

Court File No.: CV-19-615862-00CL
Court File No.: CV-19-616077-00CL
Court File No.: CV-19-616779-00CL

ONTARIO
SUPERIOR COURT OF JUSTICE
(COMMERCIAL LIST)

IN THE MATTER OF THE *COMPANIES' CREDITORS ARRANGEMENT ACT*,
R.S.C. 1985, c. C-36, AS AMENDED

AND IN THE MATTER OF A PLAN OF COMPROMISE
OR ARRANGEMENT OF **JTI-MACDONALD CORP.**

AND IN THE MATTER OF A PLAN OF COMPROMISE
OR ARRANGEMENT OF **IMPERIAL TOBACCO CANADA LIMITED**
AND **IMPERIAL TOBACCO COMPANY LIMITED**

AND IN THE MATTER OF A PLAN OF COMPROMISE
OR ARRANGEMENT OF **ROTHMANS, BENSON & HEDGES INC.**

MOTION RECORD OF THE CLAIMS ADMINISTRATOR,
EPIQ CLASS ACTIONS SERVICES CANADA INC.
(Motion for Claims Administrator Order)

August 22, 2025

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NOTICE OF MOTION OF THE CLAIMS ADMINISTRATOR,
EPIQ CLASS ACTIONS SERVICES CANADA INC.
(Motion for Claims Administrator Order)

The Claims Administrator, Epiq Class Actions Services Canada Inc. ("**Epiq**"), will make a motion to Chief Justice Morawetz on August 27, 2025 at 9:00 a.m., or as soon after that time as the motion can be heard.

PROPOSED METHOD OF HEARING: The motion is to be heard

- ☐ In writing under subrule 37.12.1 (1) because it is (insert one of on consent, unopposed or made without notice);
- ☐ In writing as an opposed motion under subrule 37.12.1 (4);
- ☐ In person;
- ☐ By telephone conference;

[X] By video conference.

at the following location

330 University Avenue, Toronto, Ontario, M5G 1R7.

THE MOTION IS FOR:¹

- (a) orders substantially in the forms attached as Schedules “A” (CV-19-615862-00CL), “B” (CV-19-616077-00CL) and “C” (CV-19-616779-00CL) to this notice of motion, among other things, approving the Global Notice Plan, approving the Global Claims Administration Costs Framework, and providing for various matters related to the PCC Compensation Plan and Quebec Administration Plan (all as defined below) (collectively, the “**Proposed Order**”); and
- (b) such further and other relief as counsel may advise and which this Honourable Court may deem just.

THE GROUNDS FOR THIS MOTION ARE:

Background

- (a) On March 6, 2025, the Court granted orders (collectively, the “**Sanction Orders**”) sanctioning plans of compromise and arrangement (collectively, the “**CCAA Plans**”) pursuant to the *Companies’ Creditors Arrangement Act* (the

¹ Capitalized terms used in this notice of motion and not otherwise defined herein have the meanings given to them in the Pan-Canadian Claimants’ Compensation Plan (the “**PCC Compensation Plan**”) and in the Quebec Class Action Administration Plan (the “**Quebec Administration Plan**”, and together with the PCC Compensation Plan, the “**Compensation Plans**”), both of which were approved by this Court pursuant to the Sanction Orders, or the Affidavit of Michael O’Connor affirmed August 22, 2025.

“CCAA”) in respect of JTI-Macdonald Corp., Rothmans, Benson & Hedges Inc., and Imperial Tobacco Canada Limited and Imperial Tobacco Company Limited (collectively, the “**Tobacco Companies**”). The CCAA Plans will effect a global settlement of various claims defined as the “Tobacco Claims” against the Tobacco Companies.

- (b) One component of the CCAA Plans is payment of \$4.119 billion to satisfy the judgment granted by the Quebec Superior Court in Court File No. 500-06-000070-983 awarding damages to Quebec residents diagnosed with Compensable Diseases who meet the eligibility criteria of the certified class definition (the “**QCAP Claimants**”, including both “Tobacco-Victim Claimants” and “Succession Claimants” as set out in the Quebec Administration Plan), which will be distributed pursuant to the Quebec Administration Plan.
- (c) Another component of the CCAA Plans is payment of \$2.521 billion to fund the PCC Compensation Plan, which will provide direct payments of compensation to residents of all of the Provinces and Territories of Canada (excluding the QCAP Claimants) who were diagnosed with Compensable Diseases and meet the eligibility criteria to qualify for compensation under the PCC Compensation Plan (the “**PCC Claimants**”), which will be distributed pursuant to the PCC Compensation Plan.
- (d) Pursuant to the PCC Compensation Plan, the Quebec Administration Plan, and the CCAA Plans, Epiq was appointed as the Claims Administrator with various responsibilities as set out in such documents, including designing a notice plan,

providing notice to potential claimants, reviewing and approving or rejecting claims, and distributing compensation to Claimants under both Compensation Plans.

- (e) Epiq's role as Claims Administrator was approved by the Court by Orders dated March 6, 2025 (the "**Sanction Orders**").
- (f) In addition to its role as Claims Administrator, Epiq was also appointed as Agent for the PCC Representative Counsel pursuant to the PCC Compensation Plan (the "**PCC Agent**").
- (g) The CCAA Plans, the PCC Compensation Plan, and the Quebec Administration Plan were sanctioned and approved by the Court in the Sanction Orders.
- (h) Various components of the PCC Compensation Plan and the Quebec Administration Plan are subject to further approval by this Court.
- (i) With certain exceptions, any changes, modifications or revisions to the PCC Compensation Plan and the Quebec Administration Plan are also subject to approval by this Court.

Epiq's Engagement as Claims Administrator and PCC Agent

- (j) Certain aspects of Epiq's appointment as Claims Administrator and PCC Agent, respectively, warrant clarification or modification.
- (k) First, Epiq's appointment as PCC Agent, although referenced in the PCC Compensation Plan, has not been specifically authorized by this Court.

- (l) Second, in connection with Epiq's role as Claims Administrator, the Compensation Plans contemplated Epiq entering into written agreements with the CCAA Plan Administrators, but the Proposed Order removes such requirement.

Approval of Global Notice Plan

- (m) Pursuant to the PCC Compensation Plan and the Quebec Administration Plan, Epiq is responsible for designing the PCC Notice Plan and the *Blais* Notice Plan.
- (n) Epiq is the global leader in class action administration, and has administered large scale notice and claim administration programs in other landmark settlements, including over 100 Canadian settlements.
- (o) Epiq's business unit, Epiq Legal Noticing (a/k/a Hilsoft Notifications), is a recognized leader in legal notice design, with its prior notice experience including the Indian Residential School Settlement and Deepwater Horizon settlement, in both of which Epiq's notice program reached over 95% of their respective target populations.
- (p) In fulfillment of its obligations in the Compensation Plans, Epiq has designed a combined Global Notice Plan with the goal of providing effective notice to all prospective Claimants under both Compensation Plans, which notice is communicated in clear, concise, plain language, so that they fully understand their rights and options, and so that the notices capture attention and reach as many prospective Claimants across Canada as possible to prospective Claimants under

both the PCC Compensation Plan and the Quebec Administration Plan (the “**Global Notice Plan**”).

- (q) Epiq determined that a combined Global Notice Plan would be the most effective way to ensure clarity and consistency of message, reduce confusion among Claimants, and ensure all Claimants understand their potential eligibility for compensation.
- (r) The Global Notice Plan outlines the methods of dissemination of notice, the types of media that will be used to effect notice, and the duration and frequency of publication and/or broadcasting that will be implemented.
- (s) The Global Notice Plan reflects the judgment of Epiq personnel as to how to achieve the goals prescribed by the PCC Compensation Plan and the Quebec Administration Plan in the most effective and efficient manner.
- (t) The Global Notice Plan incorporates flexibility and discretion such that Epiq, in its reasoned judgment and in consultation with the CCAA Plan Administrators, can amend, adjust or add to the steps set out in the Global Notice Plan on an ongoing basis as it evaluates the progress of the Global Notice Plan. Such flexibility is critical to achieving the purpose of the Global Notice Plan, as described in the PCC Compensation Plan and the Quebec Administration Plan.

Amendment of Notices, Forms and Processes

- (u) As part of the Global Notice Plan, Epiq has designed a combined First Notice in accordance with the guidance set out in the PCC Compensation Plan and the Quebec Administration Plan.
- (v) Epiq has also prepared an information circular in respect of each of the Compensation Plans to provide more detailed information about the PCC Compensation Plan and the Quebec Administration Plan to individuals who access Epiq's website or request a copy be sent to them by postal mail or courier.
- (w) The Global Notice Plan attaches other materials developed by Epiq, such as a proposed 30-second video/audio script for broadcast television and radio advertisements, sample banner and social media notices, and a draft Informational Releases to be issued nationwide via Newswire to general media (print and broadcast) outlets, all of which are intended to further the objectives of the Global Notice Plan.
- (x) In addition, Epiq has made certain proposed amendments to the Claim Forms appended to the PCC Compensation Plan and the Quebec Administration Plan, and has also made certain proposed updates to other forms and processes referenced in the Compensation Plans, subject to approval pursuant to the Proposed Order.

- (y) As part of the effort to harmonize the PCC Claims Process and *Blais* Claims Process, Epiq has prepared a Notice of Incomplete PCC Claim which it intends to send to PCC Claimants who provide insufficient information.
- (z) Epiq has also prepared a Notice to Provide Alternative Proof which it intends to send to those PCC Claimants diagnosed in Quebec who choose to authorize Epiq to obtain information from Quebec health databases, but whose information cannot be verified and are required to submit a different form of proof of a Compensable Disease in order to be eligible for compensation.
- (aa) Any updates made to each of these documents from any versions originally included within the Compensation Plans, and any development of additional notices or other forms, have been designed to better promote and achieve the objectives of the Compensation Plans and the Global Notice Plan.
- (bb) The Proposed Order also provides that the checklists appended to the Compensation Plans will be used as directory guides prepared for the convenience of and to assist Epiq in its capacity as Claims Administrator in the electronic claims review and administration system used by it as part of the administration of the Compensation Plans, subject to any amendments and additions made in compliance with the Compensation Plans and/or the Proposed Order.

Future Amendments to Forms and Notices

- (cc) The Proposed Order also further clarifies and expands the provision in the Compensation Plan which allows for revisions to appendices to the Compensation

Plan and applies such provision to attachments to the Global Notice Plan and exhibits to the Affidavit of Michael O'Connor affirmed August 22, 2025, all subject to consultation with the Tobacco Companies, the Administrative Coordinator, the PCC Representative Counsel (for amendments relating to the PCC Compensation Plan) and the Quebec Class Counsel (for amendments relating to the Quebec Administration Plan) prior to making such amendments and compliance with sections 8.2 and 7.2 of the PCC Compensation Plan and Quebec Administration Plan, respectively.

The Global Claims Administration Costs Framework, Annual Budgets, and Reporting

- (dd) The Compensation Plans provide that certain budgets are to be prepared and approvals are to be sought by the Claims Administrator from the Court in connection with the budgeted costs for the Global Notice Plan and the administration of the Claims Process.
- (ee) Epiq has prepared the Global Claims Administration Costs Framework in order to provide a comprehensive overview of estimated projected costs associated with all aspects of Epiq's mandate, including as Claims Administrator and PCC Agent, and including with respect to the Global Notice Plan.
- (ff) The Global Claims Administration Costs Framework is based on Epiq's reasonable assumptions as to how events will transpire. However, the actual costs for Epiq's engagement may vary from those projected.

- (gg) Other than with respect to the Global Notice Plan, Epiq does not seek approval of the specific amounts in the Global Claims Administration Costs Framework at this time and it provides the structure for future budgeting processes.
- (hh) The proposed Order sets forth reporting requirements for Epiq on a weekly basis for the first three calendar month period commencing on and following the Plan Implementation Date (the “**Weekly Reporting Period**”) and on a monthly basis thereafter.
- (ii) The proposed Order also provides that, following the initial Weekly Reporting Period, Epiq will provide a first annual budget for the PCC Claims Administration and the QCAP Claims Administration that is consistent with the format of the Global Claims Administration Costs Framework, informed by the Weekly Reports as defined in the Proposed Order, and covers an estimated forecast for the next twelve calendar month period commencing on the end of the Weekly Reporting Period (defined in the Proposed Order as the “First Annual Global Claims Administration Costs Budget”).
- (jj) Epiq will thereafter provide subsequent annual budgets for each subsequent twelve calendar month period that cover an estimated forecast for the next twelve calendar month period (defined in the Proposed Order as the “Subsequent Annual Global Claims Administration Costs Budgets”).
- (kk) Epiq’s aggregate Costs in its capacities as Claims Administrator and PCC Agent will not surpass the First Annual Global Claims Administration Costs Budget or Subsequent Annual Global Claims Administration Costs Budget, as applicable, by

more than 10% of the total amount of such budget up to and including such year, without prior approval of the CCAA Plan Administrators and further Orders of the CCAA Court and the Quebec Superior Court on motions brought by Epiq.

Payment of Fees, Costs and Expenses

- (ll) The PCC Compensation Plan and the Quebec Administration Plan provide for the payment of Epiq's costs incurred in its capacities as Claims Administrator and PCC Agent, along with its legal and other advisors in each capacity ("Costs") by the Tobacco Companies or the balance of the QCAP Settlement Amount net of the Quebec Class Counsel Fee, as applicable. The Proposed Order incorporates certain specified terms and mechanics for the payment of such Costs, including providing for a 30-day period in which Epiq's submitted invoices will be reviewed and paid along with other terms.

Certain Other Amendments

- (mm) Epiq will require the services of advisors and agents, including legal advisors, to advise and assist it to carry out its duties as Claims Administrator and PCC Agent.
- (nn) Epiq's retention of such advisors is contemplated by the PCC Compensation Plan and the Quebec Administration Plan in sections 15.2 and 14.2, respectively.
- (oo) Certain of Epiq's responsibilities, including distribution of funds pursuant to the PCC Compensation Plan and the Quebec Administration Plan, warrant specific approval by this Court.

- (pp) The proposed Order also includes provisions requested by stakeholders, including certain additional protections for their benefit, a termination provision enabling the CCAA Plan Administrators to terminate the Claims Administrator and/or the PCC Agent by motion to this Court, and reiteration of confidentiality and information management obligations as set forth in the PCC Compensation Plan, the Quebec Administration Plan, and the Quebec Authorization Order.

Other Grounds

- (qq) The Proposed Order is consistent with the requirements of the Compensation Plans and CCAA Plans, both previously approved by this Court.
- (rr) The Proposed Order is appropriate in furtherance of the objectives of the CCAA, the CCAA Plans, the PCC Compensation Plan and the Quebec Administration Plan.
- (ss) Nothing in the Proposed Order is contrary to the public interest or the CCAA.
- (tt) Epiq seeks the relief in the proposed Order to facilitate the administration of the Claims Processes in an effective and efficient manner consistent with the purpose and structure of the Compensation Plans.
- (uu) The provisions of the CCAA, including sections 11, and this Court's equitable and statutory jurisdiction thereunder.

- (vv) Amendments to the PCC Compensation Plan and the Quebec Administration Plan consistent with the relief sought in the Proposed Order are the subject of a separate motion to be filed by the CCAA Plan Administrator.
- (ww) Rules 1.04, 1.05, 2.03, 3.02, 16 and 37 of the Ontario *Rules of Civil Procedure*, R.S.O. 1990, Reg. 194, as amended.
- (xx) Such further and other grounds as counsel may advise and this Honourable Court may permit.

THE FOLLOWING DOCUMENTARY EVIDENCE will be used at the hearing of the Motion:

- (a) the affidavit of Michael O'Connor affirmed August 22, 2025 and the exhibits thereto;
- (b) the Compensation Plans, the CCAA Plans and the Sanction Orders; and
- (c) such further and other materials as counsel may advise and this Honourable Court may permit.

Date: August 22, 2025

GOODMANS LLP

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Lawyers for Epiq Class Actions Services Canada Inc.

**ONTARIO
SUPERIOR COURT OF JUSTICE
(COMMERCIAL LIST)**

Proceeding commenced at Toronto

**NOTICE OF MOTION
(Returnable August 27, 2025)**

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Lawyers for Epiq Class Action Services Canada Inc.

PROTOCOL FOR MOTION BY ZOOM VIDEO CONFERENCE

Scheduling and Specific Requirements

1. Any person on the Service List that wishes to appear virtually on the motion(s) (“**Participants**”) must register by **4:00 p.m. on Monday, August 25th, 2025** for the motion(s) scheduled for **Wednesday, August 27th, 2025**, by emailing Veritext Litigation Solutions Canada, Inc. (scheduling@neesonsreporting.com) and copying each Monitor’s counsel (aperley@dwpv.com, ehyderman@cassels.com, jake.harris@blakes.com). In their email, Participants should provide contact information, including their name, the party they are acting for, their email address and phone number for the counsel slip, along with a statement regarding whether they intend to make submissions.
2. Subject to the Court’s overriding discretion over all matters, Monitors’ counsel will coordinate with Participants and the Court to develop an agenda for the hearing.
3. All material for use on the motion(s) is to be posted on Case Center, as more fully described in Appendix “B”.
4. Participants will appear by video. Veritext will distribute the Zoom link to registered Participants. Participants are not permitted to forward or share the Zoom link. No person should have access to the hearing on Zoom other than Participants. If a Participant is unable to attend by video, they should contact Monitors’ counsel. Participants should carefully review the technical requirements below.
5. Counsel are not required to gown for the hearing.
6. For access by the general public, a YouTube link will be posted on each of the Monitors’ websites by 10:00 a.m. not less than two (2) business days prior to the hearing. The YouTube link will allow the general public to view a livestream of the hearing, but not participate in the hearing. For greater clarity, individuals viewing the livestream via YouTube will not be heard or seen by the Court, Judge or Participants.
7. No recording of any part of the hearing (including audio) may be made unless authorized in advance by the Court.
8. For greater certainty, notice and service requirements are set out in the Rules of Civil Procedure and the various orders and endorsements in the proceedings. For ease of reference, we have included paragraphs 58-63 of the Second Amended and Restated Initial Order dated March 8, 2019 in the JTIM proceedings, attached as Appendix “A”. It should be noted that similar

notice and service requirements have been set out in various orders and endorsements in the parallel proceedings of Imperial and RBH. Nothing in this protocol modifies or amends Orders of the Court related to service requirements, the Rules of Civil Procedure, any Commercial List Practice Direction or other applicable rules.

9. Participants will be placed into a virtual waiting room upon entering the Zoom meeting.

Technical Requirements for Zoom Participants

10. Participants will require a device with a working microphone and camera. The device can be a computer (desktop or laptop), tablet or smartphone. The device must be connected to an internet connection that is sufficient to send and receive video and audio.

11. Each Participant is responsible for ensuring that they have suitable equipment to participate in the hearing and that such equipment works properly. Participants must test such equipment well in advance of the scheduled hearing to ensure:

- (a) that they are familiar with how to use such equipment;
- (b) the compatibility and functioning of such equipment; and
- (c) that the remote location has adequate internet bandwidth to support the use of Zoom without interruption.

12. Each Participant is also responsible for ensuring that they are familiar with the features and operation of Zoom. Participants must ensure that they have downloaded any necessary software, and practiced using Zoom, well in advance of the scheduled hearing.

13. Counsel on Zoom should identify their display name in the following format: [First Name] [Last name], for [Client].

14. Participants should log on using the Zoom link provided approximately 30 minutes before the hearing is scheduled to begin. During this time, Participants should speak to each other to determine if there are any audio/visual/connection issues.

15. It is suggested that Participants use the “gallery view” mode, rather than the “active speaker” mode, available on Zoom.

16. It is suggested that only counsel who are making submissions turn on their cameras during the hearing.

17. Should a Participant become disconnected from Zoom or experience technical difficulties during the hearing, they should immediately inform the Court by sending an email to Veritext Litigation Solutions Canada, Inc. (scheduling@neesonsreporting.com).

18. Further participant information is included in Appendix “B.”

APPENDIX "A"

58. **THIS COURT ORDERS** that, subject to paragraph 59, all motions in this proceeding are to be brought on not less than seven (7) calendar days' notice to all persons on the Service List. Each Notice of Motion shall specify a date (the **"Return Date"**) and time for the hearing.

59. **THIS COURT ORDERS** that motions for relief on an urgent basis need not comply with the notice protocol described herein.

60. **THIS COURT ORDERS** that any interested Person wishing to object to the relief sought in a motion must serve responding motion material or, if they do not intend to file material, a notice in all cases stating the objection to the motion and the grounds for such objection in writing (the **"Responding Material"**) to the moving party, the Applicant and the Monitor, with a copy to all Persons on the Service List, no later than 5 p.m. on the date that is four (4) calendar days prior to the Return Date (the **"Objection Deadline"**).

61. **THIS COURT ORDERS** that, if no Responding Materials are served by the Objection Deadline, the judge having carriage of the motion (the **"Presiding Judge"**) may determine:

- (a) whether a hearing is necessary;
- (b) whether such hearing will be in person, by telephone or by written submissions only; and
- (c) the parties from whom submissions are required

(collectively, the **"Hearing Details"**). In the absence of any such determination, a hearing will be held in the ordinary course.

62. **THIS COURT ORDERS** that, if no Responding Materials are served by the Objection Deadline, the Monitor shall communicate with the Presiding Judge regarding whether a determination has been made by the Presiding Judge concerning the Hearing Details. The Monitor shall thereafter advise the Service List of the Hearing Details and the Monitor shall report upon its dissemination of the Hearing Details to the Court in a timely manner, which may be contained in the Monitor's next report in the proceeding.

63. **THIS COURT ORDERS** that if any party objects to the motion proceeding on the Return Date or believes that the Objection Deadline does not provide sufficient time to respond to the motion, such objecting party shall, promptly upon receipt of the Notice of Motion and in any event prior to the Objection Deadline, contact the moving party and the Monitor (together with the objecting party and any other party who has served Responding Materials, the "**Interested Parties**") to advise of such objection and the reasons therefor. If the Interested Parties are unable to resolve the objection to the timing and schedule for the motion following good faith consultations, the Interested Parties may seek a scheduling appointment before the Presiding Judge to be held prior to the Return Date or on such other date as may be mutually agreed by the Interested Parties or as directed by the Presiding Judge to establish a schedule for the motion. At the scheduling appointment, the Presiding Judge may provide directions including a schedule for the delivery of any further materials and the hearing of the contested motion, and may address such other matters, including interim relief, as the Court may see fit. Notwithstanding the foregoing, the Presiding Judge may require the Interested Parties to proceed with the contested motion on the Return Date or on any other date as may be directed by the Presiding Judge or as may be mutually agreed by the Interested Parties, if otherwise satisfactory to the Presiding Judge.

APPENDIX “B”

1. All Participants will have their microphones muted and may only unmute their own microphones when they are addressing the Court. When parties are not muted, they must avoid making extraneous noise (including for example, typing and shuffling papers) as these noises may interfere with the hearing.
2. Participants must ensure that they participate in the Zoom hearing from a well-lit room so that they are easily visible. Participants must also ensure that no filters are active that may distort or otherwise conceal their appearance.
3. Participants must ensure that they participate in the Zoom hearing from a quiet location where they (and the Court) will not be interrupted or disturbed during the hearing.
4. All mobile devices must be turned off or put on silent mode during the hearing.
5. Participants must refrain from speaking over other Participants.
6. Participants should make submissions in accordance with the order set out in the agenda. If there is a need to make submissions out of sequence, Participants should make a request in a manner directed by the Court. The Court may ask Participants to signal when they intend to address the Court by raising their hand (either by physically raising their hand or by using the virtual “raise hand” feature in Zoom).
7. Participants must state their name and who they represent before addressing the Court.
8. Upon entry into the virtual waiting room, each Participant joining by video should identify themselves, including any person off camera that may be viewing the video feed. This also allows any audio or visual issues to be identified. Each Participant is obligated to immediately notify the presiding judge if any additional person joins them in viewing the video feed.
9. If a Participant intends to rely on any documents, the materials you intend to rely on must be served and shared on the relevant Case Center bundle and all references during the hearing should reference the Case Center page numbering associated with such Case Center bundle.
10. If a party wishes to share certain documents during the hearing, the documents should be provided to the Monitors in advance so that it can be added to the agenda and a method for sharing can be set up.

