitablement le montant restant entre tous les familles des victimes. J'ai reçu 600\$ pour le décès de mon grand père et je crois que c'est un montant ridicule pour dédommager un décès.

[REDACTED]

On Apr 10, 2023, at 4:33 PM, HepC8690 <info@hepc8690.ca> wrote:

Please find attached an important notice regarding the 1986-1990 Hepatitis C Settlement.

Every three years the financial sufficiency of the Hepatitis C 1986-1990 Trust Fund is reviewed to ensure that it is adequate to meet the expected needs of class members and family members.

On the most recent financial sufficiency review, the actuaries retained by the Joint Committee and by the federal government expressed the opinion that the Trust Fund is financially sufficient and that there is a **surplus**. They estimated the surplus was between \$195,037,000 and \$201,019,000 as at December 31, 2019. After that date, the financial markets declined substantially, which decreased the value of the Trust Fund. The surplus is now estimated to be about \$174 million as at June 30, 2022.

The settlement approval orders allow the Joint Committee and the governments to apply to the Courts where there is a surplus. The Courts have discretion to decide what to do with the surplus, including whether all or a portion of the surplus should be allocated or kept in the Trust Fund.

A summary of the Joint Committee's revised recommendations is attached along with details about how you can access the full application records for more information.

The applications can be reviewed [here](#).

Sincerely,
The Administrator of the 1986-1990 Hepatitis C Settlement

Veillez trouver ci-joint un avis important concernant la Convention de règlement des recours collectifs relative à l'hépatite C – 1986-1990.

Tous les trois ans, une réévaluation des aspects financiers du Fonds du Règlement relatif à l'Hépatite C 1986-1990 est effectuée afin de s'assurer que les obligations financières envers les membres infectés et les membres de leur famille puissent être honorées.

Au terme de la plus récente réévaluation financière, les actuaires retenus par le Comité conjoint et par le gouvernement fédéral ont exprimé l'opinion que le Fonds était financièrement suffisant et qu'il existait un capital excédentaire (ou surplus). Les actuaires ont estimé qu'en date du 31 décembre 2019, ce surplus s'élevait à un montant entre 195 037 000 \$ et 201 019 000 \$ (le « surplus 2019 »). Toutefois après cette date, les marchés financiers ont reculé substantiellement, entraînant une diminution de valeur du Fonds de sorte que le surplus au 30 juin 2022 est d'environ 174 millions de dollars.

Un résumé des recommandations modifiées du Comité conjoint ainsi que les détails concernant la façon de consulter les procédures et les pièces déposées, dans leur version intégrale, sont joints au présent avis.

Les demandes peuvent être examinées [ici](#)

Veillez agréer l'expression de nos sentiments les plus sincères.
L'administrateur de la Convention de règlement des recours collectifs relatifs à l'hépatite C 1986-1990

<Notice - 2019 Allocation (EN).pdf><Avis - 2019 Allocation (FR).pdf>

MAY 01 2023

3096

Claim#

Bonjour

Je vous écris pour les moments des membres de la famille.

Conjoint c'est correct et c'est pas drôle pour eux on avait une belle vie et mon mari aimait des activités de couple et c'est plus ça c'est une vie plate même si on fait des jeux, on faisait du ski, golf, c'est rien qui on jouait au pickleball ma famille est 80 ans tante et plus font encore plusieurs de choses même sont encore dans leurs maisons même ils ^{elles} me disent c'est plate c'est toi la plus forte, toujours active aujourd'hui ils t'ont brisé ta vie, je leur dis je les hais en maudit je n'ai même à l'enterrement je n'en perdrais la punching-bag si ils étaient devant moi, moi au jour de l'an j'étais encore malade en pyjama avec mon mari et eux devaient être à la prison et c'est eux qui fête quelle injustice ^{et} je demande souvent à mon père de venir me chercher, lui à 93 ans jouait encore, vidéo, accordeon, piano conduisait on est une famille fort et a travaillé jusqu'à 75 ans je vois.

Enfant moins de 21 ans . 04

Pour frère et sœur aussi

Parents : faudrait regarder l'âge c'est pas eux qui prennent soin de nous ce sont conjoints (et) ^{enfants} amis, petits-enfants, pas tous frères et sœurs et c'est nous qui est malade et même si on a des parents ça coûte très cher parce que quand c'est l'un des parents -- nous et bricoler et sont conjoints et enfants qui devraient voir plus et regarder l'âge

(sur fr.) moi j'étais capable de la gagner mon argent j'ai encore des demandes pour guérir la pau et l'électrologie tellement j'ai des résultats ils me disent grands parents ça dépend encore de l'âge | leur ça fait ma tante est me et tu as fait du bon travail qui m'a fait plaisir

Adieu, moi mais ça me libère

Grands-parents = l'âge à considérer je ne crois pas que tous les
grands-parents prennent soin de tous le monde à cause de
leur âge.

Petits-enfants :

Encore l'âge quand ils sont adolescents ils prennent plus
soin de nous neurent gâcher, jouer à des jeux, et j'espère qu'ils ne
vivront pas la même vie que moi avec le même problème de sang je
surveille de près je sais qu'il ya encore des dangers encore parce
qu'il ya plusieurs donneurs quand on reçoit nos coagulants,
Nos petits à une certaine âge sont plus avec nous que nos frères
et sœurs, ils s'occupent de leurs familles. de 3,718 pour frères et sœurs

J'étais une
aidante et
jamais j'aurais
fait comme eux
Bonne du sang pour
Je chante
L'année
sont
adait des
jeunes

il ya toute une différence de 372. pour petits-enfants surtout
comme cette semaine ^{pas été} ça n'a pas bien du tout mon petit de 16 ans me dit
je vais aller te voir grand-mère au moins ça fait chaud au cœur
même si notre santé ne s'améliore pas.

Mais encore j'avais une maudite belle vie avant et là c'est une
vie de merde. même les efforts même si je vous écris cela j'ai encore
mon moral mais suis réaliste.

Je ne sais pas pourquoi ils font le soir pour s'endormir comme ça
avec ce dossier de avoir leur et rendre une vie difficile à ces gens
j'ai des
très bonnes
amies (a)
C'est rassurant

PS. Le côté positif je n'aurais jamais passé un temps de bons moments
avec eux et le côté négatif il ya 3 petits-enfants sur 4 qui ils l'ont
et c'est pas trop connue.

Si seulement
même.
merci

Je vous vous dire une belle phrase vivez aujourd'hui grand vous pour
une chance que j'ai voyagé, je travaillais pour payer études enfants et
voyages c'était la mon but.

From: [REDACTED]
To: [HepC8690](#)
Subject: Allocation of 2019 Surplus
Date: April 30, 2023 4:06:17 PM

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To: The Joint Committee

Good day

My name is [REDACTED], son of [REDACTED], D.O.B. Dec. 13th 1921 who underwent bypass surgery in 1988 in Montreal where he was administered Hep.C infected blood. It is my recommendation to the Joint Committee that the surplus funds be distributed to the surviving family members of the individuals who were tragically affected by this unfortunate tainted blood scandal due to the lack of a national blood policy.

[REDACTED]
Claim # [REDACTED]
[REDACTED]
[REDACTED]

Sent from [Mail](#) for Windows

From: [REDACTED]
To: [HepC8690](#)
Subject: Allocations of surplus funds
Date: May 1, 2023 6:17:36 AM

CAUTION: This email originated from outside of Epiq. Do not click links or open attachments unless you recognize the sender and know the content is safe. Report phishing by using the "Phish Alert Report" button above.

I wish to express the views of myself and family that the surplus funds should be paid out to the family members who have suffered the lost of a loved one to Hep C.

It has been 37 years since my brother [REDACTED] received a blood transfusion fusion in January 1986 that contained Hep C.

I firmly believe these funds should and must be paid out to all the members of every family who lost their loved one.

Sincerely,

[REDACTED]

Sent from my iPhone

From: [REDACTED]
To: [HepC8690](#)
Subject: Re: Surplus of funds
Date: April 20, 2023 11:02:34 AM

CAUTION: This email originated from outside of Epiq. Do not click links or open attachments unless you recognize the sender and know the content is safe. Report phishing by using the "Phish Alert Report" button above.

My claim number is [REDACTED]

On Thu, Apr 20, 2023 at 1:43 PM [REDACTED] wrote:

My name is [REDACTED] My mother [REDACTED] passed away from Hepatitis C from the blood transfusion given to her in 1986-1990. My mother was a level 6. I am a 50 year old woman and was in a physical and mentally abused relationship for 12 years. I am finally out of that relationship and getting my 2 feet on the ground. I have 3 children and we all miss my mother a great deal. I am asking the courts to please disburse any monies that I may be entitled to. I would love to be able to put it towards a home for myself and my children. I am currently renting and the prices are unbearable to rent at this time. Not sure if this email will help but I would love to be able to finally start over again.

Thank You

[REDACTED]

[REDACTED]

From: [REDACTED]
To: [HepC8690](#)
Subject: Please read my letter....
Date: April 20, 2023 8:22:11 PM

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Sir/ Madam:

I, [REDACTED] is the mother of the beneficiary, being [REDACTED].