A

Court File No.: CV-19-615862-00CL

ONTARIO
SUPERIOR COURT OF JUSTICE
(COMMERCIAL LIST)

THE HONOURABLE CHIEF	)	WEDNESDAY, THE 27 TH
	)	
JUSTICE MORAWETZ	)	DAY OF AUGUST, 2025

IN THE MATTER OF THE *COMPANIES' CREDITORS ARRANGEMENT ACT*, R.S.C. 1985,
c. C-36, AS AMENDED

AND IN THE MATTER OF A PLAN OF COMPROMISE
OR ARRANGEMENT OF JTI-MACDONALD CORP.

CLAIMS ADMINISTRATOR ORDER

THIS MOTION, made by Epiq Class Actions Services Canada, Inc. ("**Epiq**") pursuant to the *Companies' Creditors Arrangement Act*, R.S.C. 1985, c. C-36, as amended (the "**CCAA**"), was heard this day by videoconference at 330 University Avenue, Toronto, Ontario.

ON READING Epiq's Motion Record, including the affidavit of Michael O'Connor sworn on August 22, 2025 (the "**O'Connor Affidavit**") and the exhibits thereto, and **[the Thirtieth Report of the Monitor dated August [●], 2025]**, and on hearing submissions of counsel for Epiq, counsel for the Court-Appointed Mediator, counsel for each of the Monitors and CCAA Plan Administrators, counsel for each of the Tobacco Companies, PCC Representative Counsel, Quebec Class Counsel, and counsel for such other parties as were listed on the Participant Information Form and wished to be heard, with no one else appearing although duly served as appears from the certificate of service, filed:

Service and Definitions

1. **THIS COURT ORDERS** that the time for service of the Notice of Motion and the Motion Record is hereby abridged and validated so that this Motion is properly returnable today and hereby dispenses with further service thereof.

2. **THIS COURT ORDERS** that, unless otherwise stated herein, all capitalized terms used herein and not otherwise defined herein shall have the meanings ascribed to them in the CCAA Plans (defined below), the PCC Compensation Plan or the Quebec Administration Plan (each as defined in the Fourth Amended and Restated Court-Appointed Mediator’s and Monitor’s CCAA Plan of Compromise and Arrangement in respect of Imperial Tobacco Canada Limited and Imperial Tobacco Company Limited (collectively, “**Imperial**”) dated February 27, 2025 (the “**Imperial CCAA Plan**”), the Fourth Amended and Restated Court-Appointed Mediator’s and Monitor’s CCAA Plan of Compromise and Arrangement in respect of JTI-Macdonald Corp. (“**JTIM**”) dated February 27, 2025 (the “**JTIM CCAA Plan**”), and the Fourth Amended and Restated Court-Appointed Mediator’s and Monitor’s CCAA Plan of Compromise and Arrangement in respect of Rothmans, Benson & Hedges Inc. (“**RBH**”) dated February 27, 2025 (the “**RBH CCAA Plan**”, and collectively with the Imperial CCAA Plan and the JTIM CCAA Plan, the “**CCAA Plans**”)) or the O’Connor Affidavit, as applicable.

Appointment of the PCC Agent

3. **THIS COURT ORDERS** that, pursuant to Section 18.3 of the PCC Compensation Plan, Epiq is appointed as the agent for the PCC Representative Counsel in respect of the PCC Compensation Plan (the “**PCC Agent**”). The PCC Agent is hereby authorized to communicate with and collaborate with the PCC Representative Counsel.

No Contract between CCAA Plan Administrators and Claims Administrator and/or PCC Agent

4. **THIS COURT ORDERS** that, notwithstanding anything to the contrary in the PCC Compensation Plan, Quebec Administration Plan, CCAA Plans, Sanction Orders or otherwise (including, without limitation, Article 14, Sections 14.4(k)(ii) and 14.4(m)(ii) of the CCAA Plans, Sections 17.2 and 21.3 of the PCC Compensation Plan, and Sections 16.2 and 20.3 of the Quebec Administration Plan), no written agreement regarding the provision of services in respect of the PCC Compensation Plan or the Quebec Administration Plan, or the Costs (defined below) of the Claims Administrator or the PCC Agent, shall be required to be entered into between the CCAA Plan Administrators and the Claims Administrator and/or the PCC Agent. Article 14, Sections 14.4(k)(ii) and 14.4(m)(ii) of the CCAA Plans, Sections 17.2 and 21.3 of the PCC Compensation Plan, and Sections 16.2 and 20.3 of the Quebec Administration Plan are hereby varied to delete any references to a written agreement between the CCAA Plan Administrators and the Claims Administrator.

Approval of Notice Plan

5. **THIS COURT ORDERS** that the notice plan in the form attached hereto as **Schedule “A”** (the “**Global Notice Plan**”) shall constitute the PCC Notice Plan (for purposes of the PCC Compensation Plan) and the *Blais* Notice Plan (for purposes of the Quebec Administration Plan), and that the Global Notice Plan, including the Claims Process as described therein, is hereby approved. For greater certainty, and without limiting the generality of the foregoing, the forms of notices, claim forms and any other forms included as part of the Global Notice Plan are hereby approved for purposes of the PCC Compensation Plan and the Quebec Administration Plan, as

applicable, notwithstanding the forms of the notices, claim forms and any other forms attached as Appendices to the PCC Compensation Plan and Appendices to the Quebec Administration Plan that were approved by the CCAA Court in the Sanction Order.

Amendment of Notices and Forms

6. **THIS COURT ORDERS** that the form of PCC Notice of Incomplete Claim attached as Exhibit “C” to the O’Connor Affidavit and the form of PCC Notice to Provide Alternative Proof attached as Exhibit “D” to the O’Connor Affidavit are hereby approved for purposes of the PCC Compensation Plan.

7. **THIS COURT ORDERS** that, following consultation with each of the Tobacco Companies, the Administrative Coordinator, the PCC Representative Counsel (for amendments relating to the PCC Compensation Plan) and the Quebec Class Counsel (for amendments relating to the Quebec Administration Plan), the Claims Administrator may make amendments to the forms of notices, claim forms and any other forms that are Attachments to the Global Notice Plan, Exhibits to the O’Connor Affidavit, Appendices to the PCC Compensation Plan and/or Appendices to the Quebec Administration Plan, including the preparation of any additional notices or forms required to administer the PCC Compensation Plan and the Quebec Administration Plan, provided that the Claims Administrator complies with Section 8.2 of the PCC Compensation Plan and Section 7.2 of the Quebec Administration Plan. No other changes, modifications or revisions shall be made to the PCC Compensation Plan except in accordance with Section 8.1 thereof, or to the Quebec Administration Plan except in accordance with Section 7.1 thereof.

Purpose and Use of Claims Administrator's Checklists

8. **THIS COURT ORDERS** that, notwithstanding anything to the contrary in the PCC Compensation Plan and the Quebec Administration Plan, the Checklist which is Appendix “H” to the PCC Compensation Plan, and the Proof of Claim Checklist for Tobacco-Victim Claims and the Proof of Claim Checklist for Succession Claims that are respectively Appendices “I” and “J” to the Quebec Administration Plan, are directory guides prepared for the convenience of and to assist the Claims Administrator in the determination of whether a PCC-Claimant meets the PCC Eligibility Criteria to be an Eligible PCC-Claimant who will receive an Individual Payment, or (ii) a Tobacco-Victim Claimant or Succession Claimant meets the *Blais* Eligibility Criteria to be an Eligible *Blais* Class Member who will receive a Compensation Payment.

Approval of Global Claims Administration Costs Framework

9. **THIS COURT ORDERS** that the Global Claims Administration Costs Framework (the “**Global Claims Administration Costs Framework**”) in the form attached hereto as **Schedule “B”** is hereby approved for purposes of both the PCC Compensation Plan (including, for certainty, in respect of Epiq’s roles as Claims Administrator and as PCC Agent) and the Quebec Administration Plan as the framework basis against which the Costs of the PCC Compensation Plan and the Quebec Administration Plan shall be reviewed and assessed in accordance with the provisions of this Order, with such amendments as may be approved by further Order of the CCAA Court, provided that, other than in respect of the Costs set out in the Global Claims Administration Costs Framework with respect to the PCC Notice Plan and the Blais Notice Plan, the Global Claims Administration Costs Framework provides the structure for the future budgeting processes set forth in this Order, and the amounts reflected in the Global Claims

Administration Costs Framework, other than in respect of the Costs with respect to the PCC Notice Plan and the Blais Notice Plan, are not approved under this Order. The Claims Administrator and the PCC Agent shall not be entitled to be paid any of the Costs contemplated in the Global Claims Administration Costs Framework unless such Costs are validly incurred and payable in accordance with the provisions of this Order.

10. **THIS COURT ORDERS** that the Global Claims Administration Costs Framework shall include in respect of each of (i) the claims administration under the PCC Compensation Plan (“**PCC Claims Administration**”), (ii) the claims administration under the Quebec Administration Plan (“**QCAP Claims Administration**”), (iii) the PCC Agent services, (iv) the PCC Notice Plan, (v) the *Blais* Notice Plan and (vi) the pre-CCAA Plan implementation activities relating to the PCC Compensation Plan, as applicable:

- (a) the actual time spent and standard rates charged by the Claims Administrator and the PCC Agent in connection with all work done up to August 15, 2025, and the estimated time that will be spent and standard rates that will be charged up to the Plan Implementation Date;
- (b) a forecast of the estimated time that will be incurred and standard rates to be charged by the Claims Administrator and the PCC Agent; and
- (c) an estimate of the number of claims to be reviewed during the PCC Claims Submission Period and the *Blais* Claims Submission Period.

11. **THIS COURT ORDERS** that, during the first three calendar months commencing on and following the Plan Implementation Date (“**Weekly Reporting Period**”), the Claims

Administrator and the PCC Agent shall provide to the CCAA Plan Administrators, on a weekly basis, to be received within four Business Days from the end of each week, and as circumstances warrant at any other times during the Weekly Reporting Period as requested by the CCAA Plan Administrators in their discretion, or as the CCAA Court directs, the following reports in writing (collectively, “**Weekly Reports**”), in each case based on the information available at such time:

- (a) a report (“**Weekly Actual Costs Report**”) setting out the actual costs incurred, including actual time spent and hourly rates applied, and expenditures made by the Claims Administrator and the PCC Agent during the immediately prior week on account of the following activities, as applicable, in regard to each of the PCC Claims Administration, QCAP Claims Administration, PCC Agent, PCC Notice Plan and *Blais* Notice Plan:

- (i) paid media noticing;
- (ii) initial and non-recurring items;
- (iii) print and mail operations;
- (iv) project and escalation management and noticing;
- (v) technology management;
- (vi) Contact Centre; and
- (vii) claims operation services,

accompanied by an explanation of all variances between the actual costs and expenditures for the immediately prior week and the actual costs and expenditures for the week upon which the Weekly Reports are based;

- (b) a report (“**Weekly Claims Administration Report**”) setting out in respect of the week upon which the Weekly Reports are based for each of the PCC Compensation Plan and the Quebec Administration Plan, the particulars regarding (i) the number of claims received, (ii) the number of claims reviewed, (iii) the number of incomplete claims awaiting submission of further information, (iv) the number of claims approved, (v) the number of claims rejected, (vi) the number of rejected claims that are in the process of being reviewed by the Review Officer, and (vii) the overall status of the claims administration process; and
- (c) a report (“**Weekly Events Report**”) in respect of the week upon which the Weekly Reports are based identifying and explaining any unusual, unexpected or inexplicable events that occurred and/or out of the ordinary trends that were observed in the PCC Claims Administration and the QCAP Claims Administration to enable the Claims Administrator and/or the PCC Agent, as applicable, to take prompt steps to correct any issues, problems, errors and/or mistakes in the claims administration processes as soon as possible.

12. **THIS COURT ORDERS** that, commencing upon the end of the Weekly Reporting Period and continuing for the duration of the PCC Claims Administration and the QCAP Claims Administration (“**Monthly Reporting Period**”), the Claims Administrator and the PCC Agent shall provide to the CCAA Plan Administrators, on a monthly basis, to be received within five Business Days from the end of each month, and as circumstances warrant at any other times during the Monthly Reporting Period as requested by the CCAA Plan Administrators in their discretion, or as the CCAA Court directs, the following reports in writing (collectively, “**Monthly Reports**”), in each case based on the information available at such time:

- (a) a report (“**Monthly Actual Costs Report**”) setting out the actual costs incurred, including actual time spent and hourly rates applied, and expenditures made by the Claims Administrator and the PCC Agent during the immediately prior month on account of the activities enumerated in subparagraphs 11(a)(i) to 11(a)(vii) of this Order, as applicable, in regard to each of the PCC Claims Administration, QCAP Claims Administration, PCC Agent, PCC Notice Plan and *Blais* Notice Plan, accompanied by an explanation of all variances between the actual costs and expenditures for the immediately prior month and the actual costs and expenditures for the month upon which the Monthly Reports are based;
- (b) a report (“**Monthly Claims Administration Report**”) setting out in respect of the month upon which the Monthly Reports are based for each of the PCC Compensation Plan and the Quebec Administration Plan the particulars regarding (i) the number of claims received, (ii) the number of claims reviewed, (iii) the number of incomplete claims awaiting submission of further information, (iv) the number of claims approved, (v) the number of claims rejected, (vi) the number of rejected claims that are in the process of being reviewed by the Review Officer, and (vii) the overall status of the claims administration process; and
- (c) a report (“**Monthly Events Report**”) in respect of the month upon which the Monthly Reports are based identifying and explaining any unusual, unexpected or inexplicable events that occurred and/or out of the ordinary trends that were observed in the PCC Claims Administration and the QCAP Claims Administration to enable the Claims Administrator and/or the PCC Agent, as

applicable, to take prompt steps to correct any issues, problems, errors and/or mistakes in the claims administration processes as soon as possible.

13. **THE COURT ORDERS** that, as the PCC Claims Administration and the QCAP Claims Administration progress, the CCAA Plan Administrators may, in their discretion if they deem it to be necessary and appropriate, direct that the Weekly Reporting Period shall be extended for a period longer than the first three calendar months following the Plan Implementation Date.

14. **THIS COURT ORDERS** that the Claims Administrator and the PCC Agent shall provide copies of their Weekly Reports and their Monthly Reports to the Tobacco Companies, Court-Appointed Mediator, Administrative Coordinator, PCC Representative Counsel and Quebec Class Counsel concurrently when such reports are provided to the CCAA Plan Administrators. The CCAA Plan Administrators shall file copies of all the Weekly Reports and Monthly Reports with the CCAA Court provided, however, that Epiq may redact from the public copies of such reports filed with the CCAA Court any confidential or commercially sensitive information.

15. **THIS COURT ORDERS** that, for greater certainty, the reporting obligations set forth in paragraphs 11 to 14 of this Order do not replace any of the reporting obligations of the Claims Administrator set forth in the PCC Compensation Plan and the Quebec Administration Plan.

16. **THIS COURT ORDERS** that, within fifteen calendar days following the end of the Weekly Reporting Period, the Claims Administrator and PCC Agent shall provide to the CCAA Plan Administrators, with copies to the Tobacco Companies, Court-Appointed Mediator, Administrative Coordinator, PCC Representative Counsel and Quebec Class Counsel: (i) a budget for the PCC Claims Administration, and (ii) a budget for the QCAP Claims

Administration (collectively, the “**First Annual Global Claims Administration Costs Budget**”) that: (a) are consistent with the format of the Global Claims Administration Costs Framework, (b) include estimates in respect of (1) professional fees, costs and expenses of all legal or other advisors to Epiq, and (2) the applicable taxes, fees, duties or charges owed to a Governmental Authority, whether incurred by Epiq, its legal or other advisors, and/or its providers of associated services, (c) are informed by the Weekly Actual Costs Reports, Weekly Claims Administration Reports and Weekly Events Reports, and (d) cover the next twelve calendar month period commencing on the end of the Weekly Reporting Period. Notwithstanding anything to the contrary in Section 56.3 of the PCC Compensation Plan and Section 57.3 of the Quebec Administration Plan, within forty-five calendar days following the end of the Weekly Reporting Period, the Claims Administrator and the PCC Agent shall submit the First Annual Global Claims Administration Costs Budget to the CCAA Court and the Quebec Superior Court for joint approval. Epiq may redact from the public copies of the First Annual Global Claims Administration Costs Budget filed with the CCAA Court and Quebec Superior Court any confidential or commercially sensitive information.

17. **THIS COURT ORDERS** that, for each subsequent twelve calendar month period following the end of the twelve calendar month period covered by the First Annual Global Claims Administration Costs Budget until the PCC Claims Administration and the QCAP Claims Administration, respectively, are complete, the Claims Administrator and the PCC Agent shall provide to the CCAA Plan Administrators, concurrently with copies provided to the Tobacco Companies, Court-Appointed Mediator, Administrative Coordinator, PCC Representative Counsel and Quebec Class Counsel: (i) a budget for the PCC Claims Administration and (ii) a budget for the QCAP Claims Administration of the Quebec Administration Plan (collectively,

“**Subsequent Annual Global Claims Administration Costs Budget**”) that cover the next twelve calendar month period. Notwithstanding anything to the contrary in Section 56.3 of the PCC Compensation Plan and Section 57.3 of the Quebec Administration Plan, within forty-five calendar days following the end of the previous twelve calendar month period, the Claims Administrator and the PCC Agent shall submit the Subsequent Annual Global Claims Administration Costs Budget to the CCAA Court and the Quebec Superior Court for joint approval. Epiq may redact from the public copies of the Subsequent Annual Global Claims Administration Costs Budgets filed with the CCAA Court and Quebec Superior Court any confidential or commercially sensitive information. The Subsequent Annual Global Claims Administration Costs Budgets shall be consistent with the format of the Global Claims Administration Costs Framework and the First Annual Global Claims Administration Costs Budget, and shall be provided by the Claims Administrator and the PCC Agent thirty calendar days in advance of the end of the current twelve calendar month period.

18. **THIS COURT ORDERS** that, notwithstanding anything to the contrary in Sections 17.2 and 21.3 of the PCC Compensation Plan and Sections 16.2 and 20.3 of the Quebec Administration Plan, in respect of each year until the PCC Claims Administration and the QCAP Claims Administration are complete, the aggregate Costs (defined below) of Epiq in its capacities as the Claims Administrator and the PCC Agent up to and including such year shall not exceed (i) by more than 10% of the total amount of the First Annual Global Claims Administration Costs Budget up to and including such year, or (ii) by more than 10% of the total amount of any Subsequent Annual Global Claims Administration Costs Budget up to and including such year, without prior approval of the CCAA Plan Administrators and further Orders of the CCAA Court

and the Quebec Superior Court on motions brought by Epiq seeking approval of such increase in Costs (defined below).

Confidentiality and Information Management

19. **THIS COURT ORDERS** that the Claims Administrator shall comply with all of its duties and responsibilities set forth in Sections 57.1 to 57.6 and Sections 58.1 and 58.2 of the PCC Compensation Plan in regard to the receipt, storage, disclosure, retention and destruction of all Personal Information and documentation provided to the Claims Administrator in connection with the Claim Packages submitted by PCC-Claimants and PCC-Claimants' Legal Representatives. The PCC Agent shall also comply with Sections 57.1 to 57.6 and Sections 58.1 and 58.2 of the PCC Compensation Plan. The Claims Administrator and the PCC Agent shall comply with the Official Confirmations of Diagnoses Order.

20. **THIS COURT ORDERS** that the Claims Administrator shall comply with all of the duties and responsibilities set forth in Sections 58.1 to 58.6 and Sections 59.1 and 59.2 of the Quebec Administration Plan in regard to the receipt, storage, disclosure, retention and destruction of all Personal Information and documentation provided to the Claims Administrator in connection with the Proofs of Claim submitted by Tobacco-Victim Claimants and Succession Claimants. Raymond Chabot (Proactio) shall also comply with Sections 57.1 to 57.6 and Sections 58.1 and 58.2 of the Quebec Administration Plan. The Claims Administrator and Raymond Chabot (Proactio) shall comply with the Official Confirmations of Diagnoses Order.

Payment of Fees, Costs and Expenses

21. **THIS COURT ORDERS** that, subject to paragraph 18 of this Order, each of the Claims Administrator and the PCC Agent, and their respective legal and other advisors, shall be paid their reasonable professional fees, other fees, costs, disbursements, expenses, Court costs and other expenditures, and all applicable Sales and Excise Taxes, directly incurred in relation to the carrying out of their duties and responsibilities as the Claims Administrator and the PCC Agent or the advisors thereto, as applicable (collectively, “**Costs**”), in each case at their standard rates and charges, which (i) if incurred in the period prior to the Plan Implementation Date, are consistent with the Global Claims Administration Costs Framework, (ii) are incurred during the Weekly Reporting Period, or (iii) if incurred following the Weekly Reporting Period, are consistent with, as applicable, the Global Claims Administration Costs Framework, the First Annual Global Claims Administration Costs Budget and any Subsequent Annual Global Claims Administration Costs Budgets.

22. **THIS COURT ORDERS** that, subject to paragraphs 18 and 21 of this Order, the Tobacco Companies are directed to pay directly to Epiq the following reasonable Costs, and such payments shall not be deducted from the PCC Compensation Plan Amount or from the QCAP Settlement Amount, as applicable:

- (a) all Costs incurred by the Claims Administrator in connection with the administration of the PCC Compensation Plan;
- (b) all Costs incurred by the PCC Agent in connection with the administration of the PCC Compensation Plan;

- (c) all Costs associated with the PCC Notice Plan; and
- (d) all Costs associated with the *Blais* Notice Plan,

in each case within thirty calendar days of the issuance of any invoice by Epiq in respect thereof, provided that: (x) Epiq has been set up as a vendor in each of the Tobacco Companies' accounting systems, and (y) such invoice of Epiq, as well as the invoices rendered by all legal and other advisors of Epiq, have been approved by the CCAA Plan Administrators. The invoices of Epiq's legal advisors may be redacted for solicitor-client privilege before they are submitted to the CCAA Plan Administrators for review and approval. The Tobacco Companies shall pre-fund within thirty calendar days of Epiq's presentment of a reasonable written estimate of any: (a) paid media insertion orders planned to be placed by Epiq during the subsequent thirty calendar day period; or (b) postage for mailings of 25,000 pieces or more that are expected to occur during the subsequent thirty calendar day period. Amounts that remain unpaid following the date that is thirty calendar days after the issuance of an invoice by Epiq (provided that the conditions in (x) and (y) above have been met) shall be subject to an interest charge of 0.5% per month. All such Costs shall be paid by the Tobacco Companies in equal parts. The liability of the Tobacco Companies for their respective share of the Costs shall be several and not joint and several.

23. **THIS COURT ORDERS** that, subject to paragraphs 18 and 21 of this Order, the reasonable Costs of the Claims Administrator incurred in connection with the administration of the Quebec Administration Plan, other than the Costs associated with the Blais Notice Plan (which shall be paid by the Tobacco Companies pursuant to paragraph 22(d) of this Order), shall be paid to Epiq from the balance of the QCAP Settlement Amount net of the Quebec Class Counsel Fee. The CCAA Plan Administrators shall direct the trustee of the QCAP Trust Account

(the “**Trustee**”) to pay, and the Trustee shall pay from the QCAP Trust Account, all Costs of the Claims Administrator incurred in connection with the administration of the Quebec Administration Plan within thirty calendar days of the issuance of any invoice by Epiq in respect thereof, provided that such invoice of Epiq, as well as the invoices rendered by all legal and other advisors of Epiq, have been approved first by the Quebec Class Counsel and then by CCAA Plan Administrators. The invoices of Epiq’s legal advisors may be redacted for solicitor-client privilege before they are submitted to the Quebec Class Counsel and to the CCAA Plan Administrators for review and approval. Amounts that remain unpaid following the date that is thirty calendar days after the issuance of an invoice by Epiq shall be subject to an interest charge of 0.5% per month.

24. **THIS COURT ORDERS** that, for greater certainty, the PCC Compensation Plan Reserve Costs shall include the Costs of the services which the PCC Agent, including its legal and other advisors, provides in relation to the PCC Compensation Plan, and Epiq, in its capacity as PCC Agent, shall also be entitled to the benefit of the PCC Compensation Plan Reserve. Paragraphs 21 and 23 of the Sanction Order shall be interpreted to include the foregoing Order.

Advisors to Claims Administrator and PCC Agent

25. **THIS COURT ORDERS** that the Claims Administrator and the PCC Agent may, in their discretion, retain any legal or other advisors, to advise and assist them in carrying out their respective duties in relation to the PCC Compensation Plan and the Quebec Administration Plan, as applicable.

Distributions by Claims Administrator

26. **THIS COURT ORDERS** that the Claims Administrator is hereby authorized to distribute (i) Individual Payments to Eligible PCC Claimants pursuant to and in accordance with the procedures and process set forth in Sections 49.1, 49.2, 51.1, 52.1, 53.1, 53.2, 53.3, 53.4, 53.5, 55.1 and 55.2 of the PCC Compensation Plan, and (ii) Compensation Payments to Eligible Blais Class Members pursuant to and in accordance with the procedures and process set forth in Sections 50.1, 50.2, 52.1, 53.1, 54.1, 54.2, 54.3, 54.4, 54.5, 56.1 and 56.2 of the Quebec Administration Plan.

Liability - Variation of Sanction Order and relating to PCC Representative Counsel, Court-Appointed Mediator, Monitors, CCAA Plan Administrators and Administrative Coordinator

27. **THIS COURT ORDERS** that the Sanction Order is hereby varied to delete Section 27 thereof.

28. **THIS COURT ORDERS** that, for greater certainty and without limiting any other protections available to the PCC Representative Counsel pursuant to (i) paragraph 9 of the Amended and Restated Orders re Appointment of PCC Representative Counsel dated November 22, 2024, or (ii) any other Order of the CCAA Court, the PCC Representative Counsel shall not be liable, including vicariously liable, for any act or omission of the PCC Agent in connection with the PCC Agent's duties under this Order, the PCC Compensation Plan, the CCAA Plans, or any other court Order, or in regard to any other matter whatsoever. For further certainty, although Epiq is appointed as the PCC Agent for the PCC Representative Counsel pursuant to Section 18.3 of the PCC Compensation Plan and paragraph 3 of this Order, the PCC Agent operates

independently and is solely responsible for the performance of its duties, and no other Person shall be held responsible for Epiq's acts and omissions.

29. **THIS COURT ORDERS** that, for greater certainty and without limiting any other protections available to the Court-Appointed Mediator, Monitors, CCAA Plan Administrators and Administrative Coordinator pursuant to (i) paragraphs 28 and 38-52 inclusive of the Sanction Order, (ii) paragraphs 5, 6 and 28-33 inclusive of the CCAA Plan Administrator Appointment Order, (iii) Article 18, Sections 18.1.4, 18.1.5, 18.1.6, 18.1.8, 18.1.9 and 18.1.11 of the JTIM CCAA Plan, or (iv) any other court Order, the Court-Appointed Mediator, Monitors, CCAA Plan Administrators and Administrative Coordinator shall not be liable, including vicariously liable, for any acts or omissions of Epiq in its capacities as Claims Administrator and PCC Agent, or in regard to any other matter whatsoever. Epiq in its capacities as the Claims Administrator and the PCC Agent operates independently and is solely responsible for the performance of its duties, and no other Person shall be held responsible for Epiq's acts and omissions.

Termination of Engagement

30. **THIS COURT ORDERS** that, notwithstanding anything to the contrary in the PCC Compensation Plan, the Quebec Administration Plan, the CCAA Plans, the Sanction Orders or otherwise, and subject to the approval of the CCAA Court, the engagement of the Claims Administrator and/or the PCC Agent may be terminated by the CCAA Plan Administrators upon at least thirty calendar days' prior written notice delivered by the CCAA Plan Administrators to Epiq. For certainty, Epiq's rights to oppose any such motion and relief are fully reserved.

31. **THIS COURT ORDERS** that upon the effective date of such termination of its engagement, Epiq shall take all steps requested by the CCAA Plan Administrators and/or directed

by the CCAA Court to effect the transfer of the role of Claims Administrator and/or PCC Agent, as applicable, to an alternative service provider or providers, including but not limited to the transfer of:

- (a) all Claim Packages received in respect of the PCC Compensation Plan;
- (b) all Proofs of Claim received in respect of the Quebec Administration Plan;
- (c) all completed assessments of Claim Packages submitted by PCC-Claimants and Legal Representatives;
- (d) all completed assessments of Proofs of Claims submitted by Tobacco-Victim Claimants and Succession Claimants;
- (e) all communications received from or transmitted to PCC-Claimants, Legal Representatives, Tobacco-Victim Claimants and Succession Claimants;
- (f) all information supporting claims, including medical data, proofs of diagnoses and Official Confirmations in Epiq's possession or control;
- (g) all reports or analyses performed by any of Epiq's advisors in connection with the PCC Compensation Plan or Quebec Administration Plan;
- (h) all information and approvals required to transfer or assign the bank accounts used by the Claims Administrator to distribute funds to PCC-Claimants, Tobacco-Victim Claimants and Succession Claimants; and
- (i) all other documents, information and data pertaining to the PCC Compensation Plan and Quebec Administration Plan.

General

32. **THIS COURT ORDERS** that in the event of a conflict between (i) this Order, (ii) the Sanction Order and (iii) the JTIM CCAA Plan, including the PCC Compensation Plan and the Quebec Administration Plan, the terms of this Order shall govern.

33. **THIS COURT ORDERS** that the Claims Administrator may seek directions in respect of a matter relating to the Quebec Administration Plan jointly from the CCAA Court and the Quebec Superior Court in accordance with the procedure set forth in Sections 11.2.1, 11.2.2.6, 11.2.3.3, 12.1.1, 12.1.2 and 12.1.3 of the Quebec Administration Plan. The Claims Administrator may seek directions in respect of a matter relating to the PCC Compensation Plan from the CCAA Court in accordance with the procedure set forth in Sections 12.2.1, 12.2.2.6, 13.1.1, 13.1.2 and 13.1.3 of the PCC Compensation Plan.

34. **THIS COURT ORDERS** that this Order shall have full force and effect in all provinces and territories in Canada, outside Canada and against all Persons against whom it may be enforceable.

35. **THIS COURT REQUESTS** the aid and recognition of any court, tribunal, judicial, regulatory or administrative body having jurisdiction in Canada, the United States or elsewhere to give effect to this Order, and to assist Epiq and the CCAA Plan Administrators and their respective agents in carrying out the terms of this Order. All courts, tribunals, judicial, regulatory and administrative bodies are hereby respectfully requested to make such orders and to provide such assistance to Epiq and the CCAA Plan Administrators as may be necessary or desirable to give effect to this Order or to assist Epiq and the CCAA Plan Administrators and their respective agents in carrying out the terms of this Order.

36. **THIS COURT ORDERS** that Epiq, the CCAA Plan Administrators or the Foreign Representative shall be at liberty and are hereby authorized and empowered to apply to any court, tribunal, regulatory or administrative body, wherever located, for the recognition of this Order and for the assistance in carrying out the terms of this Order and/or to confirm this Order as binding and effective in any appropriate foreign jurisdiction, including in the Chapter 15 Proceedings.

37. **THIS COURT ORDERS** that this Order and all of its provisions are enforceable and effective as of the Plan Implementation Date, without the need for entry or filing.

Chief Justice Geoffrey B. Morawetz

ONTARIO	
SUPERIOR COURT OF JUSTICE- COMMERCIAL LIST	
Proceeding commenced at Toronto	
ORDER	
GOODMANS LLP Barristers & Solicitors 333 Bay Street, Suite 3400 Toronto, ON M5H 2S7	
Robert J. Chadwick LSO#: 35165K rchadwick@goodmans.ca Caroline Descours LSO#: 58251A cdescours@goodmans.ca Bradley Wiffen LSO#: 64279L bwiffen@goodmans.ca Josh Sloan LSO#: 90581H jsloan@goodmans.ca	
Tel: (416) 979-2211	
Lawyers for Epiq Class Actions Services Canada, Inc.	

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EXHIBIT 1

Notice Plan

This Notice Plan describes the Claims Administrator’s plan for disseminating communication regarding the Compensation Plans to prospective Compensation Plan claimants starting on the date on which PCC and QCAP compensation claims may first be submitted to the Claims Administrator and ending on the respective claim application deadlines. The Notice Plan shall only commence following the CCAA Plans becoming effective.

Court Ordered Requirements

The PCC Compensation Plan and the Quebec Administration Plan, which were approved by the Sanction Orders issued by the CCAA Court on March 6, 2025, include the following provisions:

PCC COMPENSATION PLAN	QUEBEC ADMINISTRATION PLAN
19.1 The Claims Administrator will design the PCC Notice Plan which must effectively reach prospective PCC-Claimants and capture their attention with notices communicated in clear, concise, plain language so that they fully understand their rights and options (“PCC Notices”). The PCC Notice Plan may include communications in newspapers, other print media, television, radio, social media, other digital media and direct communications where appropriate in order to reach as many prospective PCC-Claimants across Canada as possible. The PCC Notice Plan shall be subject to CCAA Court approval. 19.2 The Claims Administrator shall implement and manage the PCC Notice Plan pursuant to which prospective PCC-Claimants will be informed about the PCC Compensation Plan and be provided with ongoing notice throughout the PCC Claims Submission Period.	18.1 The Claims Administrator will design the <i>Blais</i> Notice Plan which must effectively reach prospective Tobacco-Victim Claimants and Succession Claimants and capture their attention with notices communicated in clear, concise, plain language so that they fully understand their rights and options (“Blais Notices”). The <i>Blais</i> Notice Plan may include communications in newspapers, other print media, television, radio, social media, other digital media and direct communications where appropriate in order to reach as many prospective Tobacco-Victim Claimants and Succession Claimants in Quebec as possible. The <i>Blais</i> Notice Plan shall be subject to CCAA Court approval. 18.2 The Claims Administrator shall implement and manage the <i>Blais</i> Notice Plan pursuant to which prospective Tobacco-Victim Claimants and Succession Claimants will be informed about the Quebec Administration Plan and be provided with ongoing notice throughout the <i>Blais</i> Claims Submission Period.

The Claims Administrator has designed this Notice Plan in accordance with the foregoing provisions. Following consultation with each of the Tobacco Companies, the Administrative Coordinator, the PCC Representative Counsel (for amendments relating to the PCC Compensation Plan) and the Quebec Class Counsel (for amendments relating to the Quebec Administration Plan), the Claims Administrator shall have the discretion to amend or adjust the steps set out in this Notice Plan, or to adopt such other steps that, in its reasonable judgment, are expected to better

achieve the purpose of the Notice Plan, as described in the PCC Compensation Plan and the Quebec Administration Plan.

Notice Plan Objectives

The Notice Plan was designed by the Claims Administrator with the goal of providing effective notice to prospective PCC-Claimants and prospective Tobacco-Victim Claimants and Succession Claimants and capturing their attention. In designing the Notice Plan, the Claims Administrator has taken into account the demographics of the target audiences described below, and the manner in which the target audiences consume media.

The Notice Plan is intended to provide effective notice to potential claimants, whether they live in large urban centres, small towns, rural or remote areas, and it reflects the Claims Administrator's expert opinion regarding the best methods of achieving that goal.

The Notice Plan involves a mix of direct communication via email and postal mail, as well as advertisements in newspapers, magazines, television, radio, streaming audio/video services, Internet banners, social media placements, sponsored search listings and an informational release. The Notice Plan also incorporates a specific Indigenous focus via publications, television, radio and digital properties serving these communities.

It is estimated that implementation of the Notice Plan will involve at least 17,000 paid media spots and more than 880 million internet impressions over the course of a two-year campaign. These anticipated figures do not include additional notice appearances resulting from the Public Service Announcement (PSA) campaign; sponsored listings on *Google*, *Bing* and other search engines; and any potential news articles or postings of the Notice resulting from the issuance of the information release, as each described herein.

The Claims Administrator estimates that the Notice Plan will reach more than 90% of the target audience, with an average frequency of exposure of five+ times.

Notice Plan Timeline

The Notice Plan will be implemented in phases over a two-year period. This phased approach is expected to be more effective in that it:

- Allows messaging to be visible through the life of the Notice Plan, ensures consistent messaging over the course of the Plan, and minimizes the risk of overexposure which can lead potential claimants to ignore the messaging being conveyed;
- Builds frequency of views, with potential claimants being repeatedly exposed to the Notice over a period of weeks and months;
- Provides reminder messaging for those who may have seen the Notice but have subsequently forgotten it;
- Allows the Notice content to evolve as needed to account for approaching Claim deadlines and other key touchpoints; and
- Provides the opportunity to adjust the placement of advertisements or the type of communication being used depending on response rates.

The timeline below shows the phases of advertising proposed for the first and second year of the Notice Plan. The specific timing and the choice of media will be evaluated on a rolling basis and

will be adjusted if needed in the discretion of the Claims Administrator, e.g., to account for seasonal or societal events such as December holidays or election campaigns, or in reaction to the nature, number and timing of responses received from potential claimants across the country. The proposed advertising phases aim to have continual and even coverage over the course of the Notice Plan while also ensuring a final push leading up to the Claim deadlines for both the QCAP and PCC Compensation Plans.

The estimates provided for in the Notice Plan relating to the paid media program are premised on current expectations of the Claims Administrator for the entire Notice Plan program. The implementation of the Notice Plan will provide the opportunity to review actual future results on a month to month basis, including the analysis and review of claims received and whether certain geographic areas are underrepresented or overrepresented and need higher or lower levels of paid media coverage. In the event the projected claims response rate exceeds expectations as the Notice Plan progresses, less paid media may be appropriate. Specific media choices will also vary and be driven based on the data gathered from time to time. The Notice Plan may be modified from time to time to address such matters.

Notice Plan Timeline												
Year 1 (PCC & QCAP)												
Months 1-7 (Notice Launch)							Months 8-10 (PCC Continuation & QCAP Deadline)					
Month 1	Month 2	Month 3	Month 4	Month 5	Month 6	Month 7	Month 8	Month 9	Month 10	Month 11	Month 12	
Sponsored Search	Search Ads						Search Ads					
Digital Banners	Banner Ads				Banner Ads		Banner Ads					Banner Ads
Digital Audio/Video		Digital Audio/Video			Digital Audio/Video		Digital Audio/Video					Digital A/V
General Newspapers (PCC & QCAP)		Gen. Newspapers					Gen. Newspapers					
Indigenous Print		Indigenous Print										
National Magazines		National Magazines										
Broadcast/Cable Television					TV			TV			TV	
Indigenous TV (APTN & CBC North)					TV			TV			TV	
Broadcast/Major Metro Radio					Radio			Radio			Radio	
Indigenous Radio					Radio			Radio			Radio	

Year 2 (PCC)												
Months 13-17 (PCC Continuation Plan)						Months 19-22 (PCC Deadline Reminder)						
Month 13	Month 14	Month 15	Month 16	Month 17	Month 18	Month 19	Month 20	Month 21	Month 22	Month 23	Month 24	
Sponsored Search	Search Ads					Search Ads						
Digital Banners	Banner Ads			Banner Ads			Banner Ads			Banner Ads		Banner Ads
Digital Audio/Video	Digital Audio/Video			Digital Audio/Video			Digital A/V			Digital A/V		Digital A/V
General Newspapers (PCC Only)	Gen. Newspapers						Gen. News					
Indigenous Print	Indigenous Print											
National Magazines	National Magazines											
Broadcast/Cable Television		TV					TV			TV		
Indigenous TV (APTN & CBC North)		TV					TV			TV		
Broadcast/Major Metro Radio		Radio					Radio			Radio		
Indigenous Radio		Radio					Radio			Radio		

Paid Media Target Audiences

The Notice Plan was designed to reach all potential claimants, with a focus on two distinct target audiences: smokers who have been diagnosed with Lung Cancer, Throat Cancer, Emphysema, or COPD (GOLD Grade III or IV); and the estates of smokers who were alive on March 8, 2019, but have since died. The Notice Plan has also been designed to reflect the fact that, in some instances, children or other younger family members may be assisting with the care of a potential claimant and as such, notice should be targeted to these individuals as well.

The Claims Administrator has reviewed and analyzed applicable data from reliable sources regarding the media use of the target audiences. That analysis has informed the preparation of this Notice Plan and includes the following.

Primary Target Audience (Smokers): Potential claimants include individuals who smoked Twelve Pack-Years between 1950 and 1998. Given this range, such persons would now range approximately between ages 50 and 89.

The Claims Administrator considered the demographics and media habits of adults aged 50+. According to Vividata's Study of the Canadian Consumer¹ ("Vividata"), among this group:

- 47% are men;
- 53% are women;
- 19% speak French most often at home;
- 70% watched TV yesterday;
- 82% watched TV last week;
- 57% listen to conventional radio;
- 33% are medium to heavy readers of magazines;
- 70% are medium to heavy users of internet; and
- 51% read through any newspaper in the past week.

The Claims Administrator also considered the demographics and media habits of current smokers to understand the media habits of the primary target audience. While smokers as a group skew more heavily male than all adults age 50+, the data shows that their respective media use does not differ in any significant way.

According to Statista² data, 3.8 million Canadians currently smoke daily or occasionally. Additional data from Vividata indicates that of adults who smoke daily:

- 59% are men;
- 41% are women;
- 17% speak French most often at home;
- 68% watched TV yesterday;
- 84% watched TV last week;
- 46% listen to conventional radio;
- 38% are medium to heavy readers of magazines;
- 74% are medium to heavy users of internet; and
- 49% read through any newspaper in the past week.

The foregoing statistics support a conclusion that the primary target audience (i.e., smokers over the age of 50 who meet the requisite diagnostic criteria) have a strong affinity for TV viewing, listening to conventional radio, using the Internet, and reading newspapers.

Secondary Target Audience (Smokers' Estates): This target audience is anticipated to be demographically diverse. Spouses would likely fall into the older demographic of adults aged 50+ as mentioned above. Children or grandchildren could fall in any age group over the age of 18, although, based on the ages of smokers within the primary target audience, the Claims

¹ Vividata is the leader in Canadian media and consumer research. Vividata's Survey of the Canadian Consumer, the largest syndicated study in Canada, is a leading source for demographics, psychographics, lifestyle, life events, media, purchasing and brand preferences in Canada. As the provider of print and digital audience, Vividata offers trusted, world-class audience metrics. The not-for-profit company has been around for over 40 years and is relied on by leaders in the Canadian media industry.

² Statista, founded in 2007, is a leading provider of worldwide market and consumer data and is trusted by thousands of companies around the world for data. Statista.com consolidates statistical data on over 80,000 topics from more than 22,500 sources and makes it available in German, English, French and Spanish.

Administrator would expect the majority of individuals handling the estates of claimants to be aged 35+.

Combined First Notice Publication Design

Because a reader of the First Notice could be eligible under either the QCAP or PCC Compensation Plan or both, the Claims Administrator has designed a combined First Notice. The proposed combined First Notice is attached hereto as **Attachment A**, and has been prepared in accordance with the guidance set out in the version of the First Notice attached as Appendix “A” to the Quebec Administration Plan and the PCC Compensation Plan.

The combined First Notice features a bold headline to immediately alert even a casual reader who may be affected that they should read the notice. The headline speaks directly to the potential claimant.

The design of the combined First Notice alerts readers to its legal significance and credibility, including through the use of a Tobacco Claims Canada logo that is prominently placed at the top of the Notice. This design ensures that readers know the communication contains important information and is not commercial advertising. For publications that accept colour placements, the Tobacco Claims Canada logo will appear in the selected maroon shade to further garner reader attention.

Plain language makes communications easier to understand and is expressly mandated by the provisions of the PCC Compensation Plan and the Quebec Administration Plan. The combined First Notice concisely and clearly presents the information in plain, easily understandable language. All critical information about who could be eligible under the Compensation Plans and the potential benefits available is included.

The combined First Notice encourages engagement by providing simple and convenient mechanisms for the reader to obtain additional information. Toll-free numbers for the PCC Agent and QCAP Agent are provided, as is the website address www.TobaccoClaimsCanada.ca along with a Quick Response Code (QR Code) to allow the reader to easily access the website via a smartphone or tablet device.

PCC and QCAP Information Circulars

For those readers who want more information, the PCC Information Circular and QCAP Information Circular provide detailed information about the respective Compensation Plans approved by the Court. These documents will be available on the Claims Administration website and can be sent to interested persons by postal mail or courier upon request.

Each Information Circular provides substantial information to potential and actual claimants. In particular, the Information Circulars:

- (a) provide notification of the CCAA Court’s approval of the Compensation Plan;
- (b) advise of the commencement of the Claims Submission Period;
- (c) provide details about the Claims Process; and
- (d) advise of the Claims Application Deadline to submit a completed Claim Package to the Claims Administrator.

The content of the Information Circulars is organized into logical sections for easier comprehension by readers, and a question-and-answer format increases accessibility.

The majority of the Information Circular questions have short responses comprised of a single paragraph. This allows the reader easily to find information that is relevant to their particular circumstances. For example, the questions cover topics such as:

- what COPD diagnoses are eligible under the Compensation Plan;
- how to proceed if the Tobacco-Victim is deceased; and
- how to proceed if the Tobacco-Victim is incapacitated.

The Information Circulars also explain the type of assistance that is available from the PCC or QCAP Agent for claim preparation and submission.

The proposed PCC Information Circular is attached hereto as **Attachment B**, the PCC Claim Form as **Attachment C**, the QCAP Information Circular as **Attachment D**, the QCAP Tobacco-Victim Claim Form as **Attachment E**, and the QCAP Succession Claim Form and four (4) sub-forms as **Attachment F**.

Direct Communication

For those persons who previously registered for more information about the Compensation Plans with either the PCC Agent and/or QCAP Agent, direct communication will be provided digitally via email or in printed format via postal mail or courier, (a) at the commencement of the PCC and QCAP claims submission periods, and (b) in ongoing fashion until the respective PCC and QCAP claims deadlines transpire.

Email is the preferred medium for direct communication because it is delivered almost instantly and allows the recipient to click hyperlinks to directly access the Tobacco Claims Canada website. The email will be a short message that the claims period has commenced and will provide links to the Combined First Notice along with the PCC or QCAP Information Circular and PCC or QCAP Claims Form(s) as applicable in PDF format.

For registrations in the records of the PCC Agent, such direct email communications are to be sent by the Claims Administrator.

Specifically for registrations in the records of Quebec Class Counsel and/or Proactio as the QCAP Agent, due to privacy considerations and to prevent confusion and/or apprehension as stipulated by Quebec Class Counsel, such direct email communications are to be sent by Proactio as the QCAP Agent in lieu of the Claims Administrator.

For those who request a printed package or for whom the direct email communication bounces as undeliverable, the Claims Administrator will send the combined First Notice, and the applicable Information Circular and Claim Form by regular mail. In addition to the Claim Form, a pre-addressed return envelope will be provided.

During the course of the Claims Submission Periods, the Claims Administrator will confer with the Administrative Coordinator and potentially other stakeholders about whether providing the applicable Information Circular and Claim Form package via postal mail or courier can serve as a reminder for those who previously registered for more information and have not yet submitted a claim to the Claims Administrator. Such a printed reminder is valuable because emails can be: (a) blocked as spam by an internet service provider and/or email application; (b) overlooked because of the volume of email received; or (c) inadvertently deleted. A printed package provides a

substantial notification to a potential claimant of the opportunity to assert their rights under the Compensation Plans prior to the applicable Claim Submission Deadline.