He has appointed me as his Representative as your files state.

As it appears in your files>. My son was short-changed He received a meagre sum.

His late father, the late [REDACTED], died of Hep C- infected in a Hospital at the [REDACTED] General Hospital during the 90s' after undergoing a triple bypass

He received blood transfusion ' 2' pints of tainted- blood! All these facts are registered in your files. The late [REDACTED] lost his life because of having received tainted blood...

A lawyer informed me that my son ought to have received 1 Million dollars! He lost his father ! Instead, he received a meagre sum of \$52, 000 thousand dollars on July.19, 2021

It is never too late to remedy a wrong! Since there is a surplus , perhaps you can remedy this error!

I shall be awaiting your kind response.

Thank you for reading my letter and I remain

Yours truly,

[REDACTED]

Representative of [REDACTED]
[REDACTED]

From: [REDACTED]
To: [HepC8690](#)
Subject: Hep C Surplus Fund
Date: April 13, 2023 1:15:40 PM

CAUTION: This email originated from outside of Epiq. Do not click links or open attachments unless you recognize the sender and know the content is safe. Report phishing by using the "Phish Alert Report" button above.

I lost my Mother on December 5, 1995 as a direct result of receiving a contaminated blood transfusion. She left behind her spouse, 6 children and 4 grandchildren. The courts should distribute the surplus money to her family and to survivors living with Hep C. Had she not received this transfusion she probably wouldn't have died before her time. Please consider her family members and other people who received contaminated blood and are living with the disease.

Sincerely

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]

Sent from [Mail](#) for Windows

Chya Mogerman

To: [REDACTED]; HepC8690
 Subject: RE: Sister of [REDACTED]

From: [REDACTED]

Sent: Tuesday, April 11, 2023 8:23 PM

To: HepC8690 <info@hepc8690.ca>

Subject: Re: Question re: Notice of proposed allocation of 2019 Surplus for benefit of class members

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To whom it may concern.

My name is [REDACTED] and I am the sister of [REDACTED] (Hemophiliac) who passed away in August of 2005 due to Hep C. Our Father, [REDACTED] passed in 2014 (8 years after [REDACTED] passed) and I was assigned Executor of his Estate. Our Dad was never able to recover from the depression of losing his only son [REDACTED] at 32 years old. I'm sure you receive many messages of pain and loss from families who have been affected by the negligence of the Canadian Red Cross.

In 2019, Toronto CBC TV Creator Robert Cooper bravely told the story "**Unspeakable**" with his dramatization of the tragedy. I watched it with my Mom ([REDACTED]) and [REDACTED] Widow ([REDACTED]) Watching our story be told was triggering and necessary, a part of our ongoing healing. In an interview Cooper said "As time passes, there's a danger of the tragedy fading from the mind of the general public." Most people I've tried talking to about the scandal have very little or no idea at all about it. Unbelievable Also, I just realized today while scrolling through old news articles that my brother died just 3 months after reading in the news:

"The Canadian Red Cross was fined \$5,000 for its role in the tainted blood scandal after it pleaded guilty to a lesser charge for its role in what's been called a "public health calamity." No words.

I appreciate the Joint Committee's work and also the opportunity to express the above.

It was my mom who let me know that she had received an email regarding the update: **Recommendation 2 - Loss of Guidance, Care and Companionship Payments** from the Committee.

I didn't receive the email so I thought I should reach out and find out if the Committee has my updated information.

[REDACTED]

With gratitude,

[REDACTED]

From: [REDACTED]
To: [HepC8690](#)
Subject: Re: What to do with the multi-million surplus capital of the 1986-1990 Hepatitis C Settlement Trust Fund? We want to hear from you!
Date: April 26, 2023 10:24:45 AM
Attachments: [REDACTED]

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Hello there,

my name is [REDACTED] (formerly [REDACTED]) and I am writing today to express that as a surviving family member, a daughter of a tainted blood victim, [REDACTED], that what I think and feel should be done with the surplus is that the money and excess funds should go directly back to those whom are still alive/current tainted blood victims, as well as their families/dependents, and that the money should also be divided up amongst surviving members of the family of a tainted blood victim who is deceased/has passed away.

Obviously there is no amount of money or compensation that can undue the severe harm or ease the damage that losing a loved one to the tainted blood tragedy has caused, however financial compensation can assist surviving family members with the many complexities in life that they continue to experience as a result of losing a loved one.

I know undoubtedly that if my father were alive today that he would want his family to have access to equitable financial compensation, as this is something that he advocated strongly for and fought bravely to ensure while he was still living.

We miss our father every single day and he was the greatest man I've ever had the privilege to know and that is why I feel compelled to share what I believe should be done with this surplus and what I believe he would have wanted to see happen with this surplus as well.

Thank you for giving me the opportunity to express my thoughts and opinions on this matter.

Sincerely,

[REDACTED]

From: chs <chs@hemophilia.ca>

Sent: April 12, 2023 6:18 PM

Subject: What to do with the multi-million surplus capital of the 1986-1990 Hepatitis C Settlement Trust Fund? We want to hear from you!

Hello,

Please go to the link below to access important information regarding the surplus capital of the 1986-1990 Hepatitis C Settlement Trust Fund.

We would greatly appreciate it if you could please share this message and request to your members and whoever may be concerned by this issue.

This is time sensitive - **a deadline of May 1** is set to hear from individuals.

www.hemophilia.ca/hepatitis-c-and-hiv-compensation

Thank you very much for your help in getting this out to the community!

Canadian Hemophilia Society | Société canadienne de l'hémophilie

Tél. : 514 848-0503 / 1 800 668-2686

www.hemophilia.ca



Chya Mogerman

From: info@hepc8690.ca
To: [REDACTED]; HepC8690
Subject: RE: Re:

From: [REDACTED]
Sent: Monday, April 10, 2023 6:27 PM
To: HepC8690 <info@hepc8690.ca>
Subject:

CAUTION: This email originated from outside of Epiq. Do not click links or open attachments unless you recognize the sender and know the content is safe. Report phishing by using the "Phish Alert Report" button above.

This money was set up for victims and thier families .My Husband past away at the age of 36 .He had children and a wife.He had his whole life ahead if him and it was taken away from the selfishness of others.ALL involved should have not allowed thus to happen .I had children to raise by myself . [REDACTED] didn't get to see his children grow up nor did he get to walk them down the isle. OR see his grandchildren being born.We have lost a very special person .and after 30 some years we still miss himeveryday.He should be here .His children grew up not knowing thier father .the youngest being 2 at the time of death These funds were put in place for victims and family .And this is where it should stay.We fought hard for some type of justice. WE DONT HAVE OUR LOVE ONES ANYMORE.Keep the funds where they belong thank you [REDACTED]

Chya Mogerman

To: [REDACTED]; HepC8690
Subject: RE: Claim no [REDACTED] ([REDACTED])

From: [REDACTED]
Sent: Monday, April 10, 2023 8:42 PM
To: HepC8690 <info@hepc8690.ca>
Subject: Claim no [REDACTED] ([REDACTED])

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Hello my mom died in 2013 as a result of hep C. I think the money should go to her 2 grandchildren and her children and all the others who loss someone. I was the one who took my mom to her app and gave her treatment and took care of my mom and I couldn't get a job as I had to take care of my mom. Now I'm taking care of my brother who is developing delay and my dad who aging. I know my siblings where there but as I lived at home I had to do more and stayed up with her when she was sick. I think I deserve more not to be selfish. But I deserve to be Comfortable in my life as I'm a caregiver. Thank you

[REDACTED]
Sent from my Bell Samsung device over Canada's largest network.

From: [REDACTED]
To: [HepC8690](#)
Cc: [REDACTED]
Subject: Hepatitis C (HCV) January 1, 1986-July 1, 1990 Class Actions Settlement - SURPLUS Recommendations
Date: April 26, 2023 7:50:49 AM

CAUTION: This email originated from outside of Epiq. Do not click links or open attachments unless you recognize the sender and know the content is safe. Report phishing by using the "Phish Alert Report" button above.

Good Morning,

First off thank you for giving class members of the *Hepatitis C (HCV) January 1, 1986-July 1, 1990 Class Actions Settlement* an opportunity to provide input on the proposed surplus recommendations.

As the daughter and family member who lost their Father, [REDACTED] as a result of the "tainted blood disaster". It is my opinion that **All** surplus funds should be given back to **those who were infected with Hepatitis C as a result of contaminated blood and to all the family members**, like mine that have been profoundly impacted by the loss of their loved one(s) that resulted in undue harm from the negligence of the Canadian Government and Canadian Red Cross between 1980-1990.

Upon review of the Joint Committee's summary of REVISED recommendations and based on my interpretation of these recommendations, I **APPROVE** these recommendations and motion them to move forward. My only recommendation is to ensure that any financial benefits to be paid be out be **non taxable benefits!**

Sincerely,

[REDACTED]

Sent from my iPhone

From: [REDACTED]
To: [HepC8690](#)
Subject: Compensation 1986-1991
Date: April 24, 2023 12:39:09 PM

CAUTION: This email originated from outside of Epiq. Do not click links or open attachments unless you recognize the sender and know the content is safe. Report phishing by using the "Phish Alert Report" button above.