There will be six versions of the printed notice packets: (i) PCC Information Package English; (ii) PCC Information Package French; (iii) QCAP Living Tobacco Victim Information Package French; (iv) QCAP Living Tobacco Victim Information Package English (v) QCAP Deceased Tobacco Victim Information Package French, and (vi) QCAP Deceased Tobacco Victim Information Package English. The Information Package will consist of the relevant Information Circular and Claim Form along with a pre-addressed return envelope.

Newspapers

Newspapers have a wide readership among older demographic groups. As noted above, 51% of adults aged 50+ read a newspaper in the prior week. That percentage increases slightly with older groups, with the relevant figures being 53% of adults aged 60+ and 57% of adults aged 70+. This makes newspaper advertisements a promising means to reach the target audience. In order to maximize the reach, advertisements will be placed not only in national newspapers, but also in local newspapers.

At the commencement of the Claims Submission Period, the initial phase of newspaper advertisements will aim to reach all communities across Canada in markets of all sizes. Based on Vividata research, total newspaper readership for adults aged 50+ in the past week is consistently high in all community sizes as detailed in the below chart, with even the smallest of communities still having a total newspaper readership over 40%.

Adults 50+ who have read any newspaper in the past week	
Community Size	Total Newspaper Readership
2+ million	53%
1-2 million	52%
500K - 999,999	51%
100K - 499,999	50%
30K - 99,999	56%
10K - 29,999	46%
1K - 9,999	45%
Under 1K	42%

Following an initial phase of advertisements in Year 1 as set out below, the second phase is expected to focus on major metropolitan markets, in newspapers with the highest circulation and readership. One to three newspapers are expected to be selected in each market to ensure coverage in the most highly populated areas, and where applicable, in both English and French.

Phases of advertisements in Year 2 of the Notice Plan are similarly expected to focus on major metropolitan markets and/or national newspapers, but may be adjusted based on an analysis of claims received, in the discretion of the Claims Administrator.

In total, 100 general circulation newspapers have been selected as part of the Notice Plan's first phase in Year 1 covering all of Canada including Quebec. The second phase in Year 1 is expected to encompass 16 general circulation newspapers. The tables below indicate the name of each publication, its estimated circulation, geography, number of insertions that the notice is expected to run in each paper, the frequency in which the publication is printed, and ad size, as well as whether the Combined First Notice is expected to appear in English or French. The timing of the publications for Year 1 is shown above under the heading "Notice Plan Timeline."

The Claims Administrator proposes to use large ad units (of at least a quarter page) which will permit the use of a larger font size, and the inclusion of the Tobacco Claims Canada logo and QR code.

Flight 1 (Year 1)

General Newspapers - Non Quebec	Estimated Circulation	Geography	Insertions	Frequency	Language	Ad Size B/W
Flight 1 (Year 1)						
<i>Toronto Star</i>	128,200	Ontario	1x Weekday	Daily (Mon-Sun)	English	5.3308" x 13"
<i>National Post</i>	106,933	National	1x Weekday	Daily (Tue-Sat)	English	6.144" x 10.214"
<i>Vancouver Sun</i>	105,847	British Columbia	1x Weekday	Daily (Tue-Sat)	English	6.144" x 10.214"
<i>Winnipeg Free Press</i>	95,482	Manitoba	1x Weekday	Daily (Tue-Sun)	English	5.708" x 13.714"
<i>Vancouver Province</i>	87,757	British Columbia	1x Weekday	Daily (Sun-Fri)	English	6.144" x 10.214"
<i>Calgary Herald</i>	80,138	Alberta	1x Weekday	Daily (Tue-Sat)	English	6.144" x 10.214"
<i>L'Etoile</i>	75,193	New Brunswick	1x Weekly	Weekly (Thu)	French	6.144" x 10.214"
<i>Edmonton Journal</i>	74,192	Alberta	1x Weekday	Daily (Tue-Sat)	English	6.144" x 10.214"
<i>Ottawa Citizen</i>	73,420	Ontario	1x Weekday	Daily (Tue-Sat)	English	6.144" x 10.214"
<i>Globe and Mail</i>	65,749	National	1x Weekday	Mon-Sun	English	5.33" x 13.36"
<i>Halifax Chronicle-Herald</i>	59,336	Nova Scotia	1x Weekday	Daily (Tue-Sat)	English	6.144" x 10.214"
<i>Chatham- Kent This Week</i>	45,928	Ontario	1x Weekly	Weekly (Thu)	English	6.144" x 10.214"
<i>Hamilton Spectator</i>	39,375	Ontario	1x Weekday	Daily (Mon-Sat)	English	5.3308" x 13"
<i>Victoria Times Colonist</i>	38,890	British Columbia	1x Weekday	Daily (Mon-Sun)	English	6.23" x 8.07"
<i>Windsor Star</i>	38,669	Ontario	1x Weekday	Daily (Tue-Sat)	English	6.144" x 10.214"
<i>London Free Press</i>	38,225	Ontario	1x Weekday	Daily (Tue-Sat)	English	6.144" x 10.214"
<i>Kelowna Capital News</i>	30,460	British Columbia	1x Weekday	Weekly (Thu)	English	6.417" x 10.5"
<i>Saskatoon Star Phoenix</i>	30,195	Saskatchewan	1x Weekday	Daily (Tue-Sat)	English	6.144" x 10.214"
<i>Woodstock Oxford Review</i>	29,919	Ontario	1x Weekly	Weekly (Thu)	English	6.144" x 10.214"
<i>Abbotsford News</i>	29,341	British Columbia	1x Weekly	Weekly (Thu)	English	6.417" x 10.5"
<i>Nanaimo Daily Bulletin</i>	29,136	British Columbia	1x Weekday	Weekly (Wed)	English	6.417" x 10.5"
<i>Regina Leader-Post</i>	28,344	Saskatchewan	1x Weekday	Daily (Tue-Sat)	English	6.144" x 10.214"
<i>The Charlottetown Guardian</i>	27,820	Prince Edward Island	1x Weekday	Daily (Tue-Sat)	English	6.144" x 10.214"
<i>Prince Albert Daily Herald</i>	27,525	Saskatchewan	1x Weekday	Daily (Tue-Sat)	English	7" x 10.5"
<i>Kitchener/Waterloo Region Record</i>	24,400	Ontario	1x Weekday	Daily (Mon-Sat)	English	5.3308" x 13"
<i>Chilliwack Progress</i>	24,350	British Columbia	1x Weekly	Weekly (Fri)	English	6.417" x 10.5"
<i>Pembroke Observer</i>	23,899	Ontario	1x Weekly	Weekly (Thu)	English	6.144" x 10.214"
<i>Prince George Citizen</i>	23,000	British Columbia	1x Weekly	Weekly (Thu)	English	6.52" x 10.25"
<i>Vernon Morning Star</i>	22,133	British Columbia	1x Weekly	Weekly (Fri)	English	6.417" x 10.5"
<i>Cape Breton Post</i>	22,012	Nova Scotia	1x Weekday	Daily (Tue-Sat)	English	6.144" x 10.214"
<i>Duncan - Cowichan Valley Citizen</i>	19,797	British Columbia	1x Weekly	Weekly (Wed)	English	6.417" x 10.5"
<i>Penticton Western News</i>	19,482	British Columbia	1x Weekly	Weekly (Wed)	English	6.417" x 10.5"

<i>St. John Telegram Weekly</i>	18,140	Newfoundland & Labrador	1x Weekly	Weekly (Fri)	English	6.144" x 10.214"
<i>Leduc Representative</i>	16,312	Alberta	1x Weekday	Weekly (Fri)	English	6.144" x 10.214"
<i>Timmins Times</i>	16,265	Ontario	1x Weekly	Weekly (Thu)	English	6.144" x 10.214"
<i>Miramichi Leader</i>	16,180	New Brunswick	1x Weekly	Weekly (Thu)	English	6.144" x 10.214"
<i>Parksville Qualicum News</i>	16,013	British Columbia	1x Weekly	Weekly (Wed)	English	6.417" x 10.5"
<i>Lethbridge Herald</i>	15,780	Alberta	1x Weekday	Daily (Tue-Sat)	English	4.95" x 10.5"
<i>Saint John Telegraph-Journal</i>	15,007	New Brunswick	1x Weekday	Daily (Tue-Sat)	English	6.144" x 10.214"
<i>Kingston Whig-Standard</i>	14,569	Ontario	1x Weekday	4x a week	English	6.144" x 10.214"
<i>Campbell River Mirror</i>	13,984	British Columbia	1x Weekly	Weekly (Wed)	English	6.417" x 10.5"
<i>Yorkton Marketplace</i>	13,295	Saskatchewan	1x Weekly	Weekly (Fri)	English	6.5" x 15.868"
<i>Medicine Hat News</i>	12,820	Alberta	1x Weekday	Daily (Tue-Sat)	English	4.95" x 10.5"
<i>Brandon Sun</i>	12,070	Manitoba	1x Weekday	Daily (Tue-Sat)	English	5.708" x 10.257"
<i>Thunder Bay Chronicle-Journal</i>	11,938	Ontario	1x Weekday	Daily (Tue-Sat)	English	4.958" x 10.71"
<i>Fredericton Daily Gleaner</i>	9,861	New Brunswick	1x Weekly	Weekly (Wed)	English	6.144" x 10.214"
<i>Swift Current Southwest Booster</i>	9,500	Saskatchewan	1x Weekly	Weekly (Thu)	English	6.823" x 16"
<i>Port Alberni Valey News</i>	8,942	British Columbia	1x Weekly	Weekly (Wed)	English	6.417" x 10.5"
<i>Le Métropolitain</i>	8,700	Ontario	1x Weekly	Weekly (Thu)	French	8" x 8.75"
<i>Salmon Arm Observer</i>	8,696	British Columbia	1x Weekly	Weekly (Thu)	English	6.417" x 10.5"
<i>Wetaskewin Times</i>	8,530	Alberta	1x Weekly	Weekly (Wed)	English	6.144" x 10.214"
<i>Fort Saskatchewan Record</i>	8,344	Alberta	1x Weekday	Weekly (Thur)	English	6.144" x 10.214"
<i>Portage La Prairie Graphic Leader</i>	8,102	Manitoba	1x Weekly	Weekly (Thu)	English	6.144" x 10.214"
<i>Sudbury Star</i>	7,536	Ontario	1x Weekly	Weekly (Wed)	English	6.144" x 10.214"
<i>Nelson Star</i>	7,415	British Columbia	1x Weekly	Weekly (Thu)	English	6.417" x 10.5"
<i>St. Catherine's Standard</i>	6,600	Ontario	1x Weekday	Daily (Mon-Sat)	English	8.97" x 6.571"
<i>North Bay Nugget</i>	6,311	Ontario	1x Weekly	Weekly (Thu)	English	6.144" x 10.214"
<i>La Liberté</i>	6,000	Manitoba	1x Weekly	Weekly (Wed)	French	6.2249" x 11.0427"
<i>Weyburn This Week</i>	6,000	Saskatchewan	1x Weekly	Weekly (Thu)	English	6.5" x 15.75"
<i>Kenora Miner & News</i>	5,994	Ontario	1x Weekly	Weekly (Thu)	English	6.144" x 10.214"
<i>Peterborough Examiner</i>	5,200	Ontario	1x Weekday	Daily (Mon-Sat)	English	5.3308" x 13"
<i>High River Times</i>	5,194	Alberta	1x Weekly	Weekly (Fri)	English	6.144" x 10.214"
<i>Owen Sound Sun Times</i>	5,179	Ontario	1x Weekly	Weekly (Thu)	English	6.144" x 10.214"
<i>Sylvan Lake News</i>	5,130	Alberta	1x Weekly	Weekly (Thu)	English	6.833" x 10.5"
<i>Red Deer Advocate</i>	4,907	Alberta	1x Weekday	Weekly (Wed)	English	6.833" x 10.5"
<i>Lacombe Express</i>	4,708	Alberta	1x Weekly	Weekly (Thu)	English	6.833" x 10.5"
<i>Niagara Falls Review</i>	4,250	Ontario	1x Weekday	Daily (Mon-Sat)	English	8.97" x 6.571"
<i>Yukon News</i>	4,038	Yukon	1x Weekly	Weekly (Fri)	English	6.833" x 10.5"
<i>Steinbach Carillon</i>	3,896	Manitoba	1x Weekly	Weekly (Thu)	English	5.62" x 14.29"
<i>Prince Rupert Northern View</i>	3,839	British Columbia	1x Weekly	Weekly (Thu)	English	6.417" x 10.5"
<i>Sarnia Observer</i>	3,542	Ontario	1x Weekly	Tues, Thurs, Sat	English	6.144" x 10.214"
<i>Brantford Expositor</i>	3,452	Ontario	1x Weekly	Tues, Thurs, Sat	English	6.144" x 10.214"
<i>Le Voyageur</i>	3,050	Ontario	1x Weekly	Weekly (Wed)	French	6" x 11.625"
<i>Brockville Recorder & Times</i>	3,019	Ontario	1x Weekly	Tues, Thurs, Sat	English	6.144" x 10.214"
<i>Belleville Intelligencer</i>	2,974	Ontario	1x Weekly	Tues, Thurs, Sat	English	6.144" x 10.214"
<i>Cornwall Standard-Freeholder</i>	2,969	Ontario	1x Weekly	Tues, Thurs, Sat	English	6.144" x 10.214"
<i>Sault Ste. Marie Star</i>	2,662	Ontario	1x Weekly	Tues, Thurs, Sat	English	6.144" x 10.214"
<i>Stratford Beacon Herald</i>	1,963	Ontario	1x Weekly	Tues, Thurs, Sat	English	6.144" x 10.214"

<i>Trail Times</i>	1,807	British Columbia	1x Weekly	Weekly (Thu)	English	6.417" x 10.5"
<i>L'Eau Vive</i>	1,337	Saskatchewan	1x Weekly	Bi-Weekly (Thu)	French	5.818" x 10.5"
<i>Cranbrook Townsman</i>	1,254	British Columbia	1x Weekly	Weekly (Tue)	English	6.417" x 10.5"
<i>Elliot Lake Standard</i>	1,131	Ontario	1x Weekly	Weekly (Thu)	English	6.144" x 10.214"
<i>Flin Flon Reminder</i>	1,111	Manitoba	1x Weekly	Weekly (Wed)	English	6.5" x 15.5"
<i>Le Franco</i>	1,047	Alberta	1x Weekly	2nd Thu of Each Month	French	9.71" X 7.75"
General Newspapers - Quebec	Estimated Circulation	Geography	Insertions	Frequency	Language	Ad Size B/W
Flight 1 (Year 1)						
<i>La Presse (digital)</i>	220,000	Quebec	1x Weekday	Mon-Sat	French	Full Screen
<i>Le Journal de Montreal</i>	110,000	Quebec	1x Weekday	Mon-Sun	French	5.04" x 12.57"
<i>Montreal Gazette</i>	74,520	Quebec	1x Weekday	Daily (Tue-Sat)	English	6.144" x 10.214"
<i>Le Journal de Quebec</i>	63,600	Quebec	1x Weekday	Mon-Sun	French	5.04" x 12.57"
<i>Infos Laurentides (St-Jérôme)</i>	53,136	Quebec	1x Weekly	Weekly (Wed)	French	10" x 10.5"
<i>Le Courier Laval</i>	50,000	Quebec	1x Weekly	Weekly (Mon)	French	7.347" x 10.515"
<i>Le Nord Info (Ste-Thérèse)</i>	45,723	Quebec	1x Weekly	Weekly (Wed)	French	10" x 10.5"
<i>L'Éveil</i>	41,472	Quebec	1x Weekly	Weekly (Wed)	French	10" x 10.5"
<i>Journal La Revue</i>	41,387	Quebec	1x Weekly	Weekly (Wed)	French	6.51" x 12.15"
<i>Le Clairon (St-Hyacinthe)</i>	41,319	Quebec	1x Weekly	Weekly (Tue)	French	7.33" x 12.5"
<i>L'Action du Mercredi (Joliette)</i>	35,902	Quebec	1x Weekly	Weekly (Wed)	French	6.51" x 12.15"
<i>Le Courier Du Sud</i>	35,630	Quebec	1x Weekly	Weekly (Tue)	French	7.444" x 10.25"
<i>L'Express de Drummondville</i>	32,500	Quebec	1x Weekly	Weekly (Thu)	French	9.833" x 12.5"
<i>Acadie Nouvelle</i>	21,600	Quebec	1x Weekly	Mon-Sun	French	6.75" x 10.5"
<i>Quebec Chronicle Telegraph</i>	6,500	Quebec	1x Weekly	Weekly (Wed)	English	6.86" x 10.5"
<i>La Sentinelle</i>	2,500	Quebec	1x Weekly	Weekly (Tues)	French	7.347" x 12.5"

Flight 2 (Year 1)

General Newspapers - Non Quebec	Estimated Circulation	Geography	Insertions	Frequency	Language	Ad Size B/W
Flight 2 (Year 1)						
<i>Toronto Star</i>	128,200	Ontario	1x Weekday	Daily (Mon-Sun)	English	5.3308" x 13"
<i>National Post</i>	106,933	National	1x Weekday	Daily (Tue-Sat)	English	6.144" x 10.214"
<i>Vancouver Sun</i>	105,847	British Columbia	1x Weekday	Daily (Tue-Sat)	English	6.144" x 10.214"
<i>Winnipeg Free Press</i>	95,482	Manitoba	1x Weekday	Daily (Tue-Sun)	English	5.708" x 13.714"
<i>Calgary Herald</i>	80,138	Alberta	1x Weekday	Daily (Tue-Sat)	English	6.144" x 10.214"
<i>L'Etoile</i>	75,193	New Brunswick	1x Weekly	Weekly (Thu)	French	6.144" x 10.214"
<i>Edmonton Journal</i>	74,192	Alberta	1x Weekday	Daily (Tue-Sat)	English	6.144" x 10.214"
<i>Ottawa Citizen</i>	73,420	Ontario	1x Weekday	Daily (Tue-Sat)	English	6.144" x 10.214"
<i>Globe and Mail</i>	65,749	National	1x Weekday	Mon-Sun	English	5.33" x 13.36"
<i>Halifax Chronicle-Herald</i>	59,336	Nova Scotia	1x Weekday	Daily (Tue-Sat)	English	6.144" x 10.214"
<i>Saskatoon Star Phoenix</i>	30,195	Saskatchewan	1x Weekday	Daily (Tue-Sat)	English	6.144" x 10.214"
<i>The Charlottetown Guardian</i>	27,820	Prince Edward Island	1x Weekday	Daily (Tue-Sat)	English	6.144" x 10.214"
<i>St. John Telegram Weekly</i>	18,140	Newfoundland & Labrador	1x Weekly	Weekly (Fri)	English	6.144" x 10.214"
General Newspapers - Quebec	Estimated Circulation	Geography	Insertions	Frequency	Language	Ad Size B/W
Flight 2 (Year 1)						
<i>La Presse (digital)</i>	220,000	Quebec	1x Weekday	Mon-Sat	French	Full Screen

<i>Le Journal de Montreal</i>	110,000	Quebec	1x Weekday	Mon-Sun	French	5.04" x 12.57"
<i>Montreal Gazette</i>	74,520	Quebec	1x Weekday	Daily (Tue-Sat)	English	6.144" x 10.214"

In total, the newspapers selected have a circulation over 2.8 million through paid subscriptions and newsstand sales, while the readership (which refers to the number of people who read the newspaper) is expanded by multi-adult households due to multiple readers sharing a single copy, generating an expected total readership of more than 6.2 million. Notices placed in print editions would also run in the newspapers' digital editions (where available). (According to Vividata, 40% of adults aged 50+ have looked at digital newspaper content in the last week.)

Indigenous Newspapers. To reach Indigenous communities, 24 Indigenous newspapers have been selected. Reaching Indigenous populations is particularly important, as Vividata research shows that those who identify as Indigenous or Aboriginal are 28% more likely to smoke cigarettes than the average Canadian.

The following chart shows the name of each Indigenous newspaper, its estimated circulation, geography, number of insertions that the notice is expected to run over the course of the Notice Plan, frequency in which the publication is printed, language, and ad size, as it will appear in Year 1. Where multiple insertions are noted, each insertion would run in a different language.

Indigenous Print - Non Quebec	Estimated Circulation	Geography	Insertions	Frequency	Language	Ad Size B/W
<i>First Nations Voice</i>	47,000	National	1x	6x a Year	English	10.371" x 11.429"
<i>Rural Roots</i>	28,025	Saskatchewan	1x	Weekly (Th)	English	9.45" x 12.543"
<i>Grassroots News</i>	20,000	Manitoba	1x	Bi-Weekly (Wed)	English	10.38" x 10.95"
<i>Turtle Island News</i>	20,000	Ontario	1x	Weekly (Wed)	English	10.25" x 12"
<i>Northern Advocate</i>	14,208	Saskatchewan / Manitoba	1x	Monthly	English	9.45" x 12.543"
<i>Alberta Native News</i>	12,000	Alberta	1x	Monthly	English	9.45" x 14.9"
<i>Pique News</i>	10,000	British Columbia	1x	Weekly (Fr)	English	10" x 12.5"
<i>Two Row Times</i>	10,000	Ontario	1x	Weekly (Wed)	English	10.25" x 13.5"
<i>Le Metropolitain</i>	8,000	Ontario	1x	Weekly (Th)	French	10.5" x 14"
<i>Squamish Chief</i>	6,000	British Columbia	1x	Weekly (Th)	English	9.875" x 10.25"
<i>Nunatsiak News</i>	6,000	NW Territories	2x	Weekly (Fr)	English & Inuktitut	10.333" x 15.357"
<i>Wawatay News</i>	6,000	Ontario	2x	Monthly	English & Oji-Cree	10.25" x 15.5"
<i>Le Regional</i>	5,500	Ontario	1x	Bi-Weekly (Th)	French	10.5" x 14"
<i>NWT News/North</i>	3,300	NW Territories	3x	Weekly (Mon)	English, Inuktitut, and Inuinnaqtun	10.3333" x 15.3571"
<i>Ha-Shilth-Sa</i>	3,200	British Columbia	1x	Bi-Weekly (Th)	English	10.25" x 15.5"
<i>Mi'kmaq-Maliseet Nations News</i>	3,000	Nova Scotia	1x	Monthly	English	10.25" x 12.65"
<i>L'Action</i>	3,000	Ontario	1x	Bi-Weekly (Th)	French	10.5" x 14"
<i>Le Rempart</i>	3,000	Ontario	1x	Bi-Weekly (Th)	French	10.5" x 14"
<i>Yellowknifer</i>	2,877	NW Territories	1x	2x per Week (Wed & Fri)	English	10.3333" x 15.3571"
<i>Nunavut News/North</i>	2,302	Nunavut	3x	Weekly (Mon)	English, Inuktitut, and Inuinnaqtun	10.3333" X 15.3571"

<i>Kivalliq News</i>	1,116	Nunavut	2x	Weekly (Wed)	English & Inuktitut	10.3333" x 15.3571"
<i>Tusaayaksat</i>	n/a	NW Territories	2x	4x a year	English & Siglit	7.75" x 10.25"
Indigenous Print - Quebec	Estimated Circulation	Geography	Insertions	Frequency	Language	Ad Size B/W
<i>The Nation</i>	7,000	Quebec	2x	Bi-Weekly (Fr)	French & Inuktitut	7.5" x 9.75"
<i>Eastern Door</i>	2,025	Quebec	1x	Weekly (Fr)	French	10" x 15.75"

In total, the Indigenous newspapers have a circulation over 220,000. Where indicated above, the combined First Notice will be translated into the primary language(s) used by those publications, increasing the accessibility of the Notice to potential claimants in northern and Indigenous communities. The Indigenous language translations will be carried out in consultation with experienced local translators, who are often employed by the publications themselves.