Hello, I am providing input with regards to further compensation for the people/families affected with Hep C through the Hemophilia class action 1986-1991

I am asking that you payout the remaining money to families that were affected by the disease and that may have led to death. I understand that you're planning to withhold some of the money for further applications that may come in late. I understand that a small percentage of this money will be withheld.

My husband was a severe hemophiliac that was given blood products on a weekly basis. He contracted AIDS and became very sick. He was given treatment that was available at the time for AIDS. He responded well for months with this treatment and appeared to be "out of the woods" then he appeared to be have something more happening to his health which I believe now was HEP C. His liver functions became worse by the weeks. This was before there was a test for HEP C. He eventually lost his life [REDACTED]. It's very clear after reading and meeting others with severe hemophilia that received blood produced that have been fortunate enough to live with Aids. HEP C I have realized that it was what killed my husband but because there was no way to find out because no test available we never received fair compensation.

I have never felt that the compensation was fairly distributed to me and my family for the likeliness of my husband dying from HEP C. At the time is was believed he died of AIDS.... I think with time passing and many people living healthy lives with Aids they it's clear he was dying because of HEP C. No one is going to change that situation, hopefully those involved learned a valuable lesson.

I have read the new allocations for the payouts which I believe in my situation is a further amount of death benefit for infected \$7901 and no further money for spouses, children, parent and siblings. So I disagree with this, there should be some money allotted for the damages caused for the people left without their love one.

When I look back now and see the waste of money our government throws away, this is just an insult for what I receive for them killing my husband and my children's father, brother and son.

Thank you for giving me the opportunity to give input in the remaining compensation still to be distributed for 1986-1991.

Sincerely,

[REDACTED]

Sent from my iPhone

From: [REDACTED]
To: [HepC8690](#)
Subject: Comments on the Joint Committee's recommendations - Claim # [REDACTED]
Date: April 26, 2023 12:13:47 PM

CAUTION: This email originated from outside of Epiq. Do not click links or open attachments unless you recognize the sender and know the content is safe. Report phishing by using the "Phish Alert Report" button above.

I wanted to take this opportunity to express my feelings in regards to the Joint Committee's recommendations for the proposed allocation of the 2019 surplus for the benefit of class members.

A life lost too soon. A life that only lived to be 36 years old.

As I reflect, I struggle like most years, but this one hits different. I am 36 years old. My dad only lived to my current age, and although it feels like I've lived a lifetime, there is a lifetime ahead of me that I look forward to. My dad didn't have that. He lived a life of constant struggle since the time he was born. Living with Hemophilia back in the 80's and 90's, isn't how we live with Hemophilia today. And that was my dad's biggest hope. He faced so many obstacles, treatment plans, diagnoses, transfusions, and stigma, while trying to provide for his family, wife and 3 young kids. He did so with grace and dignity.

Not only did my father pass away from complications due to his treatment of bad blood transfusions, my dad had contracted Hep C and AIDS. My dad died because the government failed to screen the blood supply properly. He received numerous transfusions of bad blood, transfusions that he needed in order to "survive" a life with hemophilia. But survive he did not.

Because of this I was denied a life with my father. It's hard to not feel angst and jaded by the cards that were played. And to be honest I do live with these feelings day to day. They affect my decisions, choices, and everyday thinking. They affect my trust in government and the medical community. And I fight those instincts to not live a life of pain and sadness. I try to lead with love and show compassion. But I also don't want his death to be in vain. We can't have these mistakes happen again, and we must hold accountability where it's due.

I was 5 years old when my father died. I never got the chance to know him and the memories I have are sparse, so I live vicariously through the stories that other people tell me about him. Not only was I denied a life with my dad, I was also denied financial security from a dual income household. My mother did her best to raise her 3 young children without their father and on a single income. Any compensation received due to my father's death was insignificant. My siblings and I still have had to take out student loans to pay for our education. We couldn't possibly rely on our mother's single income to assist with any of our financial burdens. I am aware that no amount of money will replace the void of my father, **but** it can

help ease the pain, and show us class members that we have not been forgotten and left to fend for ourselves due to the governments incompetence.

In honour of my dad, I will always be the voice at the back of the room that speaks up for those who no longer can. Who stands up for injustice, discrimination and wrong doing. Who goes against the norm, thinks outside of the box, and offers another perspective.

While this letter is raw, it is rooted in the reality of my life. A son, brother, husband, uncle, father and friend who was lost too soon. So as we hold the memories of my father close today, may we also remember the other lives lost to the tainted blood tragedy. And may we always uphold accountability, so that history does not repeat itself.

Kindest Regards,

██████████

daughter of a Hemophiliac who died too soon at the hands of the government.

Claim # ██████████

From: [REDACTED]
To: [HepC8690](#)
Subject: comment of proposed surplus allocation
Date: April 13, 2023 10:37:09 AM

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To whom it may concern:

Thank you for the opportunity to view the , "Proposed application of 2019 surplus for the benefit of class members."

The actual amount of the surplus was a surprise to both my wife and I. This was not to be a, "Profit making," situation. Portions of the surplus need to be allocated.

Losing our teenage son to this disease was a terrible event for both of us as it was also for his younger sister and brother. One never forgets.

Thank you in advance for the future updates.

[REDACTED]

From: [REDACTED]
To: [HepC8690](#)
Subject: Claim number [REDACTED]
Date: April 10, 2023 3:55:04 PM

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My mom died in 2013 as a result of hepatic c . I believe her children deserve more money than that was given. Please allocate the funds to her children and her 2 grandchildren and all of the other victims

Get [Outlook for Android](#)

From: [REDACTED]
To: [HepC8690](#)
Date: April 20, 2023 12:52:56 PM

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To whom it may concern.
In my case I lost my husband and his siblings are older and established.
They lost their brother however they do not need the money.
My youngest of 5 children was only 22 when he lost his father.
The extra money could be more useful for my children.
If there is any extra money coming to them who do I update my children address with.
Thank you very much

[REDACTED]

[On behalf of the children]

RECEIVED
APR 21 2023

April 14 3116 2023

CLAIM Number [REDACTED]

To Whom It May Concern;

Re: Hep C. Surplus Funds Division; I'd like to contest the distribution of previous funds allocated to the grandchildren of [REDACTED] [REDACTED] I thought \$600. or even an additional \$300. is shameful. How can you arrive at \$900. for grieving children. This was their grandmother. She was very close to them. She slept with them went to church with them, cried and laugh with them. They miss her at Christmas, Easter, Birthdays and her birthday, on [REDACTED] because she loved cake and surprises. They cry for her. Think about a fair amount if this was your loss today, Maybe a Mom, a daughter, How much is it worth if you lost them today? Please be fair!

[REDACTED] Number [REDACTED]

[REDACTED]

The 1986-1990 Hepatitis C CLAIMS Centre,
P.O. Box 2370 STATION D
Ottawa, Ontario K1P 5W5
CLAIM NUMBER: [REDACTED]

April 14, 2002
3117

TO WHOM THIS MAY CONCERN; In regards to the upcoming

distribution of surplus funds, it is my understanding that a meeting will take place at which time you will decide how you will disperse the funding left in the foundation for HepC, or the surplus. Due to my disability I will not be able to attend. I cannot even get out of my house let alone attend. My house is not equipped for wheelchair accessibility. I cannot afford to fix the elevator lift outside. A lot of my money was spent back and forth going to London for my Mother, and trying to make her comfortable. There was no such thing as "go fund me" it came out of our pockets. \$200. every weekend was nothing for gas and comforts (food). She was there for 6 months in rehab. So when I ask you to please be fair I am asking on behalf of a family that really misses her on Christmas Day, Easter, Her Birthday, Our Birthdays, Graduations, Family Day, Weddings, Anniversaries. Russian Christmas she loved to play cards and get together we miss her. We need to be compensated for what the Red Cross took from us. Please be generous. You can't find LOVE. She was our QUEEN ON MOTHERS DAY. She did not deserve to die. [REDACTED]

Saronito
468 Rue St Jean
Suite 400
Montreal, Quebec, H2Y2B1

Ref.: Cour du 30 mai, 2023 pour
réclamations due au décès des
hémophiles causés par l'Hépatite C

A qui de droit:

En 1990, quatre de nos frères sont décédés
du VIH et l'Hépatite C, soit trois en l'espace de
six mois en 1990 et le 4^e en 1994. Leur noms:

Nous les avons vus souffrir la mort. Alors la
présente est une réclamation afin de recevoir
ce qui nous est dû en compensation. Ça été
très difficile à supporter pour toute la
famille et leur proches. Nous avons
du les assister jours et nuits en nous remplaçant
les uns les autres.

Merci de votre attention

Copie: Casier Postal 2370
Station D
Ottawa, Ontario K1P5W5

From: [REDACTED]
To: [HepC8690](#)
Subject: court hearing for my dad [REDACTED] claim ID [REDACTED]
Date: May 4, 2023 7:05:22 AM

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To Whom This may concern

I still miss my dad everyday and the time I could have spent with him. He has missed out on my beautiful grandchildren that they will never know him. I believe that this surplus should be distributed to the familys of all the victims who died from this horrific tradgedy he will forever be in our hearts

Yours truly [REDACTED]

Sent from [Mail](#) for Windows

From: [REDACTED]
To: [HepC8690](#)
Cc: [REDACTED]
Subject: Joint committee's Recommendations 1986-1990 Hepatitis C claim
Date: April 30, 2023 11:53:22 AM

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To Whom it may concern,

I am of the opinion that the vast surplus be allocated to the family members who have been emotionally and physically impacted by this great error. You are now telling us that most of the funds have been distributed over the years and that the surplus has grown. You should definitely distribute the amounts to the affected family members. Leaving the funds in this account to continue to grow is unfair and would benefit no one. We have suffered greatly because of this scandal. And the irony of all this is that my father [REDACTED] would regularly give blood to the Red Cross whenever there was a blood donor drive. He even received little pins when he got to a certain number of donations. So please think of the victims and consider what I am sure everyone is telling you.

My claim no. is [REDACTED]

Sincerely,

[REDACTED]

Sent from my iPad

From: [REDACTED]
To: [HepC8690](#)
Subject: My Input to the Courts
Date: May 4, 2023 6:55:44 AM

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I wish to comment on the Joint Committee's Recommendation 2 - 50% of Loss of Guidance, Care and Companionship Payments.

My husband, [REDACTED] died October 3, 1986. Our daughter, [REDACTED] was only 3 years old when her father died. I was suddenly a widow at the age of 33. When I married [REDACTED] he was to be my lifelong companion. I continue to live alone and greatly miss the love and companionship of my late husband. It is a couple's world and socialization after the loss of my husband was never the same. My daughter, [REDACTED] has been deprived of the love and guidance of her father. It has deeply affected her psychologically.

I would like to see Recommendation 2 granted to me and to my daughter. I sincerely hope you will rule in our favour.

Regards,

[REDACTED]

From: [REDACTED]
To: [HepC8690](#)
Subject: My opinion
Date: May 6, 2023 5:26:02 PM

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Hello,

My name is [REDACTED] [REDACTED]. My father, [REDACTED] [REDACTED] was a hemophiliac who passed away in 1992, leaving a wife and 2 children, my mother, my sister and I. I was 2 years old, my sister was 6. He would have 6 grandchildren if he was alive, 3 from myself, 3 from my sister.

Statistically speaking, children who grow up in a fatherless home, have increased odds of being in jail, dead, mental health problems, and many other negative issues have increased odds due to their father being absent. My father was absent due to tainted blood that wasn't tested before it was given to him, for a disease he had, due to no fault of his own.

The current economy is a difficult one for families. I'm guessing the majority of families and individuals would agree with me. Extra money directly paid to us would help us. Would help the spouses, children, siblings, grandchildren and loved ones of those who were lost.

I propose that you give everyone effected as much money as possible. No amount will ever make up for our losses, but it would lift the financial burdens that all families are currently facing, and with 1 less person in their life to help them, it makes it even harder for those families.

I hope this situation is resolved asap, and this committee decides to give a financial relief directly to those personally effected.

Sincerely,

[REDACTED] [REDACTED]

From: [Chya Mogerman](#)
To: [Chya Mogerman](#)
Subject: RE: Hepatitis C Class Action
Date: May 15, 2023 3:40:30 PM

From: [REDACTED]
Sent: Saturday, May 13, 2023 10:01 PM
To: Hepatitis C Class Action <hepc@strosbergco.com>
Subject:

**** This is an EXTERNAL email. DO NOT open attachments or click links from unknown senders or unexpected email. Please contact our IT Help Desk if you have any doubt about the validity of this e-mail ****

To whom it may concern,

My name is [REDACTED]. I am the eldest grandchild of [REDACTED] [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 be 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. Thank you kindly.

Warmest regards,

[REDACTED]

Please update my address

[REDACTED]

[REDACTED]

From: [REDACTED]
To: [HepC8690](#)
Subject: Surplus
Date: May 5, 2023 11:02:32 AM

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Claim I D # [REDACTED]

I would recommend paying some of the surpluses out to the people infected by the disease or such as myself who lost my wife to the disease or those still suffering from the disease.

There is a lot of money sitting there where some of the people can use it.

From what I have read in the letter no one seems to know what to do with it the surplus the Government doesn't seem to care so why not pay out some of this money?

Most of my family is gone I am getting older will be 73 years old this year My late wife's family is mostly gone I haven't heard from them in years if there still alive.

[REDACTED]

From: [REDACTED]
To: [HepC8690](#)
Subject: Trust Fund Hepatitis C Recommendations-Comments Claim # [REDACTED]
Date: May 8, 2023 7:38:29 AM

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Joint Recommendation Committee/Input to Courts re: Trust Fund Hepatitis C

I wish to briefly comment on the Recommendations of the Hepatitis C Trust Fund Allocation. The loss of our beloved son, brother, uncle, nephew, cousin has been devastating to our family, his friends and co-workers. He was one of eight children and he was taken from us in the prime of his life. Our family continues to struggle with the grief of this traumatic loss even today. We strongly believe the remaining monies (surplus) accumulated over the years should be allocated to family members so that we can continue to honor the memory of our loved one in attempts to heal. The pain has been everlasting from this grave injustice! We remain powerless as our loved one paid the ultimate price...death...murdered by the Hepatitis C Virus from a tainted blood transfusion. Shame on those decision makers who allowed this to happen for they are ultimately responsible!

We seek peace in beautiful memories and this allocation will help us to keep our loved one's memory alive!

Sincerely;

Claim ID # [REDACTED]

[REDACTED] sibling of [REDACTED]

From: [REDACTED]
To: [HepC8690](#)
Subject: Writing in behalf of my dad and grandparents
Date: May 5, 2023 10:10:07 AM

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Good day,

I'm writing on behalf of my dad [REDACTED] his claim number id is [REDACTED] I believe the money shall go to my dad and his in laws and his children's and his sister inlaw and brother in law. His grandchildren as well.

My grandmother [REDACTED] claim I'd is [REDACTED] is no longer with us she has passed away is now reunited with her daughter.

My grandfather [REDACTED] I'd number is [REDACTED] I believe he should get the funds that would be given to my grandmother my grandfather suffered alot losing my mom his daughter. The rest should be given to there children his father in law his grandchildren and great grandchildren.

Thank you

[REDACTED]

Sent from my Bell Samsung device over Canada's largest network.

-----Original message-----

3128

From: [REDACTED]

Sent: Saturday, May 6, 2023 2:53 PM

To: HepC8690 <info@hepc8690.ca>

Subject: Re: Allocations of surplus funds [REDACTED]

MAY 09 2023

May 6, 2023

I am sorry I do not know my original claim number.

My updated email is:

[REDACTED]

Date of birth is:

[REDACTED]

I am also writing as the executor of my mother's estate . Her name was:

[REDACTED] Her birth date was [REDACTED] and her [REDACTED] She

was also the mother of [REDACTED] believe her claim number was [REDACTED] A registered letter was sent

April 5th, 2017 with a copy of her death certificate and a certified copy of her will and two (2) codicils as instructed. A

cheque dated June 5, 2017 was received and deposited June 19, 2017.

On behalf of my mother's estate I wish to express that her wishes would have been the excess of funds be dispersed to

family members who have lost their loved ones.

If you need any further information please do not hesitate to contact me.

Sincerely

[REDACTED]

Sent from my iPhone

> On May 4, 2023, at 8:35 AM, HepC8690 <info@hepc8690.ca> wrote:

>

> Good morning.

>

> Thank you for your input the on how you would like the excess capital to be used. We will be forwarding it to be used at the May 2023 meeting.

>

>

> Please make sure we have the claim number and the following information.

>

> Updated address

> Updated phone number
 > Updated email
 > If you cannot remember your claim number, please provide us with your date of birth, and if your surname has changed, please provide us with the one you used when you were accepted as a class member.
 >
 > Thank you,
 >
 >
 > The Hep-C 1986-1990 & Late Claims Administrator PO Box 2370, Station D
 > Ottawa, Ontario, K1P 5W5
 > 1-877-434-0944
 > Option 1: 1986-1990 Settlement Plan
 > Option 2: Late Claim Benefit Plan
 > info@hepc8690.ca
 > Fax : (613) 569-1763
 >
 > This electronic mail (including any attachments) may contain information that is privileged, confidential, and/or otherwise protected from disclosure to anyone other than its intended recipient(s). If you have received this message in error, please notify the sender immediately by reply email of the inadvertent transmission and then immediately delete the original message (including any attachments) in its entirety.
 >
 > La présente communication électronique peut contenir de l'information de nature confidentielle et est strictement réservée à l'usage du destinataire à qui elle s'adresse. Si vous avez reçu cette communication par erreur, veuillez la supprimer, détruire toute copie imprimée et communiquer avec l'expéditeur immédiatement.
 >
 >
 >
 >
 >
 > -----Original Message-----
 > From: [REDACTED]
 > Sent: Monday, May 1, 2023 9:17 AM
 > To: HepC8690 <info@hepc8690.ca>
 > Subject: Allocations of surplus funds
 >
 > CAUTION: This email originated from outside of Epiq. Do not click links or open attachments unless you recognize the sender and know the content is safe. Report phishing by using the "Phish Alert Report" button above.
 >
 >
 > I wish to express the views of myself and family that the surplus funds should be paid out to the family members who have suffered the loss of a loved one to Hep C.
 >
 > It has been 37 years since my brother [REDACTED] received a blood transfusion fusion in January 1986 that contained Hep C.
 >
 > I firmly believe these funds should and must be paid out to all the members of every family who lost their loved one.
 >
 > Sincerely,
 [REDACTED]



> Sent from my iPhone

Class Member Submissions 2019 Allocation Hearing

Recommendation Three – Lost or Diminished Pension Benefits

From: [REDACTED]
Sent: Friday, May 5, 2023 8:33 AM
To: HepC8690 <info@hepc8690.ca>
Cc: [REDACTED]
Subject: Hep C / Claim ID [REDACTED]

3132

RECEIVED

MAY 10 2023

#

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CLAIM ID : [REDACTED]

My name is [REDACTED] and I reside in Ontario. I have received your recent correspondence concerning Hep C. I am a Liver Organ Transplant Recipient, receiving this surgery because of "Budd Chiari Syndrome" having received this surgery in January 1988.