The Claims Administrator currently expects that an additional phase of advertisements in Year 2 of the Notice Plan will use the same list of Indigenous publications as a starting point to determine where a second notice should run based on the best data-driven information on hand and focusing on prospective PCC-Claimants.

National Magazines

Over one-third of the target audience are medium-to-heavy magazine readers. The six magazines listed below have an estimated combined circulation of 632,000. This traditional media component allows for a color image and QR code to more easily stand out to the reader. It also ensures another method for reaching individuals who may not be online. The following chart shows the name, estimated circulation, number of insertions, frequency, language, and ad size of each publication as it will appear in Year 1. The Notice will appear in *Chatelaine* in both English and French.

Magazines	Estimated Circulation	Insertions	Frequency	Language	Ad Size	% of A50+ who read this magazine
<i>Canadian Living</i>	217,000	1x	Monthly	English	Full Page	14.3%
<i>Canadian Geographic</i>	104,000	1x	6x per year	English	Full Page	10.7%
<i>Chatelaine (English)</i>	78,704	1x	4x per year	English	Full Page	9.8%
<i>Maclean's</i>	74,845	1x	Monthly	English	Full Page	12.0%
<i>L'Actualité</i>	54,231	1x	Monthly	French	Full Page	4.2%
<i>Toronto Life</i>	52,499	1x	Monthly	English	Full Page	7.2%
<i>Chatelaine (French)</i>	51,280	1x	4x per year	French	Full Page	2.1%

The Claims Administrator expects that a second round of advertisements will appear in Year 2 with specific publications to be determined at that time, in the discretion of the Claims Administrator.

Broadcast Television and Radio

To provide the greatest practicable reach of the video and audio ads, traditional broadcast programming will be purchased using 30-second television and radio spots, as follows:

- broadcast and cable television nationwide in both English and French;
- radio programming in major metropolitan markets in both English and French;

- radio programming in small and medium markets in both English and French via Bell and Stringray Media which together own and operate over 200 local radio stations ;
- placements on APTN and CBC North to ensure reach within the Indigenous and northern communities;
- placements on a variety of Indigenous radio stations; and
- radio public service announcements that would be sent to all radio stations nationwide, along with a letter asking the stations to air the radio spots during open time slots.

According to Vividata, the average Canadian adult watches 21 hours of television a week. Certain categories of television programming perform particularly well with older audiences, including news, game shows, and daytime television. According to Vividata, adults 50+ are 35% more likely to watch news programming on TV than the average Canadian adult and 26% more likely to watch soap operas. While specific shows will depend on the available inventory at the time of purchase, networks may include Global, CityTV, CBC, Sportsnet, HGTV, Dtour, Flavour Network, History Channel, and others. A mix of primetime programming will also be included to provide high-impact moments. Placements on APTN and CBC North will provide reach to Indigenous and northern communities. In total, the Claims Administrator anticipates that over 1,750 spots will air during the period of this Notice Plan, resulting in an estimated 45 million impressions.

The radio campaign will cover major metropolitan markets including Toronto, Ottawa, Montreal, Vancouver, Edmonton, Calgary, Winnipeg, Saskatoon, Regina, Halifax, and others. Each market will include radio spots on 2-4 stations to ensure a mix of genres and music listening preferences. Radio spots will air across timeslots and programming that performs best against older audiences but will also ensure a mix of “drive-time” programming to reach those commuting to and from work/school. “Drive-time” programming is particularly useful as it reaches a potential claimant in a time when they are not distracted by other devices.

The radio campaign will also cover smaller to medium-sized markets through Bell and Stringray Media. Combined, both networks own and operate over 200 radio stations nationwide.

Furthermore, placements on a variety of Indigenous radio stations will also air over the course of the Notice Plan to ensure adequate coverage to Indigenous and northern communities. Example stations may include Taqramiut Nipingat Inc. (TNI), Société de communication Atikamekw-Montagnais (SOCAM), Windspeaker Radio, James Bay Cree Communications Society, Native Communications Inc. (NCI), Wawatay Radio, Drumbeat Radio, Missinipi Broadcasting Corporation (MBC), and others.

Over the course of the entire radio campaign, the Claims Administrator anticipates that over 16,000 radio spots would air, generating over 95 million impressions.

This widespread television and radio campaign is crucial to the overall Notice Plan effort. Among the smoker target audience, five out of every six people have consumed television in the prior week. Broadcast media builds frequency in a way that print media typically does not. Response rates are a byproduct of reach and frequency. It may take multiple impressions before a given viewer or listener decides to visit the Tobacco Claims Canada website to seek more information.

Beyond the specific target audiences, the Notice Plan’s objective is to create broad, national awareness about these Compensation Plans. This is expected to generate earned media content in

trusted outlets to further extend the reach of the notice effort. The objective of such broad and national awareness is to maximize the opportunity for eligible people to become aware that the Compensation Plans exist, learn about the Plans and participate if they so choose.

A proposed 30-second Video/Audio script is attached hereto as **Attachment G**.

Digital and Social Media Video/Audio

Mixing video/audio digital placements alongside traditional media and standard banner ads (described below) provides another format to reach the Claims Administrator's target audiences and enables the message to be conveyed to potential claimants without having to read any text.

Often considered a medium for a younger audience, these video/audio digital placements reach a significant source of the target audiences as well. Specifically, according to Vividata, a substantial portion of adults aged 50+ consumed media online:

Media Consumption	% of Adults 50+
Watched a short form video online (under 20 min)	53%
Watch streaming subscription services (e.g., Netflix)	47%
Streamed Music online	35%
State that they usually watch TV online or streaming	32%
Watched a long form video online (over 20 min)	30%
Listened to online Radio	19%
Listened to Podcasts	19%

Similar to the banner notices described below, these digital placements allow for very specific targeting to reach both the smokers and heirs target audience. Specifically, the Claims Administrator will notify potential claimants through the following media:

- 30-second YouTube ads reaching the same target as described above via the Google Display Network (both properties are owned by Alphabet) focusing on adults 50+ but also "Affinity" and "Intent" audience targets including Cigarettes, Smoking, Cancer Support, COPD, and Emphysema;
- Streaming podcasts and radio via Google and Spotify; and
- Streaming television on platforms that accept advertising such as Disney+, ESPN+, Fubo, and others.

The video and audio ads would be produced in both English and French. Similar to the banners, they would include a call to action and link potential claimants to the Tobacco Claims Canada website for more information. Over the course of Year 1, the Digital and Social Video and Audio ads will display over 93 million impressions. Impressions allocated for Year 2 of the Notice Plan will be assigned to the platforms based on data received from the Year 1 campaign as well as the overall claim response rate from prospective claimants.

Digital and Social Media Banners

Digital and social media ads will complement the more traditional media approaches and are a key element in ensuring adequate coverage of the target audience across all platforms. According to Vividata, of adults aged 50+, approximately 70% spend at least 2 hours each day on the Internet, with 18% of adults 50+ spending more than 6 hours each day on the Internet.

Additionally, according to Statista, the number of social media users in Canada has continued to grow each year, with an estimated 31.3 million social media users across the country in 2023. That number is estimated to grow to nearly 37 million by 2029.

Furthermore, digital and social media ads result in very specific targeting, allowing a banner to be placed in front of someone with specific interest, search history, geography, and browsing preferences. The digital and social media ads include the following targeting methods aimed at reaching both the primary smokers target audience as well as the broader secondary estate target audience, including spouses, children or other family members who may be helping with the care of the smokers themselves:

- Banners via the Google Display Network to all adults aged 50+ as well as banner ads using both Intent and Affinity targeting a variety of topics such as:
 - Affinity Audience targets including: Cigarettes, Smoking, Cancer Support, COPD, and Emphysema. Affinity Audience targeting is contextual, in that the banners would be placed alongside content about these topics.
 - Intent Audience targets including: Cigarettes, Smoking, Cancer Support, COPD, and Emphysema. Intent Audience targeting is behavioural, and banners would be placed on websites (no matter the content) in front of specific individuals who had previously searched information on these topics. This type of targeting is especially important in that it reaches individuals who were actively searching out more information on these topics and already have a built-in interest of knowing more.
 - Intent Audience targeting including keywords and phrases such as: How to help someone quit smoking; Support for family members of smokers; Best ways to quit smoking; Smoking cessation tips; Helping a loved one quit smoking; Quit smoking support; Smoking cessation programs; Nicotine addiction help; Ways to quit smoking for good; How to encourage someone to stop smoking; Quit smoking aids; Secondhand smoke health risks; Tips to stop smoking; Smoking cessation resources; Quit smoking products; Family support for quitting smoking; Effective methods to quit smoking; Nicotine replacement therapy; Stop smoking counseling; and/or Health benefits of quitting smoking.
 - This target audience both reaches current smokers looking to quit, but those potential family members supporting their loved ones who are smokers.
 - Additional Intent Audience targeting including keywords and phrases such as: Smoking compensation, lung cancer payment, throat cancer payment, emphysema payment, COPD payment, legal claim for tobacco-related death, tobacco compensation Canada, tobacco settlement for family, tobacco class action, tobacco litigation, tobacco claims, tobacco lawsuit, cigarette class action, cigarette litigation, cigarette lawsuit,

cigarette class action, tobacco payment, tobacco payment for family member, how to claim for a family member, and others.

- Banner ads on newspaper websites.
 - In addition to the physical and digital replica newspapers ads mentioned above, banner ads would be placed on local newspaper websites to reach those who read their local news websites, but do not subscribe to the newspaper.
 - Placing banner ads in addition to the physical print ads would also increase frequency for those who consume media both ways.
 - According to Statista data, 59% of all Canadian use the Internet to get news at least once daily, and according to Vividata, more than 50% of adults aged 50+ value their local news media.
- Banner ads on Facebook and Instagram – According to Statista, Facebook is the social media market leader in Canada, accounting for 59% of all social media visits, while Instagram accounts for approximately 7% of all social media visits.
 - Banners would target adults aged 50+, as well as individuals who have shown interest in content including discussions on and/or topics including COPD, Emphysema, Smoking, and/or Cancer Support.
- Post engagement targeting on X (Twitter) – According to Statista data, X accounts for nearly 10% of all social media visits in Canada.
 - Post engagement targeting topics such as Smoking, Emphysema, COPD, and/or Cancer Support. Post Engagement targeting allows an ad to be placed in front of X users who had tweeted or re-tweeted specific content or phrases.
 - Post engagement targeting towards phrases such as Tobacco, Nicotine, Smoke break, Menthol cigarettes, Light cigarettes, Filter cigarettes, Nicotine patches, Nicotine gum, Smokeless tobacco, Quit smoking, Nicotine addiction, Lung health, Cancer prevention, Health risks of smoking, Smoking habits, Smoking preferences, Heavy smokers, Occasional smokers, Chain smokers, Smoking community, Smoking forums, Smoking support groups, Smoking in public places, Smoking laws, Tobacco taxes, and/or Smoking accessories.
 - Post engagement targeting to tobacco cessation keywords and phrases such as: How to help someone quit smoking; Support for family members of smokers; Best ways to quit smoking; Smoking cessation tips; Helping a loved one quit smoking; Quit smoking support; Smoking cessation programs; Nicotine addiction help; Ways to quit smoking for good; How to encourage someone to stop smoking; Quit smoking aids; Secondhand smoke health risks; Tips to stop smoking; Smoking cessation resources; Quit smoking products; Family support for quitting smoking; Effective methods to quit smoking; Nicotine replacement therapy; Stop smoking counseling; and/or Health benefits of quitting smoking.
 - Post engagement targeting to keywords and phrases such as: Smoking compensation, lung cancer payment, throat cancer payment, emphysema payment, COPD payment,

legal claim for tobacco-related death, tobacco compensation Canada, tobacco settlement for family, tobacco class action, tobacco litigation, tobacco claims, tobacco lawsuit, cigarette class action, cigarette litigation, cigarette lawsuit, cigarette class action, tobacco payment, tobacco payment for family member, how to claim for a family member, and others.

Banners will appear in both English and French and appear in a variety of ad sizes based on the platform where they appear. Banners will include an image and headline calling attention to the matter and urging individuals to visit the Tobacco Claims Canada website for more information where they can find out the requirements of filling out a Claim Form.

Banners would appear on desktop, mobile, and tablet devices. The banner ads will run over a variety of flights during Year 1 as detailed in the example Notice Plan timeline above. Year 2 flighting for prospective PCC-Claimants is expected to follow a similar pattern as detailed in the example Notice Plan timeline, but exact flighting and media choices are expected to be updated based on the overall claim response from claimants and other banner specific stats such as click-thru-rates.

Over the course of the Year 1 Notice Plan timeline, the digital and social media banners will display over 510 million impressions. A similar level of impressions is expected to be allocated for Year 2 of the Notice Plan, but is expected to be assigned to the various digital platforms at that time based on the criteria mentioned in the paragraph above. Sample banner and social media notices are attached hereto as **Attachment H**.

Sponsored Search Listings

To facilitate locating the Tobacco Claims Canada website, sponsored search listings will be acquired on the three most highly visited internet search engines: *Google*, *Yahoo!*, and *Bing*. When search engine visitors search on selected common keyword combinations, the sponsored search listing will be displayed. Generally, the sponsored search listing will appear at the top of the visitor's website page prior to the search results or in the upper right-hand column of the web-browser screen. All sponsored search listings will link directly to the Tobacco Claims Canada website and appear in English and French.

Informational Release

A bilingual Informational Release (in English and French) will be issued nationwide via Canadian Newswire to general media (print and broadcast) outlets, including local and national newspapers, magazines, national wire services, television, and radio broadcast media across Canada. The Informational Release will include key information for potential claimants including the Tobacco Claims Canada website and the toll-free telephone number. Although there is no guarantee that any news stories will result, the Informational Release will serve a valuable role by providing additional notice exposures beyond that which was provided by the paid media. The draft Informational Release in English is attached hereto as **Attachment I**.

Notice Reporting

The objective and expectation of the Claims Administrator, upon the execution of this Notice Plan, is to ensure that eligible persons have been effectively notified in a clear, concise manner that allows them to fully understand their rights and options, and that such persons are given every reasonable opportunity to participate.

The Claims Administrator will prepare and submit reports to the CCAA Plan Administrators as the Court directs describing the progress of the Notice Plan.

Attachment List

Attachment A – Combined First Notice

Attachment B – PCC Information Circular

Attachment C – PCC Claim Form

Attachment D – QCAP Information Circular

Attachment E – QCAP Tobacco-Victim Claim Form

Attachment F – QCAP Succession Claim Form & sub-forms

Attachment G – Video/Audio Script

Attachment H – Banner and Social Media Notices

Attachment I – Informational Release

Attachment A



If you smoked regularly before Nov. 20, 1998 and were diagnosed with a tobacco-related disease, you may qualify for \$14,400-\$100,000 from a landmark settlement.

As part of a landmark settlement with Canadian tobacco companies, the Ontario Superior Court of Justice (Commercial List) has approved two compensation plans to provide payments to eligible smokers and ex-smokers diagnosed with certain tobacco-related diseases:

- The Pan-Canadian Claimants' Compensation Plan (PCC); and
- The Quebec Class Action Administration Plan (QCAP)

For those who have died that qualify, payments may be available for their estates.

WHAT ARE THE ELIGIBLE DISEASES AND DOLLAR AMOUNTS?

This table shows the diseases covered by the plans and the maximum payment amounts:

Disease	You started smoking before January 1, 1976	You started smoking on or after January 1, 1976
Primary Lung Cancer or Primary Throat Cancer	\$60,000 PCC \$100,000 QCAP	\$48,000 PCC \$80,000 QCAP
Emphysema or COPD (GOLD Grade III or IV)	\$18,000 PCC \$30,000 QCAP	\$14,400 PCC \$24,000 QCAP

Important: Payments may be reduced depending on the number of eligible claims in each plan. A person will only be entitled to one payment, under one plan, and for one disease.

WHAT ARE THE CLAIM DEADLINES?

The Claims Submission Periods commenced on Month DD, 2025 and the plans have different claim deadlines:

- PCC claim deadline is Month DD, 2027
- QCAP claim deadline is Month DD, 2026

Important: QCAP deadline is one year earlier than PCC deadline.

HOW MANY CIGARETTES AND WHICH BRANDS?

Both plans require the smoker or ex-smoker to have smoked at least 87,600 cigarettes (for example, 20 cigarettes a day for 12 years) between January 1, 1950 and November 20, 1998. The cigarettes must be from brands sold by the tobacco companies. The website has a list of the eligible brands, which include most legal cigarettes sold in Canada.

WHAT ARE OTHER PCC REQUIREMENTS?

In addition to the disease and smoking requirements, the smoker or ex-smoker under PCC must:

- reside in Canada (or if deceased, must have resided in Canada at the time of death);
- have been diagnosed **between March 8, 2015 and March 8, 2019**, inclusive of those dates;
- have resided in Canada at the time of diagnosis; and
- have been alive on March 8, 2019.

WHAT ARE OTHER QCAP REQUIREMENTS?

In addition to the disease and smoking requirements, the smoker or ex-smoker under QCAP must:

- reside in Quebec (or if deceased, must have resided in Quebec at the time of death);
- have been diagnosed **before March 12, 2012**;
- have resided in Quebec at the time of diagnosis; and
- have been alive on November 20, 1998.

HOW CAN I GET FREE HELP?

Agents are available **free of charge** to assist claimants under these plans. Agents will help you (a) complete your claim form; (b) commission your signature on the claim form; and (c) provide guidance on how to obtain the necessary information and documents for your claim.

PCC Agent 1-888-482-5852
is Epiq PCCAgent@TobaccoClaimsCanada.ca

QCAP Agent 1-888-880-1844
is Proactio tabac@proactio.ca

If you do not submit a claim by the applicable deadline, you cannot be eligible to get a payment.

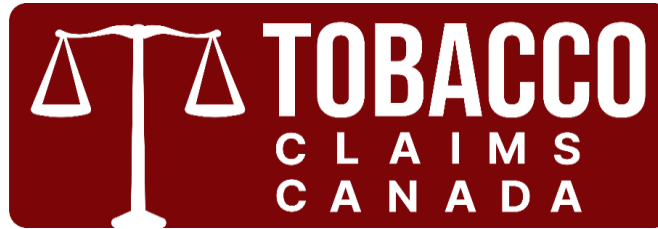
If you are not sure whether you qualify, the website has a simple questionnaire to help you. The plans have been designed so that you **do not need a lawyer** to prepare and submit your claim. If you have already registered, you will be notified by an Agent about how to complete your claim.

Full information is available at the official website www.TobaccoClaimsCanada.ca and via the QR Code.

www.TobaccoClaimsCanada.ca



Attachment B



If you smoked regularly before Nov. 20, 1998 and were diagnosed with a tobacco-related disease between March 8, 2015 and March 8, 2019, you may qualify for \$14,400-\$60,000 from a landmark settlement.

PCC Compensation Plan – Detailed Information

Why is there a settlement? In March 2019, Imperial Tobacco Canada Limited, Rothmans, Benson & Hedges Inc. and JTI-Macdonald Corp (the “Tobacco Companies”) began insolvency proceedings in Canada under the *Companies’ Creditors Arrangement Act*, R.S.C. 1985, c. C-36 (“CCAA”), following a class-action judgment in Quebec ordering them to pay over \$13.5 billion. As part of the CCAA proceedings, the Tobacco Companies participated in court-supervised mediation to reach a Global Settlement with their creditors, including the Provinces and Territories, the Plaintiffs from the Quebec class action, and PCC Representative Counsel, who was appointed by the Court to represent Canadian tobacco-victims, other than those covered by the Quebec Class Action. On March 6, 2025, Chief Justice Geoffrey B. Morawetz of the Ontario Superior Court of Justice (Commercial List) (“CCAA Court”) approved the Settlement.

What are “PCC” and “QCAP”? As part of the Settlement, two compensation plans were created to compensate eligible smokers and ex-smokers diagnosed with Lung Cancer, Throat Cancer or Emphysema or COPD (GOLD Grade III or IV):

1. The Pan-Canadian Claimants’ Compensation Plan (“PCC Compensation Plan”) – for people diagnosed in Canada between March 8, 2015 and March 8, 2019, inclusive of those dates, and in some cases their estates; and
2. The Quebec Class Action Administration Plan (“QCAP Plan”) – for *Blais* Class Members diagnosed in Quebec before March 12, 2012, and their heirs.

This document is specifically related to the PCC Compensation Plan. Information about the QCAP Plan is available at www.TobaccoClaimsCanada.ca.

Who is a “Tobacco-Victim”? A “Tobacco-Victim” is a person who suffers from a Tobacco-Related Disease. Tobacco-Victims who meet the PCC Eligibility Criteria are eligible for compensation under the PCC Compensation Plan. If the Tobacco-Victim is deceased, but was alive on March 8, 2019, their estate is also eligible for compensation.

What does “PCC Eligibility Criteria” mean? In a legal context, “criteria” means standards on which a judgment or decision may be based. To be eligible to receive PCC compensation, a Tobacco-Victim must satisfy four criteria types: (1) smoking history; (2) disease diagnosis between March 8, 2015 and March 8, 2019 (inclusive); (3) resident of Canada; and (4) alive on March 8, 2019.

PCC COMPENSATION AMOUNTS AND PAYMENTS

How much compensation could I be approved for? The following table shows the *maximum* amounts available to claimants that meet the Eligibility Criteria for each disease covered by the PCC and QCAP Compensation Plans. Eligible claimants will receive compensation for the one disease that results in the highest payment.

Disease	You started smoking before January 1, 1976	You started smoking on or after January 1, 1976
Primary Lung Cancer or Primary Throat Cancer	\$60,000 PCC \$100,000 QCAP	\$48,000 PCC \$80,000 QCAP
Emphysema or COPD (GOLD Grade III or IV)	\$18,000 PCC \$30,000 QCAP	\$14,400 PCC \$24,000 QCAP

If my Claim is approved, will I receive the amount in the table? The table shows the *maximum* amounts. Final payments may be reduced on a *pro rata* (proportionate) basis if the amount available for the PCC Compensation Plan (\$2.521 billion) is not enough to pay all eligible claims. Final amounts will only be determined after the PCC Claims Deadline has passed and all claims have been processed.

When could I receive a payment? If your claim is approved, payment will be issued after the PCC Claim Deadline of **Month DD, 20YY**, once all claims have been reviewed and decisions finalized. Once a payment date has been determined, it will be posted at www.TobaccoClaimsCanada.ca.

PCC ELIGIBILITY CRITERIA AND REQUIRED PROOF

To qualify for compensation under the PCC Plan, the Tobacco-Victim must meet all of the following PCC Eligibility Criteria.

Smoking History

Which cigarettes brands are covered? The Tobacco-Victim must have smoked cigarettes sold by the Tobacco Companies in Canada. A complete list of eligible brands is provided in **Attachment A - Cigarettes Sold by The Tobacco Companies**.

How many cigarettes must have been smoked to qualify? The Tobacco-Victim must have smoked at least 87,600 cigarettes sold by the Tobacco Companies in Canada between January 1, 1950 and November 20, 1998. This is also called "Twelve Pack-Years", which means any combination of cigarettes sold by the Canadian Tobacco Companies that adds up to 87,600. For example:

- 10 cigarettes smoked per day for 24 years ($10 \times 365 \times 24$) = 87,600 cigarettes sold by the Canadian Tobacco Companies;
- 20 cigarettes smoked per day for 12 years ($20 \times 365 \times 12$) = 87,600 cigarettes sold by the Canadian Tobacco Companies.

The smoking can be over multiple time periods, even with breaks in between. To help determine the number of cigarettes smoked, a calculator is available at www.TobaccoClaimsCanada.ca.

How to prove Smoking History? You will be asked to provide the Tobacco-Victim's smoking history on the PCC Claim Form, which must be signed and sworn before a Commissioner of Oaths or Notary Public.