I received a blood product during my surgery at University Hospital, London, Ontario in 1988, but was **not** informed of this until 2010 when I began not feeling well, and I tested positive for Hep C. My health declined quickly and I went on *Long Term Disability* from my employer, [REDACTED] Regional Police. My transplant doctor (at the time), put me on a treatment regime for the Hep C, a drug called Pegylated Interferon with Ribavirin. I had 5 million parts of Hep C per 1 cc of blood in my body and it was determined that I had to be on the drug treatment 10 months but I only lasted 5 months due to some extreme negative side effects from the drug treatment. I now suffer from Long QT Syndrome and Atrial Fibrillation and Ventricular Tachycardia. I remain on Long Term Disability.

I did retain a lawyer in 2010 to handle all the necessary paperwork regarding my Hep C claim, but what I was awarded does not even come close to what I have lost in my life.

Let me be clear, I would NOT be presently on long term disability had I not received the contaminated blood product in 1988. Since acquiring the Hep C and taking the drug treatment, I have suffered greatly from residual problems that will plague me for the rest of my life.

If I had NOT acquired the Hep C, I would NOT have had to take the drug treatment that brought on so many side effects preventing me from leading a productive, (and employed) life.

The Hep C has ruined my life and I am never going to be able to regain what I have lost. An entirely "preventable" event in Canada's history.

Chya Mogerman

To: [REDACTED]; HepC8690
Subject: RE: # [REDACTED]

-----Original Message-----

From: [REDACTED]
Sent: Wednesday, April 12, 2023 5:02 PM
To: HepC8690 <info@hepc8690.ca>
Subject: Re: # [REDACTED]

Hi I have had two liver transplants do to hep c , from the blood scandal 1986-1990 , I got sick had to give up a good job working in the mines in Alberta, my job was a Forman on site making good money , I got so sick I had to give up work in 2010 , two transplants in 2013 , I was 53 years old and had to stop because of being so sick , hep c paid me compensation until I turned 65 last year , now the compensation had stopped and I am still unable to work due to lots of complications, plus kidneys have took a hit during the surgeries and they say in 3-4 years I will need a transplant or dialysis, my bones are weakening due to the meds for my liver transplant that I have to be on for life, broken my ankle three times and due to that I had to have two angle fusions , therefore with the money that's left in the trust fund they should keep paying compensation for many more years to come ,

[REDACTED]

Sent from my iPhone

To: Joint committee HepC 8690

Excess Capital under the 1986-1990 Hep C agreement

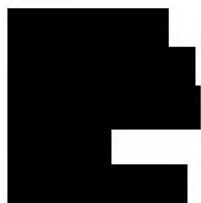
I am a Hemophiliac under the plan at level I 5 of the disease. When my physician pulled me out of work due to my illness I was only making about \$43,000 dollars a year. I was doing really well at work and climbing the so called corporate ladder. I was heading toward either a position as a Law clerk or a management position at a large transportation company. These positions would have garnered a great deal of increased salary.

Under the plan as it stands now I am not eligible for Loss of income because I receive MPTAP. I have lost hundreds of thousands of dollars in pension as well as future opportunities for higher paying positions. This is unjust and doesn't consider the future of class members. When I say that I have lost hundreds of thousands in pension money I truly believe that it is more like \$300,000, not to mention my potential for a higher salary. Even if it is a portion of the lost pension money that is able to be provided it would help tremendously.

I would like to see the excess capital of the 2016-2019 period go to class members who have lost the pensionable money that they would have earned if they were able to work.

I hope that this issue is looked into and a solution is made available to class members.

Sincerely,

A large black rectangular redaction box covering the signature area.

Class Member Submissions 2019 Allocation Hearing

Recommendation Four – Loss of Services in the Home

From: [REDACTED]
Sent: August 30, 2022 3:02 PM
To: HepC8690faxes <HepC8690faxes@epiglobal.ca>
Subject: Questions and Comments regarding the Committee of Adjustments Submission

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Hello;

As a longtime claimant [REDACTED] I have some comments and questions about the 2019 surplus the Committee of Adjustments has submitted a claim to the courts for on behalf of claimants.

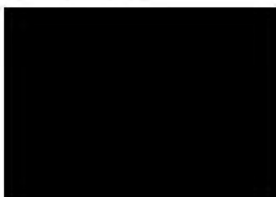
I understand that the Committee did not ask for comments from claimants or their families, but I am choosing to offer some input. I sincerely hope the courts will grant that these excess funds are allowed to be distributed to the claimants like myself. Personally, I am struggling financially, as the previous decision to cut loss of income benefits once a claimant reached the age of 65, has dramatically changed the yearly monies I have coming in. In fact, as you would be aware, for someone like myself, I was faced with a 75% cut in benefits. Sadly, the loss of services benefit is very low and it has become increasingly hard to keep up with inflation and cost of living increases. Life does not get easier as you get older, it gets more challenging.

In looking at the charts provided on the website, I could use some input on what a claimant like myself would be looking at as far as distribution of excess funds as per the Committee's suggestions. It looks like there are rather generous lump sum payments to family members of deceased claimants, but I cannot fully calculate what a living claimant like myself might receive. Your help with this will be appreciated.

Many thanks and I sincerely hope the courts are aware of the struggles claimants and their families face every day. It would be a very sad to have these excess funds go to anyone but the claimants as compensation for all they have faced in their lives having a diagnosis of HepC.

Thank you.

Peace Always,



[REDACTED] le 2 mai 2024

Monsieur, Madame,

J'ai pris connaissance de votre avis « ALLOCATION DU CAPITAL EXCÉDENTAIRE 2019 AU BÉNÉFICE DES MEMBRES DES RECOURS » et je me pose la question sur la pertinence d'octroyer un montant aux frères et sœurs.

Lors de la convention initiale je me suis toujours demandé le pourquoi des frères et sœurs qui étaient mis au même point que les enfants du défunt, ce sont eux qui ont le plus perdu car perdre un père ou une mère est une très grande perte physique et morale qui va durer toute leur vie. Quand une personne quitte le nid familial pour bâtir sa propre vie et fonder une famille c'est ce qui est généralement le plus important pour lui. Je ne pense pas que lors du décès, il a eu une pensée pour frère et sœur quand celui-ci a généralement une famille.

Initialement ils ont reçu un dédommagement après le décès de leur frère ou sœur et que cela est suffisant, ses propres enfants avaient reçu le même montant soit \$5000.00 mais cela a été ajusté au dernier surplus. Alors je ne crois pas qu'ils devraient être inclus dans cette demande d'ajustement. Je peux que vous affirmiez que lors du décès de mon mari qui a passé 9 mois au soin intensif suite à une double greffe foie et rein que c'est moi et ses enfants qui en ont pris soin de lui avant le greffe et durant l'hospitalisation qui ont vu la déchéance d'une personne.

Lors de la dernière réunion discutant du surplus du fond j'ai parlé avec des gens qui comme moi ne comprenais pas la pertinence de donner aux frères et sœurs et on pouvait comprendre pour la mère qui perd un fils.

L'argent ne réparera jamais la perte d'un être cher et son absence restera toujours profonde car lors d'un mariage d'une cousine ma fille pleurait en pensant que jamais son père sera là pour elle dans des moments heureux. Ce qui est sûrement différent pour frères et sœurs.

Une suggestion pour le surplus alloué aux frères et sœurs serait de garder ce montant dans la fondation pour permettre aux conjointes d'avoir la perte domestique plus longtemps car je crois que celle-ci arrête selon l'espérance de vie de la personne décédée car mon espérance est-elle plus longue ou courte cela personne ne le sait. En n'ayant pas ce montant je peux vous affirmiez que je serais sur le seuil de la pauvreté car comme beaucoup d'autres femmes je suis resté à la maison pour élever les enfants ce qui fait que ma pension n'est même pas de \$2000.00 par mois. Le coût de la vie augmente beaucoup plus vite que l'augmentation de notre pension.

Merci de m'avoir lu, je ne pense pas que cela changera mais j'aurais au moins donné mon opinion.

Veuillez agréer, Monsieur, Madame, mes meilleures salutations.

[REDACTED]

Claim ID : [REDACTED]

Chya Mogerman

Subject: RE: Screenshot 2023-04-17 at 9.31.55 AM. [REDACTED] sister of [REDACTED]

From: [REDACTED]

Sent: Monday, April 17, 2023 6:35 AM

To: HepC8690 <info@hepc8690.ca>

Subject: Screenshot 2023-04-17 at 9.31.55 AM. [REDACTED] sister of [REDACTED]

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Attached: This is what my sister thinks.

9:21



On Mon, Apr 10, 2023 at 11:03 PM [REDACTED]

[REDACTED] wrote:

Hi [REDACTED]

I didn't read the whole thing, but it sounds to me as though someone has a covetous eye on this surplus. I think the yearly payouts to the remaining recipients should be increased. That is the group that was grievously injured. It is also the group that fought for the settlement. The group may be getting smaller, while the amount of money put aside for them is getting larger. That is just how investing goes. I doubt there would be talk of reallocation of the loss, if the trust was out of money.

Payouts should increase. Substantially, if the settlement is soon to expire.

Chya Mogerman

To: [REDACTED]; HepC8690
Subject: RE: NOTICE/ AVIS - ALLOCATION OF 2019 SURPLUS / ALLOCATION DU CAPITAL EXCÉDENTAIRE 2019

From: [REDACTED]
Sent: Thursday, April 13, 2023 6:18 PM
To: HepC8690 <info@hepc8690.ca>
Subject: Re: NOTICE/ AVIS - ALLOCATION OF 2019 SURPLUS / ALLOCATION DU CAPITAL EXCÉDENTAIRE 2019

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Dear administration,
please be advised that as of may 02 I will be 87 - it is time we were compensated as at this age we are suffering and need this help. Thank you for your consideration of my concerns. I hope you will approve this funding for us.

Sincerely,
[REDACTED]
April 13, 2023

| C 1986-1990

Dear Settlement Committee,

I am pleased to hear additional funds may be awarded to the HepC8690 claimants. With rising inflation they are sorely needed.

There are a few suggestions that I hope you and the judge will consider:

- The fixed payment awards are not fair to families of the deceased claimants. Prior to death, the claimants DID go through each of the levels that led up to their death. The deceased claimant should be compensated equally as a living one, if not more because they died and others will go on living with the recent medication cures. There is currently approximately \$12,000 difference in your extra funding awards. The level payments were never paid initially, which totals a loss of \$225,000 if the deceased claimants were awarded the money awarded to living claimants as they passed through each level.
- Since we seem to have extra money, I would like to point out that the loss of income award should also go to families of the deceased. Many claimants did not have a pension and the loss of income from working claimants was significant to family units. In my case, my husband made \$56,000 in 1997 but had he still been alive his paycheque would be over \$90,000 today. There should be a cost of living and pay adjustment to reflect current conditions in calculations. Many of the living claimants can still work, and given there is now a cure, those who lost loved ones should be considered in this item.
- I would like to point out the loss of support payments are being **drastically** cut when a claimants spouse turns 65. In my case it went from over \$40,000 to \$21,000. We do not get the couples allotments from the government and someone just getting OAS and CPP is living under the poverty line. Given there has been extra money twice now, could this slashed income be restored until the spouse dies.
After the age of 65, having a spouse to lean on for companionship, guidance and care is more important than ever. The loss of that loved one is not just a loss of services; it places great hardship on the family and elderly spouses.
I am not sure the rationale for the cut in the first place, and the loss of services does not make up for the lost income even at a \$2 hr raise. For a government that is so concerned about equity for all people, this cut of 50 % borders on prejudicial ageism.

Thank you for bringing these issues to the attention of the judge.

Sincerely,



From: [REDACTED]
To: [HepC8690](#)
Subject: RE: What to do with the surplus capital of the 1986-1990 Hepatitis C Settlement Trust Fund?
Date: May 2, 2023 5:30:07 AM

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I, [REDACTED] [REDACTED] approved HCV infected person, (claim no. [REDACTED] HE) recommend an increased (additional) compensation to spouse, child, parent, sibling, etc. on behalf of Approved HCV Infected Person whose death brought upon loss of guidance, care and companionship. Also, increased compensation for Uninsured Treatment Expenses, Out of Pocket Expenses, Loss of Income/Loss of Services in the Home/Loss of Support would be beneficial to those entitled considering current expenses dealt with today

Thank you

[REDACTED]

Class Member Submissions 2019 Allocation Hearing

Other Suggestions

Chya Mogerman

To: [REDACTED]; HepC8690
Subject: RE: Regarding Retirement

From: [REDACTED]
Sent: Monday, April 10, 2023 7:56 PM
To: HepC8690 <info@hepc8690.ca>
Subject: Regarding Retirement

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Thank you for receiving my Note . I would like to suggest the age ending date from 65 to 67 years of age . Recently we see the retirement age now entering at 67 . I felt this may be an idea time for the HepC claims to reconsider the age limitations . Thank you for your care and attention .Regards [REDACTED]
Sent from [Mail](#) for Windows

From: [REDACTED]
To: kp@podrebaracmediation.com; HepC8690; hts@strosbergco.com; kp@toughcounsel.com; info@savonitto.com; jicamp@cfmlawyers.ca
Subject: Fwd: Re: Life Insurance Claim
Date: April 12, 2023 7:38:50 PM

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Good afternoon,

Please find attached correspondence from 2017, regarding life insurance.

As we have received documentation about the funds surplus... we would like to revisit the issue, as there has been no change in our situation.

I noticed that there are some special distribution benefits that were approved.... and while the life insurance issue is complex, we are hoping that there is some sort of resolution to this problem. Our main concern, is that the loss of income payments to my family would stop, if I die from anything other than HepC. (car accident, etc.).

Kindly review the email attached, and please advise if there is any possible solution, or advice regarding out issue.

Thank you so much for your time.

[REDACTED]

[REDACTED]

----- Original Message -----

From: kp@PodrebaracMediation.com

To: [REDACTED]

Sent: Thursday, June 22, 2017 4:34 PM

Subject: Re: Life Insurance Claim

Hi [REDACTED]

I'm sorry to be the bearer of bad news, but you cannot make a claim for life insurance under the settlement agreement and the courts did not allocate any of the surplus for this purpose.

You are certainly not alone in your views and many class members are, sadly, in the same boat as you.

The Canadian Hemophilia Society requested the Joint Committee to look into this issue prior to the hearing last year and we did. (A number of its members were infected at around your age and even younger.). The biggest insurance companies turned us down, saying they would never consider being part of such a program.

We also looked into creating a fund that would effectively act as insurance for class members, but because so many class members are in the same situation, the preliminary estimate to create such a refund far exceeded the entire surplus. As such, we could not put this forward as a recommendation to the courts. We did, however, say that we would revisit the situation if another surplus was identified -- at that point the joint committee and class members would have an opportunity to make applications for further allocations of the surplus.

I understand your frustration and empathize with your predicament. I'm sorry the news is not better.

Kathryn

Kathryn Podrebarac
416.568.1299

From: [REDACTED]
Sent: Thursday, June 22, 2017 3:39 PM
Subject: Life Insurance Claim
To: Kathryn Podrebarac <kp@podrebaracmediation.com>

Good day Kathryn,

I am requesting compensation from the Hep C 86 to 90 Class Action Settlement, as I am unable get life insurance because of Hepatitis C.

I have Thalassemia Major, and have received monthly blood transfusions since I was 2 years old. Specifically, during the period from and including 1 January 1986 to to 1 July 1990 (known as the "Class Period"). I became infected with Hepatitis C during the Class Period, and I am an approved Class Member.

My date of birth is [REDACTED]. I was infected with Hepatitis C somewhere between the ages of 10 and 15.

When I was 25, I decided to get life insurance, as I was just married and was purchasing my first home. I was denied life insurance because of Hepatitis C. As I am not eligible for mortgage insurance, I wasn't comfortable making a big purchase without some sort of life insurance, so, I decided to go with a "no medical questions asked" insurance policy through Sunlife. This cost \$94 per month, for a \$100,000 policy.

This is a much higher cost, with a lower insurance policy amount than I would have had to pay, had I been approved. To compare, my wife who was 24, received a \$500,000 policy at a cost of \$40 per month.

Over the years, I have attempted to receive additional life insurance, but have been denied several times due to Hepatitis C.

This weighs heavily on me, as I have a wife and two children, and I feel strongly about being insured so that my family is taken care of.

In the summer of 2015, we were informed that the Class Action Settlement funds were being reviewed, as there was a surplus in the funds, and some inadequacies in the settlement payouts.

We attended the meeting for the class members, where class members could suggest and provide input on what was important to their lives and where funds would be best used. Discussions were held regarding the lack of funding for infected class members who were unable to work or provide services in the home, as well as funeral expenses for deceased class members, and various other topics.

I stood up to advise that the lack of life insurance compensation was extremely important to me.