Compensable Disease Diagnosis Between March 8, 2015 & March 8, 2019

What diseases qualify for compensation? The Tobacco-Victim must have been diagnosed with at least one of the following diseases (the "**Compensable Diseases**") between March 8, 2015 and March 8, 2019 (inclusive of those dates) to qualify for compensation:

1. Primary lung cancer; or
2. Primary cancer (squamous cell carcinoma) of the larynx, oropharynx, or the hypopharynx (throat cancer); or
3. Emphysema or COPD (GOLD Grade III or IV).

If you resided in Quebec at the time of diagnosis and you were diagnosed with one of the above diseases before March 12, 2012, you may be eligible for compensation under the QCAP Plan. If that is the case, contact the QCAP Agent (Proactio).

What does "primary cancer" mean? "Primary cancer" refers to the original site where the cancer first develops. Sometimes cancer cells spread to other parts of the body - this is called a secondary or metastatic cancer.

What does "COPD (GOLD Grade III or IV)" mean? The Global Initiative for Chronic Obstructive Lung Disease ("GOLD") developed a four-grade COPD classification system based upon severity of airflow limitation and other diagnostic parameters. GOLD Grade III (severe) and IV (very severe) classifications represent the two most severe categories of disease.

How do I prove diagnosis and date of diagnosis if am a resident of Canada other than Quebec? A Tobacco-Victim's diagnosis between March 8, 2015 and March 8, 2019 (inclusive) can be proven by the following:

- For Lung or Throat Cancer - a copy of a pathology report confirming the diagnosis;
- For Emphysema or COPD (GOLD Grade III or IV) - a copy of a report of a spirometry test (performed between March 8, 2015 and March 8, 2019) that first demonstrated a FEV1 (non-reversible) of less than 50% of the predicted value to first establish a diagnosis of Emphysema or COPD (GOLD Grade III or IV).

If you are unable to provide one of the above documents, you may instead submit one of the following alternatives:

- a copy of an extract from the Tobacco-Victim's medical file, confirming the diagnosis;
- a completed Physician Form (available on www.TobaccoClaimsCanada.ca);
- a written statement from a Physician (of the Tobacco-Victim, or another physician having access to the medical record), along with at least one of the following records:
 - For Lung or Throat Cancer: pathology report, operative report, biopsy report, MRI report, CT scan report, PET scan report, X-ray report, sputum cytology report.
 - For Emphysema or COPD (GOLD Grade III or IV): Spirometry report; or CT scan report.

Medical records can take time to obtain. Start requesting your records early to avoid missing the PCC Claim Deadline.

How do I prove diagnosis and date of diagnosis if I am a resident of Quebec? The Régie de L'assurance Maladie du Québec (RAMQ) and the Ministère de la Santé et des Services sociaux (MSSS) may hold, in the Registre québécois du cancer and in the MED-ÉCHO database respectively, the information necessary to establish that a Tobacco-Victim was diagnosed with a Compensable Disease between March 8, 2015 and March 8, 2019 inclusive of those dates (referred to as an **"Official Confirmation"**). In the Claim Form, the Tobacco-Victim that is a Quebec resident or their representative can authorize the Claims Administrator to request an Official Confirmation from these sources. If an Official Confirmation is obtained, this constitutes proof of diagnosis, and the Quebec claimant will not need to submit supplemental diagnosis information.

What if a Quebec Official Confirmation cannot be obtained? If an Official Confirmation for a Quebec resident cannot be obtained from RAMQ or MSSS, you will be notified by the PCC Agent or the Claims Administrator. In such case, you will need to provide alternative proof as described in the above section regarding proof of diagnosis for a Tobacco-Victim who does not reside in Quebec. Please note that as a Quebec resident, you do not need to submit alternative proof unless it has been specifically requested of you.

What if I was diagnosed with another smoking-related disease? Only Lung Cancer, Throat Cancer, Emphysema and COPD (GOLD Grade III or IV) are covered by the PCC Compensation Plan. However, a \$1 billion charitable foundation has been created as part of the CCAA Plans to fund research, programs and initiatives aimed at improving outcomes in Tobacco-related Diseases, which will indirectly benefit those who do not qualify for direct compensation. To learn more about the charitable foundation go to: [\[insert URL for website\]](#).

Residency Questions on the PCC Claim Form

Under the PCC Compensation Plan, a person's place of residence is the province or territory that issued their health insurance card and/or their driver's licence. A Tobacco-Victim must answer "Yes" to the applicable residency questions on the PCC Claim Form in order to be eligible for compensation:

1. **Residency at time of diagnosis:** The PCC Claim Form asks, "Did the Tobacco-Victim reside in Canada on the date of diagnosis?" Residence on the date of diagnosis may be established based on the province or territory which issued the Tobacco-Victim's health insurance card number that appears on the medical documents proving a PCC Compensable Disease.
2. **Residency at time of submitting a claim (or at time of death):** If the Tobacco-Victim is living, the PCC Claim Form asks: "Does the Tobacco-Victim currently reside in Canada?" If the Tobacco-Victim is deceased, the PCC Claim Form asks: "Did the Tobacco-Victim reside in Canada on the date of their death?" Residence at death is proven by submitting one of the acceptable documents listed in Attachment A of the PCC Claim Form with the Claim Form.

Alive on March 8, 2019

What if the Tobacco-Victim died before March 8, 2019? To qualify, the Tobacco-Victim must have been alive on March 8, 2019, and meet all other PCC Eligibility Criteria. If the Tobacco-Victim is now deceased but was alive on that date, the Representative of the Estate must submit the required documents listed in Attachment A of the Claim Form to: (i) prove the Tobacco-Victim's death and date of death; and (ii) verify their legal authority to submit the claim on behalf of the Estate.

If the Tobacco-Victim was a resident of Quebec and was diagnosed before March 12, 2012, their heirs may have a claim under the QCAP Plan. If this is the case, please contact the QCAP Agent (Proactio) for assistance.

What if the Tobacco-Victim dies after submitting a PCC Claim Form? If the Tobacco-Victim dies after submitting their complete Claim Package but before receiving payment, the Claims Administrator will still review the claim. If the claim is approved, the compensation will be payable to the Estate of the Tobacco-Victim. In that circumstance, the duly authorized Legal Representative of the Estate will need to submit additional information to receive the payment. Please contact the PCC Agent for assistance.

WHAT IF THE TOBACCO-VICTIM IS INCAPACITATED OR DECEASED?

A Legal Representative can submit a claim: (a) on behalf of a **living** Tobacco-Victim, or (b) on behalf of the **Estate of a deceased** Tobacco-Victim who was alive on March 8, 2019. The PCC Claim Form includes a table at Attachment A detailing acceptable documents for each province and territory. **Note:** Surviving Family Members in their own capacity are not eligible to receive direct PCC compensation.

If the Tobacco-Victim died without an estate or the estate is now closed, you should speak with a probate lawyer about options to set-up or reactivate an estate at your own cost. The Claims Administrator cannot confirm whether the Tobacco-Victim meets the PCC Eligibility Criteria unless the Claim includes proper legal documentation showing that you are authorized to represent the Estate.

HOW TO SUBMIT YOUR CLAIM AND COMMISSIONING

When is the deadline to submit a PCC Claim? The PCC Claim Deadline is **Month DD, 20YY**. You may submit a PCC Claim with supporting documents any time during a 24-month submission period from [start date] to **Month DD, 20YY**. For your claim to be considered, it must be postmarked or received by **Month DD, 20YY**. Records can take time to obtain. **Start early to avoid missing the PCC Claim Deadline.**

NOTE: The QCAP Plan has a different Claim Submission Period and Claim Deadline. The QCAP Claim Submission Period is twelve (12) months (rather than twenty-four (24) months) and the QCAP Claim Deadline is Month DD, 20YY.

Where can I get the PCC Claim Form? If you received this document by postal mail, a copy of the PCC Claim Form should have been included in the envelope. A PDF version is also available at www.TobaccoClaimsCanada.ca. The Claims Administrator encourages you to use its online Claimant Portal instead of a paper Claim Form. On the Claimant Portal, you can create an account with a Username and Password, start a claim and return to it any time before the Claim Deadline. You can submit your Claim Form and securely upload supporting documents. If you provide permission, the PCC Agent can access the information you entered on the Claimant Portal and assist you for free with preparing your Claim.

How can I submit my PCC Claim Form? The PCC Claim Form explains the multiple ways you can submit your Claim, which includes online, postal mail, email, or fax. The preferred submission method is the online Claimant Portal.

Can I submit more than one Claim Form? No. You are only permitted to make one Claim for compensation under either the PCC or QCAP Plan. You cannot make a claim to both Claims Processes at the same time. If you think you have a claim under the QCAP Plan, apply to the QCAP Plan, through the QCAP Agent (Proactio). The QCAP Agent (Proactio) will be able to verify if you also have a claim under the PCC Compensation Plan that could result in higher compensation for you, and if appropriate, will assist you to transfer your claim to the PCC Agent. If you need any assistance in determining where to file, please contact the Claims Administrator.

What is needed for a complete PCC Claim submission? A Claim is complete when (a) the PCC Claim Form has been answered completely with no information missing, (b) all required supporting documents are attached or uploaded, (c) the PCC Claim Form's Statutory Declaration is signed in front of a Commissioner of Oaths or Notary Public (see below), and (d) the Claim Form and supporting documents have been submitted to the Claims Administrator by the PCC Claim Deadline. The PCC Agent can assist you in reviewing your claim before it is submitted and identify potentially incomplete information and/or documentation.

What is commissioning? To complete your Claim Form, you must sign the Statutory Declaration in front of a Commissioner of Oaths or Notary Public. A Commissioner of Oaths will confirm your identity and that you swear or affirm your information is true. Every lawyer, some paralegals and all notaries in your province or territory are Commissioners of Oaths.

The PCC Agent can commission the Statutory Declaration free of charge, using a secure online signing system called DocuSign. You will need a computer, smartphone or tablet for a video-call with the PCC Agent, who will watch you sign the declaration. If you want help commissioning from the PCC Agent, make sure your Claim Form is otherwise complete and ready to submit several weeks before the Claim Deadline of **Month DD, 20YY** so there is enough time to schedule the remote signing. The PCC Agent can also help you find an alternative way to meet the commissioning requirement.

WHAT HAPPENS AFTER I SUBMIT MY CLAIM?

How long may the review of my claim take? The Claims Administrator will send you an **Acknowledgement of Receipt of Claim** when your claim is received. Review times will vary depending on how many claims are received, when your Claim is submitted, whether documents are missing or complex, and whether your Claim raises unique questions. Review of your Claim may not be complete until after the PCC Claim Deadline.

If Your Claim is Accepted, the Claims Administrator will send you a **Notice of Acceptance of PCC Claim**.

If Your Claim is Incomplete, the Claims Administrator will send you a **Notice of Incomplete Claim** to explain what is missing and how to fix it. The deadline to resubmit your revised claim will be the later of: (a) the PCC Claims Deadline; or (b) sixty (60) days from the date of the Notice of Incomplete Claim. If you do not respond by that deadline, your Claim will be rejected.

If Your Claim is Rejected, you will be sent a **Notice of Rejection** explaining the reason(s) for the rejection. The Notice will include a **Request for Review Form**. If you believe your Claim was improperly rejected, you may request a review within sixty (60) days of the date of the Notice of Rejection, clearly identifying the error you believe the Claims Administrator made during the initial assessment of your claim. The Claims Administrator will assign an independent Review Officer, who may confirm, reverse, or vary the original decision.

PCC AGENT SUPPORT

The PCC Agent can help you, **free of charge**, with: (a) answering questions and filling out the PCC Claim Form based on information you provide; (b) commissioning your signature on the PCC Claim Form; and (c) providing guidance on how to obtain the necessary information and documents for your claim.

Can the PCC Agent tell me if I qualify? No. Only the Claims Administrator can decide if a claim qualifies under the PCC Compensation Plan. However, the PCC Agent can identify gaps in your Claim Package.

Do I need to hire a lawyer to submit my Claim? No. The PCC Compensation Plan was designed so that you can complete a claim without hiring a lawyer or paying for third-party services. Also, the CCAA Court has issued an order prohibiting lawyers or other persons from soliciting you in the preparation or submission of your Claim. If you receive any such solicitation, report it to the PCC Agent right away by phone or email.

Exception—Estate-Related Legal Help: In some cases, Legal Representatives acting on behalf of a Tobacco-Victim may need to consult an estate lawyer at their own cost to obtain legal documents such as a Grant of Probate, Grant of Administration, Power of Attorney, or Proof of Guardianship depending on the province or territory.

How do I get more information? Call the PCC Agent: **1-888-482-5852**, or email: **PCCAgent@TobaccoClaimsCanada.ca**. Visit **www.TobaccoClaimsCanada.ca** for FAQs, tools, and the full PCC Compensation Plan.

ATTACHMENT A: CIGARETTES SOLD BY THE TOBACCO COMPANIES

Accord

Accord KF

Avanti/Light

B&H

B&H 100 Del.UL.LT/MEN

B&H 100 F

B&H 100 F Menthol

B&H Light Menthol

B&H Lights

B&H Special KF

B&H Special Lights KF

B&H Light Menthol

Belmont

Belmont KF

Belvedere

Belvedere Extra Mild

Camel

Cameo

Cameo Extra Mild

Craven "A"

Craven "A" Special

Craven "A" Light

Craven "A" Ultra Light/Mild

Craven "M"

Craven "M" KF

Craven "M" Special

du Maurier

du Maurier Light

du Maurier Special

du Maurier Ultra Light

Dunhill

Dunhill KF

Export

Export "A"

Export "A" Lights

Export "A" Medium

Export "A" Extra Light

Export "A" Special Edition

Export "A" Ultra Light

Export Mild

Export Plain

LD

Macdonald

Macdonald Menthol

Mark Ten

Mark Ten Filter

Matinee

Matinee Extra Mild

Matinee Slims/Menthol

Matinee Special/Menthol

Medallion

More

North American Spirit

Number 7

Number 7 Lights

Peter Jackson

Peter Jackson Extra Light KF

Player's

John Player's Special

Player's Extra Light

Player's Filter

Player's Light

Player's Medium

Player's Plain

Rothmans

Rothmans Extra Light

Rothmans KF

Rothmans Light

Rothmans Special

Rothmans UL LT KF

Spirit

Select Special/Ultra Mild/Menthol

Vantage

Vantage KF

Vantage Light/Menthol

Viscount

Viscount #1 KF

Viscount Extra Mild/Menthol

Winston

Attachment C



Submission Deadline:
[Month DD], 20XX

Tobacco Claims Canada
Claims Administrator
P.O. Box 2958 STN B
Ottawa ON K1P 5W9

<<Barcode>>

<<Name>>

<<Address1>>

<<Address2>>

<<Address3>>

<<City>> <<Province>> <<Zip>> OR <<Country>>

Pan-Canadian Claimants' (PCC) Compensation Plan CLAIM FORM

GENERAL INSTRUCTIONS

Submit Your Claim Online:



You can scan the QR code or visit

www.TobaccoClaimsCanada.ca

to file your claim. If you file your
claim online, it must be submitted by

5:00 p.m., Pacific Time, on Month DD, 20XX.



This Claim Form must be completed and submitted with the Claims Administrator, along with the necessary accompanying documents, by **no later than the deadline of [Month Day, Year] by 5:00 p.m., Pacific Time**, in order to receive financial compensation from the PCC Compensation Plan.

You do **not need a lawyer** to file a claim under the PCC Compensation Plan. Epiq, the official PCC Agent, can help you file your claim, at no additional cost to you. If you need any assistance, please reach out to Epiq at the following contact information:

① **Phone: 1-888-482-5852**

✉ **Email: PCCAgent@TobaccoClaimsCanada.ca**



Website: www.TobaccoClaimsCanada.ca/en/HomePCC

The PCC Compensation Plan and Eligibility Criteria

The PCC Compensation Plan will provide compensation to individuals who meet the PCC Eligibility Criteria, described below, and who submit a complete claim with supporting documents by the deadline. Such individuals are referred in this PCC Claim Form as “Tobacco-Victim(s)”.

The PCC Compensation Plan will also provide compensation to the estates of Tobacco-Victims who were alive on March 8, 2019, and meet all other eligibility criteria. The Legal Representative of the Estate of a deceased Tobacco-Victim may make a claim on behalf of the Estate.

This PCC Claim Form should be used by:

- A Tobacco-Victim making a claim on their own behalf;
- A Representative of a living Tobacco-Victim with a mandate or power of attorney to represent the Tobacco-Victim; or
- A Representative of a deceased Tobacco-Victim with a mandate or legal authority to represent the Estate of the Tobacco-Victim (such as an Executor, or Estate Administrator).

To be eligible to receive financial compensation, the Tobacco-Victim must meet **all** of the following **PCC Eligibility Criteria**. They must:

1. reside in any Province or Territory in Canada (or if deceased, have resided in Canada at the time of their death);
2. have smoked a minimum of twelve pack-years (i.e. 87,600 cigarettes) sold by the Canadian Tobacco Companies **between January 1, 1950 and November 20, 1998**;
Note: You may use the calculator available at www.TobaccoClaimsCanada.ca/en/HomePCC/Calculator to help determine the number of cigarettes the Tobacco-Victim smoked.
3. have been diagnosed **between March 8, 2015 and March 8, 2019** (inclusive) with:
 - (a) Primary lung cancer; or
 - (b) Primary cancer (squamous cell carcinoma) of the larynx, oropharynx, or the hypopharynx (throat cancer); or
 - (c) Emphysema or COPD (GOLD Grade III or IV).
4. have resided in any Province or Territory in Canada on the date of diagnosis with lung cancer, throat cancer, or emphysema or COPD (GOLD Grade III or IV);
AND
5. have been alive on **March 8, 2019**.

Claims Deadline

The PCC Claim Form together with the required supporting documents must be submitted to the Claims Administrator by **no later than 5:00 p.m., Pacific Time, on [Month Day, Year]**.

Some documents can take time to obtain. Please take immediate steps to obtain all of the required documents to ensure you meet the deadline.

How to File a Claim

You can file your Claim Form with supporting documents in any of the following ways:

-  **Online**, through the Claims Administrator's website at www.TobaccoClaimsCanada.ca
-  **Email** to info@TobaccoClaimsCanada.ca
-  **Fax** to 1-866-262-0816
-  **Registered Mail**, sent to the following address, postmarked by [Month Day, 20XX]:

Tobacco Claims Canada
Claims Administrator
P.O. Box 2958 STN B
Ottawa ON K1P 5W9

Your claim will be deemed to be received **only when the Claim Form and all supporting documents are received by the Claims Administrator**. Claimants will be sent an Acknowledgement of Receipt of Claim by email or mail once their Claim Form with supporting documents has been received by the Claims Administrator. You must keep the record of transmission of your Claim Form until you receive the Acknowledgement of Receipt of Claim.

PLEASE DO NOT SUBMIT YOUR CLAIM MORE THAN ONCE OR THROUGH MULTIPLE METHODS.

The Quebec Administration ("QCAP Plan") and Eligibility Criteria

If the Tobacco-Victim does **not meet** the above PCC Eligibility Criteria, and **resides or resided in Quebec**, they may still be eligible to receive compensation under a separate compensation plan called the Quebec Class Action Administration Plan ("**QCAP Plan**"). To qualify under the QCAP Plan, the Tobacco-Victim must meet all of the following criteria. They must:

1. reside in Quebec (or if deceased, have resided in Quebec at the time of their death);
 2. have smoked a minimum of twelve pack-years (i.e. 87,600 cigarettes) sold by the Canadian Tobacco Companies between **January 1, 1950 and November 20, 1998**;
 3. have been diagnosed **before March 12, 2012** with:
 - (a) Primary lung cancer; or
 - (b) Primary cancer (squamous cell carcinoma) of the larynx, the oropharynx or the hypopharynx (throat cancer); or
 - (c) Emphysema or COPD (GOLD Grade III or IV).
 4. have resided in Quebec on the date of diagnosis with lung cancer, throat cancer, emphysema or COPD (GOLD Grade III or IV);
- AND**
5. have been alive on **November 20, 1998**.

Compensation may also be available to the estates or heirs of Tobacco-Victims who died after November 20, 1998, as well as to the estates or heirs of the heirs of Tobacco-Victims who died after November 20, 1998.

A Tobacco-Victim will only be eligible for compensation under one plan and will be paid for the disease and under the plan which provides the highest amount of compensation. You cannot make a claim under both plans.

If you think you have a claim under the QCAP Plan, please apply to the QCAP Plan, through the QCAP Agent (Proactio). The QCAP Agent (Proactio) will verify if you have a claim under the PCC Compensation Plan that could result in higher compensation for you, and if appropriate, will transfer your claim to the PCC Agent. The QCAP Agent (Proactio) can be reached at:

Phone: 1-888-880-1844

Email: tabac@proactio.ca

Website: www.RecoursTabac.com

If you need any assistance determining under which plan to file, please contact the Claims Administrator.

Privacy and Confidentiality Declaration by the Claims Administrator

By submitting this Claim Form, the Tobacco-Victim or Representative of the Tobacco-Victim, as applicable, confirms that they have reviewed and agree to the collection, use, and disclosure of personal information as described below.

All personal information collected by the Claims Administrator through the Claims Process will be kept confidential in accordance with the *Personal Information Protection and Electronic Documents Act*, S.C. 2000, c. 5 and the Privacy Policy found on the Claims Administrator's website at www.TobaccoClaimsCanada.ca/en/Home/Privacy. This information is collected only for the purpose of administering the PCC Compensation Plan and to assess the PCC-Claimant's eligibility to receive compensation.

The personal information of the Tobacco-Victim, including personal health information, may be collected, used, and disclosed by the Claims Administrator and the PCC Agent to provide Agent and Claims Administration services. It will not be disclosed without the express written consent of the Tobacco-Victim or the Representative of the Tobacco-Victim, except as provided for in the PCC Compensation Plan, as required by law or Court Order, or if it is necessary to share with a future Court-appointed Claims Administrator in connection with the PCC Claims Process. This information may not be used or disclosed for any other purpose.

PART 1: INFORMATION ABOUT THE TOBACCO-VICTIM

IMPORTANT: If you have questions or require any assistance, contact the PCC Agent free of charge. For additional information, please visit the Claim Administrator's website at www.TobaccoClaimsCanada.ca.

If you are the Representative of a Tobacco-Victim, living or deceased, please read **Attachment A** before completing this Claim Form.

The Tobacco-Victim

1) Tobacco-Victim's full legal name?

Last Name:

First Name:

Middle Name (if applicable):

2) Tobacco-Victim's date of birth (DD/MM/YYYY):

3) Tobacco-Victim's Health Insurance Card Number:

4) Province/Territory that issued the Tobacco-Victim's Health Insurance Card:

5) Did the Tobacco-Victim reside in Canada on the date of diagnosis with primary lung cancer, primary squamous cell carcinoma of the larynx, oropharynx, hypopharynx (throat cancer), emphysema or COPD (GOLD Grade III or IV)?

- ☐ Yes - in a Province or Territory outside of Quebec ☐ Yes - in Quebec ☐ No

Province/Territory:

6) Does the Tobacco-Victim currently reside in Canada?

- ☐ Yes ☐ No ☐ Not Applicable — the Tobacco-Victim is deceased

Note: To be entitled to compensation, the Tobacco-Victim must have been a resident of Canada at the time of diagnosis as well as a resident of Canada at the time of submitting the Claim Form to the Claims Administrator, if living, or on the date of death, if deceased.

Representative of Tobacco-Victim

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If you are the Tobacco-Victim, you **do not need** to fill out Questions 7 through 9. Please proceed to Question 10.

Representative of Living Tobacco-Victim

Please only fill out Question 7 and 8 if you are the Representative of a **living** Tobacco-Victim.