I have realized that my case is unique in this class action group... as there are not many people who would have contracted Hepatitis C at such a young age. Most of the class action members would have been adults receiving blood transfusions for various different reasons, and chances are they would have already had life insurance.

Clearly, life insurance is important to me, as I have been paying for it since I was 25 years old. I have been receiving compensation from the class action settlement for loss of income. I understand that if I die from Hepatitis C, my wife and children will continue to receive loss of income compensation until I would have reached the age of 65..... However, I worry because if I die from something other than Hepatitis C, such as a car accident, etc...., my family will no longer receive any type of compensation.

Please advise how I can go about submitting a claim for this.

Thank you,

██████████



From: [REDACTED]
To: [HepC8690](#)
Subject: Hep C Important Request
Date: May 5, 2023 6:49:46 PM

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To whom it may concern,

Hello, my name is [REDACTED] and I'm writing to voice my input to the courts. I have one specific request for my situation.

Being born with severe hemophilia, factor 9 deficient, I contracted hepatitis C, as did my Uncle [REDACTED] and Great Uncle [REDACTED]. My Great Uncle [REDACTED] died from his hepatitis C. Because I took the exact same blood product as he did, and genetically we are similar, all my doctors recommended I take the Interferon Alpha 2B treatment to help clear or suppress my hepatitis C.

Interferon resulted in one of the worst treatments I ever experienced. My weight dropped to 109 pounds, and all food tasted like copper. After the treatment ended in August 1995 the test results said it relapsed and didn't work. For the following years my life was at its absolute lowest. To prepare to take the Interferon treatment again I did additional blood tests. Later tests showed the treatment did work. One of the most happiest days in my life.

Fast forward many years, I was having constant issues. Choking on food when eating as slow as 2 hours. Eyes became swollen, stomach issues and vomiting. After multiple doctors it was diagnosed that I had papillary carcinoma (thyroid cancer).

Dr. [REDACTED], one of the very best endocrinologists, asked many questions to pinpoint the cause. I don't drink, don't smoke, don't do drugs and have multiple blood tests to prove that. Among his questions I explained I had to take Interferon Alpha 2B to treat my hepatitis C. Dr. [REDACTED] stated that he was glad I told him that, for he had hundreds of patients with thyroid issues as a direct result of taking the interferon treatment.

A very, very brief outline of my thyroid surgery:

May 23, 2018 - biopsy to confirm thyroid is cancerous

May 29, 2018. - diagnosed as cancerous

Nov. 5, 2018. - thyroidectomy and total removal of thyroid

March 3, 2019. - bone scan

March 8, 2019. - iodine radiation treatment

So here is my question. I contracted hepatitis C from contaminated blood products. Because of that I had to take the Interferon Alpha 2B treatment or quite possibly pass away as my Great Uncle [REDACTED] did. As a result of interferon I then developed papillary carcinoma (thyroid cancer) and had my thyroid removed and now have to live with this for the rest of my life. Why am I not compensated for everything I had to go through, the interferon treatment and damage of thyroid cancer?

I phoned the very lawyers there ([1-877-434-0944](tel:1-877-434-0944)) twice who represent me. They said all I can do is send them the cost of fuel used for travel to and from the medical appointments and they will reimburse that. So I am personally requesting someone to genuinely pass my information along and to re-examine my request.

To give you a better understanding of what I went through:

Take the interferon treatment, to quite possibly stay alive from contracting hepatitis C. Now because of the interferon treatment your thyroid was affected and now cancerous. Now have your thyroid removed and spend the rest of your life on synthroid along with living with hemophilia. Here's \$20 for gas for all you went through and a shorter life span.

In my opinion I should be rightfully compensated for the damage done. It's very simple, hepatitis C resulted in interferon treatment resulted in thyroid cancer.

In case you haven't noticed I'm a fighter, to stay alive and for what is right. And I'm sorry but gas money does not remotely match what I went through.

I'd appreciate it if someone would contact me by phone. I received your letter on May 5 and the deadline is May 15, so that sure wasn't much time. I have dozens of medical folders some 3" thick of evidence and data.

Please, I need your help. Life expectancy of a hemophiliac is 10 years shorter. Now add hepatitis C, then thyroid cancer. How does my request not meet the future compensation parameters?

Sincerely,

[REDACTED]

[REDACTED]

[REDACTED]



Mesdames, Messieurs du Comité Conjoint
Juge de la Cour Supérieure
Pour la province du Québec

Suite à l'avis reçu récemment auquel j'adhère, ce document autorise les victimes à présenter au Tribunal une demande non incluse dans les quatre (4) représentations soumises par le Comité Conjoint.

Je vous présente donc la demande suivante :

"L'exemption de fournir annuellement le formulaire (GEN3) « Indemnisation pour traitements/médicaments non assurés et frais remboursables » requis en vertu du jugement sur entente rendu le 21 septembre 1999 pour les victimes du sang contaminé 86-90. En contrepartie du formulaire requis, je désire obtenir une somme forfaitaire équitable en considération de mon expectative de vie et épuisement mental et physique."

À cet effet, j'espère vous prouver le bien-fondé de ma demande en résumant le plus succinctement possible les faits pertinents vécus depuis 1986 par moi et ma famille qui ont affectés mon intégrité physique, ma vie professionnelle et familiale créant des années d'incompréhension et d'isolement.

Mes fils [REDACTED] et [REDACTED] (6 1/2 ans et 1 1/2 ans à l'époque de ma contamination) ont vécu leur enfance et adolescence avec une mère malade et un père absent. Ils sont devenus des professionnels dont je suis très fière avec des emplois exigeants et leur famille dont quatre (4) petits-enfants que j'adore, je ne veux pas leur imposer la tâche annuelle qui m'incombe de compléter le formulaire, tâche à l'origine de mon épuisement récent. Ma santé nécessitant toujours avec mon âge de plus en plus de suivis médicaux, le formulaire GEN3 continuera de m'affecter.

Au préalable, c'est une chirurgie pour rupture d'anévrisme cérébral et congénital en juillet 1986 qui a nécessité 38 transfusions sanguines dont celle du 4 août qui est responsable de ma contamination au virus VHC. Preuve établie par Héma-Québec pour mon adhésion au Règlement sur entente du 21 septembre 1999 pour les victimes du sang contaminé 86-90.

Faits pertinents de 1986 à ce jour :

1) 1986 à 1999 :

1986 à 1992 - Dès mon retour à la maison des problèmes de douleurs et brûlures avec consultations médicales qui suivent : six (6) années d'infections urinaires et vaginites à répétition, coïtalgie, anorgasmie, vessie neurogène, vestibulite vulvaire en sont les diagnostics. Une dépression réactionnelle avec hospitalisation en résulte en 1987 suite à aucune aide reçue pour la convalescence de la chirurgie (fille unique de parents très âgés, manque de sommeil, perte de poids, mari incompréhensif) surtout aucun soutien du CLSC à l'époque pour aide à domicile pour mon fils de 1 1/2 ans.

1992 et suivantes - Douleurs chroniques (brûlures internes), fatigue chronique, hypoglycémie, arthrite rhumatoïde, fibromyalgie, tendinites et bursites à répétition suivi de physiothérapie avec diagnostic de tendinopathies, syndrome du colon irritable. La consultation d'un médecin généraliste entre 1991 et 1993 portera même un surprenant diagnostic considérant que des tests et analyses de sang ne révélaient aucun signe de maladie, son diagnostic de "Parasitophobie" m'insulte car il ne décèle rien malgré mes symptômes et ma certitude qu'une bactérie, un virus ou un parasite m'affecte, certitude dont je lui faisais part et dont il se moquait car mes ALT était dans la norme de 39-40. Depuis toujours et à ce jour, j'ai une hygiène de vie exemplaire, sans alcool, sans tabagisme incluant relation monogame de 1977 à 1999. Hygiène encore aujourd'hui en 2023.

2) 1999 :

Année de découvertes majeures suite à un événement fortuit : la morsure d'un chien nécessitant la réception du vaccin contre le tétanos. Événement déclencheur avec augmentation de mes symptômes physiques de brûlures internes et fatigue extrême. Mon nouveau médecin généraliste Dr [REDACTED] considérant mes symptômes et la hausse de mes ALT à 110-120 approfondit ses recherches avec pour résultat la découverte de mon infection au VHC. Preuve que je ne fabulais mes problèmes. S'ensuit une autre découverte à l'automne-hiver 1999, découverte affectant cette fois ma vie familiale; l'adultère de mon mari dès sa connaissance de mon infection et des indemnités accordées par le jugement sur le Recours Collectif. Découverte entraînant des répercussions pénibles pour mes fils alors âgés de 20 ans, [REDACTED] et de 15 ans, [REDACTED] ainsi qu'une saga judiciaire de 2000 à 2008 pour des procédures de divorce intentées par mon mari.

2000-2001 - Preuve faite par Héma-Québec de ma contamination, j'adhère au jugement sur Entente de 1999 et devient membre du "Recours Collectif pour les victimes du sang contaminé 86-90". Mon gastroentérologue Dr [REDACTED], après une biopsie du foie, confirme l'existence de mon infection et révèle le génotype 1a du VHC et selon son expertise, ce génotype est le plus résistant aux médicaments connus " Interferon Ribavirin, Interferon Pégatron" de l'époque d'où son opinion en 2004 de ne pas recevoir le traitement. Je considère que l'indemnité annuelle établie par le Comité Conjoint sur la base du salaire perçu de 1999 afin de fixer la valeur de cette indemnité à recevoir par moi dès les années 2001 et suivantes, m'a causé un préjudice monétaire car le salaire de base pour l'emploi que j'occupais était +/- 38 000 \$ par an. À cause de mes atteintes physiques du VHC et ma situation familiale en découlant, je ne pouvais pas exercer un travail à temps plein et mon salaire en 1999 de +/- 12 000 \$ a déterminé l'indemnité à recevoir. Ce fait avait été mentionné par moi au Comité par l'entremise du bureau d'avocat Savonitto & Associés sans succès à l'époque. Donc, l'indemnité pour perte de revenu gagné en 1999 a été en proportion du salaire de 12 000 \$ et non du salaire de 38 000 \$, fait que je considère injuste. La définition du terme "Revenu" dans le Jugement sur Entente sur le Recours Collectif a aussi été mal analysé par la juge lors de mon divorce, cette dernière décidant de comparer mon indemnité à la rente reçue de la CSST.

3) 2000 et suivantes :

Tous mes symptômes perdurent, vient s'ajouter des problèmes de santé toujours inflammatoires surtout aux mains et aux pieds dont ténosynovites, névrome de Morton, doigts

de gâchette, ces derniers nécessitant 3 interventions chirurgicales par chirurgiens plasticiens dont une biopsie au cours d'une intervention par Dre [REDACTED] détectant beaucoup d'inflammation. Biopsie ne révélant pas d'élément pathogène mais entraînant une longue période de guérison où le traitement avec une mèche en argent après plusieurs semaines de suivis au CLSC a finalement réussi la cicatrisation de la plaie. Les problèmes inflammatoires aux pieds sont traités depuis par le Dr [REDACTED], rhumatologue, par infiltrations de cortisone et orthèses par l'orthopédiste afin d'éviter une opération.

2007 - Mon généraliste émettait son opinion de ma santé pour une demande dont ma mémoire fait défaut, opinion faisant preuve du stress vécu depuis mon infection de 1986.

2010 - Pour traiter l'hyperacidité gastrique, la prescription d'un IPP "Nexium" me conduit à l'urgence de Pierre-Boucher et un diagnostic de "Pancréatite".

2015 - Pour traiter la hausse de mon cholestérol, la prescription de "Lipitor" me ramène à l'urgence du même hôpital où après deux (2) arrêts cardiaques pendant la nuit sous observation, la cardiologue m'annonce que la batterie naturelle de mon cœur est finie et nécessite l'installation urgente d'un "Pacemaker". La récupération à l'hôpital entraîne une infection urinaire puis la prise d'un antibiotique "Macrobid". Dès mon retour à la maison, je constate une ligne rouge sur mon bas ventre (semblable au zona). Diagnostic de mon Dr [REDACTED], microbiologiste extraordinaire, une réaction allergique qu'il guéri avec la prise de "Prednizone" pour cinq (5) jours. Ce médecin m'a suivi de 1993 à 2018 et déjà guéri de mes six (6) années d'infections urinaires de 86 à 92.

2018 - L'arrivée de "Harvoni" un ADDD, médicament miraculeux sans effets secondaires possibles selon la Dre [REDACTED] remplaçante du Dr [REDACTED] que j'ai cru à mon grand regret car dès 2019 je subissais déjà les séquelles de ce médicament avec de nouveaux symptômes apparents d'enflure de mes chevilles et jambes en plus des symptômes du VHC depuis 1986. Dr [REDACTED] m'avait prévenue en 2016 des répercussions possibles d'Harvoni surtout considérant les réactions imprévues de mon système immunitaire et les conséquences de ce dernier sur mon corps. Contactant la nouvelle microbiologiste Dre [REDACTED] concernant les effets secondaires subis, cette dernière m'a dit que j'étais folle vu le suivi d'Harvoni et m'a interdit de communiquer au Centre du CHUM sans avoir obtenu une requête d'un médecin m'y référant. Pour moi, ce médecin ne remplit pas son serment d'Hippocrate et je n'ai aucune intention de requérir son opinion à l'avenir. Quel ne fût pas ma surprise de recevoir du Comité Conjoint une note ayant trait aux effets secondaires des ADDD dont "Harvoni" pour les personnes traitées à ces médicaments ! Une autre preuve que je ne fabule pas mais que mon système immunitaire est imprévisible depuis son combat avec le VHC, tel que craignait Dr [REDACTED] du CHUM en 2016.

Depuis 2019 - Problèmes de circulation sanguine, diagnostic de "Circulation veineuse chronique" du Dre [REDACTED] nécessitant des bas de contention pour insuffisance veineuse avec référence pour un "Angioscan Veineux" à l'hôpital qui m'a été refusé par ce service et référé pour un "Dopler" le 6 août 2021. Les problèmes perdurent causant douleurs, Dr [REDACTED] me réfère au privé au Dr [REDACTED] chirurgien vasculaire, qui cause des frais additionnels sans diagnostic nouveau.

2021 à date - Suite à la réception de deux (2) doses du vaccin Moderna contre la Covid 19 en 2021 sur les conseils du Dr [REDACTED] je me sens retourné à la case départ d'après 1986. Une infection urinaire à E coli survient en février 2022 nécessitant un antibiotique "Fosfomycine" qui déclenche une réaction allergique similaire à celle de 2015 mais plus étendue sur mon corps qui mènera à une nouvelle saga de consultations médicales pour connaître la cause et trouver un traitement possible. Dr [REDACTED] n'a pas jugé bon de me prescrire "Prednizone" pour cinq (5) jours à ma demande. Il m'a plutôt référé au dermatologue de sa clinique GMF, Truong qui a posé un diagnostic surprenant de "SDRIFE". Les crèmes et onguents prescrits par les médecins de cette clinique n'ont pas guéri et encore moins soulagé mes symptômes de rougeurs et peau qui brûle. J'ai donc revu le Dr [REDACTED] [REDACTED] consulté dès 1998 pour des problèmes similaires. Ce dernier après analyses et tests ne pouvant établir l'origine des brûlures m'a référé à un Dr [REDACTED] [REDACTED] microbiologiste, sans découverte d'élément infectieux pathogène je me retrouve à la Clinique de dermatologie de l'hôpital Général de Montréal en attente depuis avril 2022 de vérifier avec "Patch Tests" mes réactions allergiques médicamenteuses. J'en conclus que l'opinion du microbiologiste Dr [REDACTED] [REDACTED] dès les années 2000, d'éviter certains traitements et vaccins ne sachant pas comment mon système immunitaire réagirait avait tout son sens probable, surtout que le système immunitaire propre à chaque individu est la "bête noire" de la médecine. Malheureusement pour moi, ce bon médecin est retraité depuis 2018, la prise d'Harvoni et du vaccin contre la Covid 19 sur les conseils du Dr [REDACTED] de le prendre ont des effets négatifs sur ma santé depuis 2020.

Sincèrement, je suis d'avis que mes problèmes de santé ont eu pour cause initiale le VHC avec pour la suite un vécu difficile pour moi menant à mon épuisement mental et physique. Ce vécu a perturbé ma santé, ma vie professionnelle ; dès 1995, ne pouvant exercer à temps plein ma profession, j'ai démissionné de la Chambre des notaires du Québec et reçu la mention de "notaire honoraire". Je devais exercer un emploi à temps partiel avec pour conséquence l'évaluation à la baisse de ma perte de revenu par le Comité Conjoint en 2000, perte de revenu basé sur mon revenu perçu de +/- 12 000 \$ au lieu de +/- 38 000 \$ pour la base annuelle, le tout ayant une incidence majeure sur l'évaluation de ma première indemnité à percevoir du Recours Collectif. Fait mentionné par moi à l'époque au bureau légal du Comité Conjoint sans succès.

Malgré tout, je comprends le bien-fondé du jugement sur entente de 1999 pour les victimes du sang contaminé et je suis consciente que tous les diagnostics posés depuis 37 ans peuvent touchés des personnes non infectées par le VHC. Cependant, ma vie exemplaire me porte à croire que sans le VHC, ma situation actuelle serait très différente surtout sans épuisement mental et physique.

Je vous réitère donc de considérer ma demande spéciale ci-haut mentionné en espérant vous avoir prouvé la pertinence de celle-ci.

Je vous remercie à l'avance de votre compréhension et de l'attention que vous porterez à ma demande.

Je demeure votre soussignée,

[REDACTED]

PARSONS et al.
KREPPNER et al.

vs. THE CANADIAN RED CROSS
SOCIETY et al.

Court File No. 98-CV-141369 CP00
98-CV-146405

Plaintiffs

Defendants

ONTARIO
SUPERIOR COURT OF JUSTICE
PROCEEDINGS COMMENCED AT TORONTO

SUPPLEMENTAL MOTION RECORD
(Joint Committee Motion to Allocate 2019
Excess Capital)

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