7) Full legal name of the Representative of the living Tobacco-Victim:

Last Name:

First Name:

Note: The Representative must attach documents to verify their authority to make a claim on behalf of the living Tobacco-Victim. See **Attachment A, Section 2** for the list of acceptable documents required to prove the Representative's legal authority to submit a claim on behalf of a living Tobacco-Victim.

8) Pursuant to what document listed in **Attachment A, Section 2** is the Representative acting?

- ☐ I acknowledge that I must attach a copy of the document listed in **Attachment A, Section 2** with the PCC Claim Form and submit it with my completed Claim Form to the Claims Administrator by the deadline.

Representative of Deceased Tobacco-Victim

Please only fill out Questions 9a to 9e if you are the Representative of a **deceased** Tobacco-Victim.

9a) Was the Tobacco-Victim alive on March 8, 2019?

- ☐ Yes ☐ No

9b) Did the Tobacco-Victim reside in Canada on the date of their death?

- ☐ Yes ☐ No

9c) What is the Tobacco-Victim's date of death? (DD/MM/YYYY)

9d) Full legal name of the Representative of the estate of the deceased Tobacco-Victim:

Last Name:

First Name:

Note: The Representative must attach documents to prove the Tobacco-Victim's death and date of death and verify their authority to make a claim on behalf of the estate of the deceased Tobacco-Victim. See **Attachment A, Section 1** for the list of acceptable documents required to prove the Tobacco-Victim's death and date of death and the Representative's legal authority to submit a claim on behalf of the estate of the deceased Tobacco-Victim.

9e) Pursuant to what document listed in **Attachment A, Section 1B** is the Representative acting?

- ☐ I acknowledge that I must attach a copy of the documents listed in **Attachment A, Sections 1A and 1B** with the PCC Claim Form and submit them with my completed Claim Form to the Claims Administrator by the deadline.

Contact Information

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Note: If you are the Tobacco-Victim, insert your mailing address and contact information. If you are the Representative of a living Tobacco-Victim or the Representative of the Estate of a deceased Tobacco-Victim, provide your own mailing address and contact information.

10) Provide your mailing address:

Number:	Street Name:	Apartment/Suite/PO Box No.:	
City/Town:	Province:	Postal Code:	Country:

11) Provide your contact information:

Phone:	Email:

12) Which language should be used for communication?

- ☐ French ☐ English

13) What is your preferred method of contact?

- ☐ Telephone ☐ Email ☐ Mail

PART 2: PROOF OF DIAGNOSIS

Diagnosis Between March 8, 2015 and March 8, 2019 (inclusive)

14) Was the Tobacco-Victim diagnosed with any of the following diseases **between March 8, 2015 and March 8, 2019 (inclusive)? For all that apply, indicate the date of diagnosis and the place where the Tobacco-Victim resided on the date of diagnosis. If you do not recall the exact date of the Tobacco-Victim's diagnosis, please provide the most accurate estimate possible, as this information will be verified by the Claims Administrator.**

Note: The place of residence is the Province or Territory that issued the Tobacco-Victim's health insurance card and/or driver's license.

☐ **Primary Lung Cancer**

Date of diagnosis:	Place of residence on date of diagnosis
(DD/MM/YYYY)	

☐ **Primary squamous cell carcinoma of the larynx, oropharynx, or hypopharynx (Throat Cancer)**

Date of diagnosis:	Place of residence on date of diagnosis
(DD/MM/YYYY)	

☐ **Emphysema or COPD (GOLD Grade III or IV)**

Date of diagnosis:	Place of residence on date of diagnosis
(DD/MM/YYYY)	

Note: In the case of recurrence or relapse, please indicate the date of the first diagnosis only

Proof of the Tobacco-Victim's Diagnosis

15) Medical documentation is required to confirm the Tobacco-Victim's diagnosis. For Quebec PCC-Claimants only, you may authorize and the Claims Administrator may thereafter request confirmation of your diagnosis from Quebec health registries. For all other Claimants, you are responsible for obtaining and submitting this documentation. Obtaining medical records can take time. We encourage you to begin the process as early as possible to avoid delays.

[For Quebec PCC-Claimants only]

☐ **I hereby authorize the Claims Administrator to obtain a copy of the Tobacco-Victim's medical information relating to the diseases/diagnoses referenced in Question 14 above, and authorize the PCC Agent or QCAP Agent, MSSS and/or the RAMQ, as applicable, to provide the Claims Administrator with copies of any of the following documents:**

- A confirmation of the Tobacco-Victim's diagnosis from the Quebec Cancer Registry;
- An extract from RAMQ files confirming the Tobacco-Victim's diagnosis;
- An extract from the MED-ÉCHO database confirming the Tobacco-Victim's diagnosis; and
- All other medical files relating to the Tobacco-Victim.

If an official confirmation of disease/diagnosis cannot be made through these means, the Claims Administrator will contact you to request the submission of an alternative method of proof. Do not submit any alternative evidence unless it has been explicitly requested by way of a Notice from the Claims Administrator titled "Notice to Provide Alternative Proof."

[For Tobacco-Victims resident in all other Provinces and Territories, or Quebec PCC-Claimants who do not provide the authorization above]

☐ **I acknowledge that I must attach a copy of at least one of the documents listed in Question 16 with the PCC Claim Form and submit it with my completed Claim Form to the Claims Administrator by the deadline.**

16) Unless you are a Quebec PCC-Claimant who has provided the authorization noted in Question 15, you **must attach at least one** of the following documents to verify the diagnosis and date of diagnosis between March 8, 2015 and March 8, 2019 (inclusive). Please check which document is attached as part of your Claim.

Primary Documents:

- ☐ For Lung Cancer or Throat Cancer - A copy of a pathology report confirming the diagnosis.
- ☐ For Emphysema or COPD (GOLD Grade III or IV) - A copy of a report of a spirometry test (performed between March 8, 2015 and March 8, 2019) that first demonstrated a FEV1 (non-reversible) of less than 50% of the predicted value to first establish a diagnosis of Emphysema or COPD (GOLD Grade III or IV).

If you are unable to provide one of the above documents, you may instead submit one of the following alternatives:

- ☐ A copy of an extract from the Tobacco-Victim's medical file; or
- ☐ A completed Physician Form (available on www.TobaccoClaimsCanada.ca); or
- ☐ A written statement from a Physician (of the Tobacco-Victim, or another physician having access to the medical record), along with at least one of the following records:
 - For Lung Cancer or Throat Cancer: pathology report; operative report; biopsy report; MRI report; CT scan report; PET scan report; x-ray report; and/or sputum cytology report; or
 - For Emphysema or COPD (GOLD Grade III or IV): spirometry report or CT scan.

Note: The PCC Agent can provide guidance on how to obtain the necessary documents for your Claim. However, the PCC Agent cannot guarantee that records will be located or that the records obtained will meet the PCC Compensation Plan's evidentiary requirements. The PCC Agent accepts no responsibility if records cannot be obtained or if the records are incomplete, inaccurate, or insufficient to support your Claim. You are responsible for obtaining and submitting the documentation in support of your Claim.

PART 3: AUTHORIZATION TO REQUEST, DISCLOSE AND RELEASE RECORDS

17) I understand that in order to process this Claim, it will be necessary for personal medical information relating to the Tobacco-Victim to be disclosed to the Claims Administrator and the PCC Agent. This may include personal health information held by physicians, health care professionals, hospitals, clinics, public health registries, databases, or other third parties involved in the diagnosis or treatment of the Tobacco-Victim. For Quebec Tobacco-Victims, this may include the MSSS and/or RAMQ information as noted above.

By signing and submitting this Claim Form, I authorize the Claims Administrator and the PCC Agent to request and obtain copies of the Tobacco-Victim's medical information, including extracts from any public health registries or databases, for the purpose of confirming the diseases and diagnoses referenced in Question 14 of this Form. I further authorize any medical professional, public health registry, hospital or agency to provide the Claims Administrator and the PCC Agent with copies of any such medical information.

I understand that this information will be used and disclosed solely as necessary to administer the Claim in accordance with the PCC Compensation Plan and the court-approved CCAA Plans.

☐ **By checking this box, I understand and agree to the above authorization.**

PART 4: PROOF OF SMOKING HISTORY

18) The Tobacco-Victim started smoking cigarettes:

☐ Before January 1, 1976; ☐ On or after January 1, 1976.

19a) Between January 1, 1950 and November 20, 1998, the Tobacco-Victim smoked approximately _____ cigarettes per day for approximately _____ years.

OR

19b) If the number of cigarettes the Tobacco-Victim smoked varied between January 1, 1950 and November 20, 1998, provide a summary below of the number of cigarettes the Tobacco-Victim smoked during that period of time:

- a) Smoked approximately _____ cigarettes per day between (YYYY) _____ and (YYYY) _____;
- b) Smoked approximately _____ cigarettes per day between (YYYY) _____ and (YYYY) _____;
- c) Smoked approximately _____ cigarettes per day between (YYYY) _____ and (YYYY) _____;
- d) Smoked approximately _____ cigarettes per day between (YYYY) _____ and (YYYY) _____;
- e) Smoked approximately _____ cigarettes per day between (YYYY) _____ and (YYYY) _____.

If more space is needed, attach additional sheet(s) to this Claim Form

Note: You may use the calculator available at www.TobaccoClaimsCanada.ca/en/HomePCC/Calculator to help determine the number of cigarettes the Tobacco-Victim smoked.

20) The Tobacco Victim regularly smoked the following brands of cigarettes (select all that apply):

☐ **Accord**

- Accord KF

☐ **Avanti/Light**

☐ **B&H**

- B&H 100 Del.UL.LT/MEN
- B&H 100 F
- B&H 100 F Menthol
- B&H Light Menthol
- B&H Lights
- B&H Special KF
- B&H Special Lights KF

☐ **Belmont**

- Belmont KF

☐ **Belvedere**

- Belvedere Extra Mild

☐ **Camel**

☐ **Cameo**

- Cameo Extra Mild

☐ **Craven "A"**

- Craven "A" Special
- Craven "A" Light
- Craven "A" Ultra Light/Mild

☐ **Craven "M"**

- Craven "M" KF
- Craven "M" Special

☐ **du Maurier**

- du Maurier Light
- du Maurier Special
- du Maurier Ultra Light

☐ **Dunhill**

- Dunhill KF

☐ **Export**

- Export "A"
- Export "A" Lights
- Export "A" Medium
- Export "A" Extra Light
- Export "A" Special Edition
- Export "A" Ultra Light
- Export Mild
- Export Plain

☐ **LD**

☐ **Macdonald**

- Macdonald Menthol

☐ **Mark Ten**

- Mark Ten Filter

☐ **Matinee**

- Matinee Extra Mild
- Matinee Slims/Menthol
- Matinee Special/Menthol

☐ **Medallion**

☐ **More**

☐ **North American Spirit**

☐ **Number 7**

- Number 7 Lights

☐ **Peter Jackson**

- Peter Jackson Extra Light KF

☐ **Player's**

- John Player's Special
- Player's Extra Light
- Player's Filter
- Player's Light
- Player's Medium
- Player's Plain

☐ **Rothmans**

- Rothmans Extra Light
- Rothmans KF
- Rothmans Light
- Rothmans Special
- Rothmans UL LT KF

☐ **Select Special/Ultra Mild/Menthol**

☐ **Spirit**

☐ **Vantage**

- Vantage KF
- Vantage Light/Menthol

☐ **Viscount**

- Viscount #1 KF
- Viscount Extra Mild/Menthol

☐ **Winston**

PART 5: STATUTORY DECLARATION AND SIGNATURE

INSTRUCTIONS TO COMPLETE STATUTORY DECLARATION

The Tobacco-Victim or Tobacco-Victim's Representative must sign the Statutory Declaration below in the presence of a Commissioner of Oaths, sometimes referred to as a Commissioner for taking Affidavits. Signing can be done remotely.

A Commissioner of Oaths is a person who is authorized to take affidavits or declarations by asking you to swear or affirm that the statements in a document are true. Every lawyer and some paralegals are Commissioners of Oaths.

If you need assistance, you may contact the PCC Agent, Epiq, by phone Toll-Free (in Canada) at 1-888-482-5852, by email at PCCAgent@TobaccoClaimsCanada.ca, or online at www.TobaccoClaimsCanada.ca/en/HomePCC who can arrange for a Commissioner of Oaths to commission the signing of your Statutory Declaration before you submit your Claim Form to the Claims Administrator, free of cost.

The Commissioner of Oaths must complete Part 5 and, if an interpreter was used, Part 5A.

If an interpreter was used to complete this Claim Form, the interpreter must complete Parts 5B and 5C.

I, _____, solemnly declare that the information I have provided on this Claim Form is true and correct and that the documents submitted in support of my claim are genuine and have not been modified in any way whatsoever.

I make this solemn declaration conscientiously believing it to be true and knowing that it is of the same force and effect as if made under oath.

Where someone has helped me with this Claim Form, or where an interpreter was used, that person has read to me everything they wrote and included with this Claim Form, if necessary to allow me to understand the content of this completed Claim Form and any attachments to it, and I confirm that this information is true and correct.

I am not making any false or exaggerated Claims to obtain compensation that I am not entitled to receive.

Declared before me

at _____ in _____

(Town/City/Municipality)

(Province/Territory)

this _____ day of _____, 20____.

Signature of Tobacco-Victim or the Representative
of Tobacco-Victim

Signature of Commissioner of Oaths/Notary Public

Full Name of Commissioner of
Oaths/Notary Public

Please place Commissioner
of Oath's stamp/Notarial
Seal here, if applicable.

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Part 5A: Certification by Commissioner of Oaths/Notary Public when an Interpreter is used (only complete this Section if it is applicable).

I certify that this Declaration Form was read or interpreted in my presence to the declarant, the declarant appeared to understand it, and the declarant signed the Declaration or placed their mark on it in my presence.

Signature of Commissioner of
Oaths/Notary Public

Print Name of Commissioner of
Oaths/Notary Public

Part 5B: Interpreter Information (only complete this Section if it is applicable).

Full Name (First Name, Middle
Name, and Last Name):

Address:

Business Phone:

Email Address:

Part 5C: Certification by Interpreter if used (only complete this Section if it is applicable).

I certify that I correctly interpreted this Claim Form in _____
(specify language) to the declarant, and the declarant appeared to understand it.

Signature of Interpreter

Print Name of Interpreter

Date

Signed

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ATTACHMENT A:
ACCEPTABLE PROOF OF LEGAL AUTHORITY DOCUMENTS

SECTION 1 - Documentation Required if the Tobacco-Victim is deceased.

*If the Tobacco-Victim is still alive, please see **SECTION 2 - Documentation Required if the Tobacco-Victim is alive at the time of filing the Claim** (below).*

If the Tobacco-Victim is deceased, but was alive **on March 8, 2019**, their estate may still be eligible for compensation under the PCC Compensation Plan.

Section 1A) The Representative **must attach at least one** of the following documents (a certified copy, photocopy, or certified electronic extract of the document will be accepted by the Claims Administrator) to this Claim Form and submit it to the Claims Administrator by the deadline:

- Death Certificate or Certificate of Death;
- Short Form Death Certificate;
- Long Form Death Certificate;
- Registration of Death or Death Registration;
- Registration of Death or Death Registration with Cause of Death Information;
- Medical Certificate of Death issued by an attending doctor or a coroner;
- Interim Medical Certificate of Death issued by an attending doctor or a coroner;
- Statement of Death issued by a funeral service provider;
- Memorandum of Notification of Death issued by the Chief of National Defense Staff; or
- Statement of Verification of Death from the Department of Veterans Affairs.

Section 1B) Additionally, you **must attach** documentation of your legal authority based on the province or territory where the deceased Tobacco-Victim resided at the time of their death.

Province where the deceased Tobacco-Victim lived at time of death

Acceptable Documents
(Choose one of the following)

The Tobacco-Victim has Indian Status and resided on a reserve or on Crown lands

- Notice of Appointment as Estate Administrator or Notice of Appointment as Estate Executor
- Document showing Indigenous Services Canada or Crown-Indigenous Relations and Northern Affairs Canada is acting as the Estate Administrator

British Columbia	➤ Grant of Probate ➤ Grant of Administration with a Will ➤ Grant of Administration without a Will ➤ Order under s. 103 WESA — Administrator Pending Litigation ➤ Order under s. 132 WESA — Conditional or Limited Administration ➤ Grant under s. 103/132 WESA — Pendente Lite / Ad Colligenda ➤ Grant under s. 134 WESA — Guardian of Minor ➤ Grant under s. 138 WESA — Resealed or Ancillary ➤ Grant under s. 139 WESA — To Attorney ➤ Court Order under s. 159 WESA — Substitute Representative ➤ Grant under s. 159 WESA — de Bonis Non
Alberta	➤ Grant of Probate ➤ Grant of Double Probate ➤ Grant of Administration without a Will ➤ Letters of Administration without a Will ➤ Grant of Administration with Will ➤ Letters of Administration with Will ➤ Document indicating the appointment of Public Trustee
Saskatchewan	➤ Grant/Letters Probate with a Will ➤ Grant/Letters of Probate (small estate application) ➤ Grant/Letters of Administration without a Will ➤ Letters of Administration with Will Annexed
Manitoba	➤ Grant of Probate ➤ Letters of Administration (estates over \$10,000) ➤ Letters of Administration with Will Annexed ➤ Administration Order (estates under \$10,000)

Ontario	➤ Certificate of Appointment of Estate Trustee without a Will ➤ Certificate of Appointment of Estate Trustee with a Will ➤ Certificate of Appointment of Estate Trustee with a Will (Limited Assets) ➤ Small Estate Certificate ➤ Certificate of Appointment of Succeeding Estate Trustee with Will ➤ Certificate of Appointment of Succeeding Estate Trustee with Will (limited assets) ➤ Certificate of Appointment of Succeeding Estate Trustee without a Will ➤ Certificate of Appointment of Estate Trustee (during litigation) ➤ Resealed Estate Trustee Appointment ➤ Foreign Estate Trustee Appointment without a Will ➤ Court Status Certificate
New Brunswick	➤ Letters of Administration without a Will ➤ Letters Probate with a Will ➤ Letter of Administration with a Will Annexed ➤ Ancillary Letters of Administration/Probate
Nova Scotia	➤ Grant of Administration without a Will ➤ Grant of Probate ➤ Grant of Administration with Will Annexed ➤ Ancillary Grant of Probate ➤ Ancillary Grant of Administration ➤ Appointment of a Public Trustee to Administer an Estate Valued at \$25,000 or less
Prince Edward Island	➤ Letters of Administration without a Will ➤ Grant/Letters of Probate ➤ Letters of Administration with the Will Annexed ➤ Ancillary Letters of Administration/Probate ➤ Will with supporting affidavit (where estate property is valued at not more than \$5,000)

Newfoundland and Labrador	➤ Grant/Letters of Probate ➤ Letters of Administration without a Will ➤ Letters of Administration CTA with a Will Annexed (<i>cum testamento annexo</i>) ➤ Letters of Administration DBN (De Bonis Non) ➤ Letters of Administration CTA DBN ➤ Ancillary Letters Probate ➤ Ancillary Letters of Administration ➤ Satisfactory evidence under s. 13 of the Public Trustee Act (for estates valued at \$10,000 or less)
Yukon	➤ Grant/Letters of Probate ➤ Grant/Letters of Administration without a Will ➤ Grant/Letters of Administration with Will Annexed
Northwest Territories	➤ Grant of Probate ➤ Grant of Administration ➤ Grant of Administration with Will Annexed ➤ Grant of Double Probate ➤ Declaration of Small Estate (estate net value is less than \$35,000)
Nunavut	➤ Grant of Probate ➤ Certificate of Appointment of Estate Trustee with a Will ➤ Letters of Administration without a Will ➤ Letters of Administration with Will Annexed
<u>Province where the deceased Tobacco-Victim lived at time of death</u> <u>Acceptable Documents</u>	
Quebec	Provide Both of the following: ➤ Will Search Certificate from the Chambres des notaires du Quebec AND ➤ Will Search Certificate from the Bar of Quebec AND If the Deceased Tobacco-Victim died with a Will, choose one of the following: ➤ Copy of the notarial Will

	96 ➤ Copy of the judgment probating the Will ➤ Certified copy of the Will and notarial minutes of probate ➤ Certified copy of notarial appointment of liquidator including a certified copy of the Will ➤ Copy of appointment of liquidator signed by heirs including a certified copy of the Will ➤ Certified copy of a court order appointing the liquidator including a certified copy of the Will If the deceased Tobacco-Victim died without a Will, choose one of the following: ➤ Copy of the appointment of liquidator signed by heirs entitled to name liquidator ➤ Certified copy of the court order appointing the liquidator

If you need any assistance, please reach out to the PCC Agent, Epiq, at the following contact information:

Email: PCCAgent@TobaccoClaimsCanada.ca
Phone: 1-888-482-5852
Website: www.TobaccoClaimsCanada.ca

SECTION 2 - Documentation required if the Tobacco-Victim is alive at the time of filing the Claim

If the Tobacco-Victim is alive, the Representative **must attach at least one** of the following documents to this Claim Form and submit it to the Claims Administrator by the claims deadline to verify that they have the right and are authorized to make a claim on behalf of the living Tobacco-Victim (a certified copy, photocopy or certified electronic extract of the document will be accepted by the Claims Administrator):

<u>Province the Tobacco-Victim Resides in at the time of filing</u>	<u>Acceptable Documents</u>
If the Tobacco-Victim has Indian Status and resides on a reserve or on Crown lands	➤ Document showing the Representative has been appointed as the Tobacco-Victim's Administrator of Property.
British Columbia	➤ Power of Attorney ➤ Limited Power of Attorney ➤ Enduring Power of Attorney ➤ Enduring Limited Power of Attorney ➤ Springing Power of Attorney ➤ Representation Agreement for legal affairs (under the <i>Representation Agreement Act</i>)

	97 ➤ Certificate of Incapability (under the <i>Adult Guardianship Act</i>) ➤ Court order appointing Representative (under <i>Patients Property Act</i>)
Alberta	➤ Power of Attorney/Enduring Power of Attorney ➤ Document showing that the Representative has been appointed as the trustee for the Tobacco-Victim ➤ Supporting Decision Making Authorization ➤ Document confirming the Public Guardian and Trustee's appointment as trustee ➤ Conditional Enduring Power of Attorney appointing an attorney and has either: • come into force on the lack of capacity of the Tobacco-Victim; or • come into force on another contingent event and Tobacco-Victim still has capacity
Saskatchewan	➤ Continuing Power of Attorney for Property ➤ Property Power of Attorney/Enduring Power of Attorney for Property ➤ Contingent Power of Attorney for Property that has either: • come into force on the lack of capacity of the Tobacco-Victim; or • come into force on another contingent event (Tobacco-Victim has capacity) ➤ Court Appointment — co-decision maker for property ➤ Court Appointment — temporary property guardian ➤ Court Appointment — property guardian
Manitoba	➤ Power of Attorney ➤ Enduring Power of Attorney ➤ Springing Power of Attorney that has either: • come into force on the mental incompetence of the Tobacco-Victim; or • come into force on another contingent event (Tobacco-Victim is competent) ➤ Order of Committeeship — for Committee of Property ➤ Order of Committeeship — for Committee of Property and Personal Care

	98 ➤ Document confirming the Public Guardian and Trustee is appointed as Committee of Property and Personal Care ➤ Document confirming the Representative's appointment as substitute decision-maker for property matters
Ontario	➤ Power of Attorney for Property ➤ Continuing Power of Attorney for Property ➤ Proof of Representative's appointment as Guardian of Property from the Office of the Public Guardian and Trustee ➤ Proof of Representative's appointment as Guardian of Property by the Court
New Brunswick	➤ Power of Attorney for Property ➤ Enduring Power of Attorney for Property ➤ Enduring Power of Attorney for Property and Personal Care ➤ Document showing that the Representative has been appointed as the Committee of the Estate of the Tobacco-Victim ➤ Proof of appointment as decision-making supporter for financial matters
Nova Scotia	➤ Power of Attorney ➤ Enduring Power of Attorney ➤ Court Appointed Guardian Document ➤ Court-appointed Representative - financial matters per Representation Order
Prince Edward Island	➤ General Power of Attorney ➤ Court appointment as the Committee of the Estate
Newfoundland and Labrador	➤ Enduring Power of Attorney ➤ Power of Attorney ➤ Court-issued Letters of Guardianship
Yukon	➤ Enduring Power of Attorney ➤ Document confirming the Representative's appointment as Temporary Guardian with financial authority ➤ Guardianship Order

Northwest Territories	99 ➤ Power of Attorney that has: ▪ come into force on the mental incapacity of the Tobacco-Victim; or ▪ come into force on another contingent event (Tobacco-Victim has capacity); or ▪ remains valid despite any later mental incapacity of the Tobacco-Victim ➤ Enduring Power of Attorney ➤ Springing Power of Attorney that has either: ▪ come into force on the incapacity of the Tobacco-Victim; or ▪ come into force on another contingent event (Tobacco-Victim has capacity) ➤ Order Appointing the Representative as the Trustee ➤ Order Appointing the Public Trustee as Trustee
Nunavut	➤ Power of Attorney that has: ▪ come into force on the mental incapacity of the Tobacco-Victim; or ▪ come into force on another contingent event (Tobacco-Victim still has capacity); or ▪ remains valid despite any later mental incapacity of the Tobacco-Victim ➤ Enduring Power of Attorney ➤ Springing Power of Attorney that has either: ▪ come into force on the mental incapacity of the Tobacco-Victim; or ▪ come into force on another contingent event (Tobacco-Victim still has capacity) ➤ Order appointing the Representative as Trustee for the Tobacco-Victim ➤ Order Appointing the Representative as the Trustee ➤ Order Appointing the Public Trustee as Trustee

Quebec	100 ➤ Power of Attorney with court-filed proceedings for mandate homologation or adult tutorship ➤ Protection mandate with certified judgment of homologation ➤ Certified copy of the judgment ordering the tutorship ➤ Certified copy of minutes and conclusions of the notary opening tutorship ➤ Certified copy of the judgment ordering Curatorship, dated prior to November 1, 2022 ➤ Certified copy of minutes and conclusions of the notary ordering curatorship, dated prior to November 1, 2022 ➤ Detailed mandate with court-filed proceedings (incl. file #) for mandate homologation or adult tutorship ➤ Certified court order appointing a provisional property administrator for the claimant

If you need any assistance, please reach out to the PCC Agent, Epiq, at the following contact information:

Email: PCCAgent@TobaccoClaimsCanada.ca
Phone: 1-888-482-5852
Website: www.TobaccoClaimsCanada.ca

Attachment D

Official Court Notice

If you smoked regularly before Nov. 20, 1998, and were diagnosed with a tobacco-related disease before March 12, 2012, you may qualify for \$24,000-\$100,000 from a landmark settlement for Quebec residents.

QCAP Plan—Detailed Information

Why is there a settlement? In March 2019, Imperial Tobacco Canada Limited, Rothmans, Benson & Hedges Inc. and JTI-Macdonald Corp (the “Tobacco Companies”) began insolvency proceedings in Canada under the *Companies’ Creditors Arrangement Act*, R.S.C. 1985, c. C-36 (“CCAA”), following a class-action judgment in Quebec ordering them to pay over \$13.5 billion. As part of the CCAA proceedings, the Tobacco Companies participated in court-supervised mediation to reach a Global Settlement with their creditors, including all Provinces and Territories, the Plaintiffs from the Quebec class action, their representative counsel, and PCC Representative Counsel appointed by the Court to represent Canadian tobacco-victims, other than those covered by the Quebec class action. On March 6, 2025, Chief Justice Geoffrey B. Morawetz of the Ontario Superior Court of Justice (Commercial List) (“CCAA Court”) approved the Settlement.

What are “QCAP” and “PCC”? As part of the Settlement, two compensation plans were created to compensate eligible smokers and ex-smokers diagnosed with Lung Cancer, Throat Cancer or Emphysema or COPD (GOLD Grade III or IV):

1. The Pan-Canadian Claimants’ Compensation Plan (“PCC Compensation Plan”) – for people diagnosed in Canada between March 8, 2015 and March 8, 2019, inclusive of those dates, and in some cases their estates; and
2. The Quebec Class Action Administration Plan (“QCAP Plan”) – for *Blais* Class Members diagnosed in Quebec before March 12, 2012, and their heirs.

This document is specifically related to the QCAP Plan. Information about the PCC Compensation Plan is available at www.TobaccoClaimsCanada.ca.

Who is a “Tobacco-Victim”? A “Tobacco-Victim” is a person who suffers from a Tobacco-Related Disease. Tobacco-Victims who meet the QCAP Eligibility Criteria are eligible for compensation under the QCAP Plan. If the Tobacco-Victim is deceased, but was alive on November 20, 1998, their estate or heirs (referred to as a “Succession Claimant”) are eligible for compensation.

Who is a “Succession Claimant”? A “Succession Claimant” is either (i) the liquidator of the estate of a deceased Tobacco-Victim, (ii) an Heir of a deceased Tobacco-Victim or (iii) an heir of an Heir of a deceased Tobacco-Victim. There is a specific claim form, the QCAP Succession Claim Form, to be used by Succession Claimants. The QCAP Succession Claim Form outlines the documentation required by a Succession Claimant to prove that they are entitled to file the claim.

Who is an “Heir” of a Tobacco-Victim? An “Heir” for purposes of the QCAP Plan, is a person (i) who is named in the deceased Tobacco-Victim’s will or in a registered marriage contract, or (ii) who is entitled by operation of law per the Civil Code of Quebec to share in the deceased Tobacco-Victim’s estate. If the Heir is deceased, the estate or heirs of the Heir are entitled to the Heir’s share of the compensation payment.

What does “QCAP Eligibility Criteria” mean? In a legal context, “criteria” means standards on which a judgment or decision may be based. To be eligible to receive compensation under the QCAP Plan, a Tobacco-Victim must satisfy four criteria types: (1) smoking history; (2) disease diagnosis before March 12, 2012; (3) resident of Quebec; and (4) alive on November 20, 1998.

QCAP COMPENSATION AMOUNTS AND PAYMENTS

How much compensation could I be approved for? The following table shows the *maximum* amounts available to claimants that meet the Eligibility Criteria for each disease covered by the QCAP and PCC Compensation Plans. Eligible claimants will receive compensation for the one disease that results in the highest payment.

Disease	You started smoking before January 1, 1976	You started smoking on or after January 1, 1976
Primary Lung Cancer or Primary Throat Cancer	\$100,000 QCAP \$60,000 PCC	\$80,000 QCAP \$48,000 PCC
Emphysema or COPD (GOLD Grade III or IV)	\$30,000 QCAP \$18,000 PCC	\$24,000 QCAP \$14,400 PCC

If my Claim is approved, will I receive the amount in the table? The table shows the *maximum* payment amount. Final payments may be reduced on a *pro rata* (proportionate) basis if the amount available to the QCAP Plan is not enough to pay all eligible claims. Final payment amounts will only be determined after the QCAP Claims Deadline has passed and all claims have been processed.

When could I receive a payment? If your claim is approved, payment will be issued after the QCAP Claim Deadline of **[Day Month] 20YY**, once all claims have been reviewed and decisions finalized. Once a payment date has been determined, it will be posted at www.TobaccoClaimsCanada.ca.

QCAP ELIGIBILITY CRITERIA AND REQUIRED PROOF

To qualify for compensation under the QCAP Plan, the Tobacco-Victim must meet all of the following QCAP Eligibility Criteria.

Smoking History

Which cigarettes brands are covered? The Tobacco-Victim must have smoked cigarettes sold by the Tobacco Companies in Canada. A complete list of eligible brands is provided in **Attachment A - Cigarettes Sold by The Tobacco Companies**.

How many cigarettes must have been smoked to qualify? The Tobacco-Victim must have smoked at least 87,600 cigarettes sold by the Tobacco Companies in Canada between January 1, 1950 and November 20, 1998. This is also called "Twelve Pack-Years", which means any combination of cigarettes sold by the Canadian Tobacco Companies that adds up to 87,600. For example:

- 10 cigarettes smoked per day for 24 years ($10 \times 365 \times 24$) = 87,600 cigarettes sold by the Canadian Tobacco Companies;
- 20 cigarettes smoked per day for 12 years ($20 \times 365 \times 12$) = 87,600 cigarettes sold by the Canadian Tobacco Companies.

The smoking can be over multiple time periods, even with breaks in between. To help determine the number of cigarettes smoked, a calculator is available at www.TobaccoClaimsCanada.ca.

How to prove Smoking History? You will be asked to provide the Tobacco-Victim's smoking history on the QCAP Claim Form, which must be signed and sworn before a Commissioner of Oaths or Notary Public.

Compensable Disease Diagnosis Before March 12, 2012

What diseases qualify for compensation? The Tobacco-Victim must have been diagnosed with at least one of the following diseases (the "**Compensable Diseases**") before March 12, 2012 to qualify for compensation:

1. Primary lung cancer; or
2. Primary cancer (squamous cell carcinoma) of the larynx, oropharynx, or the hypopharynx (throat cancer); or
3. Emphysema or COPD (GOLD Grade III or IV).

If the Tobacco-Victim's diagnosis date of at least one of the above diseases was between March 8, 2015 and March 8, 2019 (inclusive of those dates) you may be eligible for compensation as part of the PCC Plan provided the Tobacco-Victim was alive on March 8, 2019. If this is the case, please contact the PCC Agent (Epiq) for more information.

What does "primary cancer" mean? "Primary cancer" refers to the original site where the cancer first develops. Sometimes cancer cells spread to other parts of the body - this is called a secondary or metastatic cancer.

What does "COPD (GOLD Grade III or IV)" mean? The Global Initiative for Chronic Obstructive Lung Disease ("GOLD") developed a four-grade COPD classification system based upon severity of airflow limitation and other diagnostic parameters. GOLD Grade III (severe) and IV (very severe) classifications represent the two most severe categories of disease.

How do I show proof of diagnosis? The Régie de L'assurance Maladie du Québec (RAMQ) and the Ministère de la Santé et des Services sociaux (MSSS) may hold, in the Registre québécois du cancer and in the MED-ÉCHO database respectively, the information necessary to establish that a Tobacco-Victim was diagnosed with a Compensable Disease before March 12, 2012 (referred to as an “**Official Confirmation**”). In the Claim Form, the Tobacco-Victim or the Succession Claimant, as the case may be, will authorize the Claims Administrator to request an Official Confirmation from these sources. If an Official Confirmation is obtained, this constitutes proof of diagnosis, and the claimant will not need to submit any supplemental information.

What if an Official Confirmation cannot be obtained? If an Official Confirmation cannot be obtained from RAMQ or MSSS, you will be notified by the QCAP Agent or the Claims Administration. In such case, you will need to provide alternative proof. This consists of:

- For Lung Cancer and Throat Cancer - a copy of a pathology report confirming the diagnosis;
- For Emphysema and COPD - a copy of a report of a spirometry test (performed before March 12, 2012) that demonstrates a FEV1 (non-reversible) of less than 50% of the predicted value.

If you are unable to provide one of the above documents, you may submit one of the following alternatives confirming the diagnosis:

- a copy of an extract from a medical file, confirming the diagnosis;
- a completed Physician's Form (available on www.TobaccoClaimsCanada.ca);
- a written statement from a Physician (of the Tobacco-Victim or another physician having access to the Tobacco-Victim's medical records) along with at least one of the following records:
 - For Lung or Throat Cancer: pathology report, operative report, biopsy report, MRI report, CT scan report, PET scan report, X-ray report, sputum cytology report.
 - For Emphysema or COPD (GOLD Grade III or IV): Spirometry report; or CT scan report.

Please note that you do not need to submit alternative proof unless it has been specifically requested of you.

What if I was diagnosed with another smoking-related disease? Only Lung Cancer, Throat Cancer, Emphysema and COPD (GOLD Grade III or IV) are covered by the QCAP Plan. However, a \$1 billion charitable foundation has been created as part of the CCAA Plans to fund research, programs and initiatives aimed at improving outcomes in Tobacco-related Diseases, which will indirectly benefit those who do not qualify for direct compensation. To learn more about the charitable foundation go to: **[insert URL for website]**.

Residency Questions on the QCAP Claim Form

Under the QCAP Plan, a person's place of residence is the province or territory that issued their health insurance card and/or their driver's licence. A Tobacco-Victim must answer “Yes” to the applicable residency questions on the QCAP Claim Form in order to be eligible for compensation:

1. Residency at time of Diagnosis. The QCAP Claim Form asks, “Did the Tobacco-Victim reside in Quebec on the date of diagnosis?” The residence on the date of diagnosis may generally be established based on a Tobacco-Victim's health insurance card number issued by Quebec that appears on the medical documents showing a QCAP Compensable Disease.
2. Residency at time of submitting a claim (or at time of death). If the Tobacco-Victim is living, the QCAP Claim Form asks: “Does the Tobacco-Victim currently reside in Quebec?” If the Tobacco-Victim is deceased, the QCAP Claim Form asks: “Did the Tobacco-Victim reside in Quebec on the date of their death?” Residence at death is proven by submitting one of the acceptable documents listed in the QCAP Succession Claim Form.

Alive on November 20, 1998

What if the Tobacco-Victim died before November 20, 1998? To qualify, the Tobacco-Victim must have been alive on November 20, 1998, and meet all other QCAP Eligibility Criteria. If the Tobacco-Victim is now deceased but was alive on that date, the Succession Claimant must submit a Succession Claim Form and, depending on the status of the Succession Claimant, submit the appropriate Sub-Form to: (i) prove the Tobacco-Victim's death and date of death; and (ii) verify their legal authority to submit the claim on behalf of the Estate or a deceased Tobacco-Victim, as liquidator, Heir, or heir of an Heir.

What if the Tobacco-Victim dies after submitting a QCAP Claim Form? If the Tobacco-Victim dies after submitting their complete Claim Package but before receiving payment, the Claims Administrator will still review the claim. If the claim is approved, the compensation will be payable to the Estate of the Tobacco-Victim. In that circumstance, the duly authorized Legal Representative of the Estate will need to submit additional information to receive the payment. Please contact the QCAP Agent for assistance.

CAN A CLAIMANT BE REPRESENTED BY ANOTHER PERSON?

The QCAP Plan allows claims to be submitted by a representative in cases where appropriate legal documents are provided. If the claimant has capacity, a power of attorney or detailed mandate is required for a representative to file a claim on the claimant's behalf. If the claimant is incapacitated, the representative will need to provide: (a) a Protection Mandate or Mandate in case of Incapacity, homologated by a judgment (b) a judgment ordering tutorship to the claimant, (c) a judgment ordering curatorship to the claimant (prior to November 1, 2022) or (d) an order naming the representative a provisional administrator to the property of the claimant. However, payments will only be made in the name of the claimant, not in the name of the representative.

HOW TO SUBMIT YOUR CLAIM AND COMMISSIONING

When is the deadline to submit a QCAP Claim? The QCAP Claim Deadline is **[Day Month] 20YY**. You may submit a QCAP Claim any time during a 12-month submission period from [start date] to **[Day Month] 20YY**. For your Claim to be considered, it must be postmarked or received by **[Day Month] 20YY**.

NOTE: The PCC Plan has a different Claim Submission Period and Claim Deadline. The PCC Plan Claim Submission Period is twenty-four (24) months (rather than twelve (12) months) and the PCC Claim Deadline is Month DD, 20YY.

Which claim form version should I use? Use the QCAP Tobacco-Victim Claim Form if the Tobacco-Victim is living and the QCAP Succession Claim Form if the Tobacco-Victim is deceased.

Where can I get the QCAP Claim Form? If you received this document by postal mail, a copy of the QCAP Claim Form should have been included in the envelope. A PDF version is also available at www.TobaccoClaimsCanada.ca. However, the Claims Administrator encourages you to seek assistance from the QCAP Agent (Proactio) or use the Claims Administrator's online Claimant Portal instead of submitting a paper Claim Form. On the Claimant Portal, you can create an account with a Username and Password, start a claim and return to it any time before the Claim Deadline. You can submit your Claim Form and securely upload supporting documents, as required. If you provide permission, the QCAP Agent can access the information you have entered on the Claimant Portal and assist you for free with preparing your Claim.

How can I submit my QCAP Claim Form? The QCAP Claim Form explains the multiple ways you can submit your Claim, which includes online, postal mail, email, or fax. The preferred claims submission methods are via the QCAP Agent (Proactio) or the online Claimant Portal.

Can I submit more than one Claim Form? No. You are only permitted to make one Claim for compensation under either the QCAP or PCC Plan. You cannot make a claim to both Claims Processes at the same time. If you think you have a claim under the QCAP Plan, apply to the QCAP Plan, through the QCAP Agent (Proactio). The QCAP Agent (Proactio) will be able to verify if you also have a claim under the PCC Compensation Plan that could result in higher compensation for you, and if appropriate, will assist you to transfer your claim to the PCC Agent. If you need any assistance in determining where to file, please contact the Claims Administrator.

What is needed for a complete QCAP Claim submission? A Claim is complete when (a) the QCAP Claim Form has been answered completely with no information missing, and consent has been given to request an Official Confirmation, (b) all required supporting documents are attached or uploaded, (c) the QCAP Claim Form's Statutory Declaration is signed in front of a Commissioner of Oaths of Notary Public (see below), and (d) the Claim Form and supporting documents have been submitted to the Claims Administrator by the QCAP Claim Deadline. The QCAP Agent can assist you in evaluating your Claim before it is submitted and identify potentially incomplete information and/or documentation.

What is commissioning? To complete your Claim Form, you must sign the Statutory Declaration in front of a Commissioner of Oaths or Notary Public. A Commissioner of Oaths will confirm your identity and that you swear or affirm your information is true. Every lawyer, some paralegals and all notaries are Commissioners of Oaths.

The QCAP Agent can commission the Statutory Declaration free of charge, using a secure online signing system called DocuSign. You will need a computer, smartphone or tablet for a video-call with the QCAP Agent, who will watch you sign the declaration. If you want help commissioning from the QCAP Agent, make sure your Claim Form is otherwise complete and ready to submit several weeks before the Claim Deadline of **[Day Month] 20YY** so there is enough time to schedule the remote signing. The QCAP Agent can also help you find an alternative way to meet the commissioning requirement.

WHAT HAPPENS AFTER I SUBMIT MY CLAIM?

How long may the review of my claim take? The Claims Administrator will send you an **Acknowledgement of Receipt of Claim** when your claim is received. Review times will vary depending on how many claims are received, when your Claim is submitted, whether documents are missing or complex and whether your Claim raises unique questions. Review of your Claim may not be complete until after the Claim Deadline.

If Your Claim is Accepted, the Claims Administrator will send you a **Notice of Acceptance of QCAP Claim**.

If Your Claim is Incomplete, the Claims Administrator will send you a **Notice of Incomplete Claim** to explain what is missing and how to fix it. The deadline to resubmit your revised claim will be the later of: (a) the QCAP Claims Deadline; or (b) sixty (60) days from the date of the Notice of Incomplete Claim. If you do not respond by that deadline, your Claim will be rejected.

If Your Claim is Rejected, you will be sent a **Notice of Rejection** explaining the reason(s) for the rejection. The Notice will include a **Request for Review Form**. If you believe your Claim was improperly rejected, you may request a review within sixty (60) days of the date of the Notice of Rejection clearly identifying the error you believe the Claims Administrator made during the initial assessment of your claim. The Claims Administrator will assign an independent Review Officer, who may confirm, reverse, or vary the original decision.

QCAP AGENT SUPPORT

The QCAP Agent can help you, **free of charge**, with: (a) answering questions and filling out the QCAP Claim Form based on information you provide; (b) commissioning your signature on the QCAP Claim Form; and (c) providing guidance on how to obtain the necessary information and documents for your claim.

Can the QCAP Agent tell me if I qualify? No. Only the Claims Administrator can decide if a claim qualifies under the QCAP Plan. However, the QCAP Agent can identify gaps in your Claim Package.

Do I need to hire a lawyer to submit my Claim? No. The QCAP Plan was designed so that you can complete a Claim without hiring a lawyer or paying for third-party services. Also, the CCAA Court has issued an order prohibiting lawyers or other persons from soliciting you in the preparation or submission of your Claim. If you receive any such solicitation, report it to the QCAP Agent (Proactio) right away by phone or email.

Exception - Estate-Related Legal Help: In some cases, Succession Claimants may need to consult a lawyer or a notary at their own cost, for example if they previously renounced the Tobacco-Victim's succession and wish to retract the renunciation, or if there is a dispute amongst the Heirs or heirs of Heirs.

How do I get more information? Call the QCAP Agent: **1-888-880-1844**, or email: **tabac@proactio.ca**. Visit **www.TobaccoClaimsCanada.ca** for FAQs, tools, and the full Quebec Administration Plan.

ATTACHMENT A: CIGARETTES SOLD BY THE TOBACCO COMPANIES

Accord	du Maurier	North American Spirit
Accord KF	du Maurier Light	Number 7
Avanti/Light	du Maurier Special	Number 7 Lights
B&H	du Maurier Ultra Light	Peter Jackson
B&H 100 Del.UL.LT/MEN	Dunhill	Peter Jackson Extra Light KF
B&H 100 F	Dunhill KF	Player's
B&H 100 F Menthol	Export	John Player's Special
B&H Light Menthol	Export "A"	Player's Extra Light
B&H Lights	Export "A" Lights	Player's Filter
B&H Special KF	Export "A" Medium	Player's Light
B&H Special Lights KF	Export "A" Extra Light	Player's Medium
B&H Light Menthol	Export "A" Special Edition	Player's Plain
Belmont	Export "A" Ultra Light	Rothmans
Belmont KF	Export Mild	Rothmans Extra Light
Belvedere	Export Plain	Rothmans KF
Belvedere Extra Mild	LD	Rothmans Light
Camel	Macdonald	Rothmans Special
Cameo	Macdonald Menthol	Rothmans UL LT KF
Cameo Extra Mild	Mark Ten	Spirit
Craven "A"	Mark Ten Filter	Select Special/Ultra Mild/Menthol
Craven "A" Special	Matinee	Vantage
Craven "A" Light	Matinee Extra Mild	Vantage KF
Craven "A" Ultra Light/Mild	Matinee Slims/Menthol	Vantage Light/Menthol
Craven "M"	Matinee Special/Menthol	Viscount
Craven "M" KF	Medallion	Viscount #1 KF
Craven "M" Special	More	Viscount Extra Mild/Menthol
		Winston

Attachment E



Submission Deadline:
[Day Month], 20XX

Tobacco Claims Canada
Claims Administrator
P.O. Box 2958 STN B
Ottawa ON K1P 5W9

<<Barcode>>

<<Name>>

<<Address1>>

<<Address2>>

<<Address3>>

<<City>> <<Province>> <<Zip>> OR <<Country>>

Quebec Class Action Administration Plan (QCAP) TOBACCO-VICTIM CLAIM FORM

GENERAL INSTRUCTIONS

Submit Your Claim Online:



You can scan the QR code or visit
www.TobaccoClaimsCanada.ca
to file your claim. If you file your
claim online, it must be submitted by
11:59 p.m., Eastern, on Day Month, 20XX.



A completed Claim Form, along with any required accompanying documents, must be submitted to the Claims Administrator by **no later than the deadline of [day month, year] by 11:59 p.m., Eastern**, to receive financial compensation from the Quebec Class Action Administration Plan (the “**QCAP Plan**”).

You do not need a lawyer to submit a claim in the QCAP Plan. Proactio, the QCAP Agent, has been mandated to help you submit your claim, at no additional cost to you. If you need any assistance, please reach out to Proactio at the following contact information:

① **Phone: 1-888-880-1844**

✉ **Email: tabac@proactio.ca**

💻 **Website: www.RecoursTabac.com**

The QCAP Plan will provide compensation to individuals who meet the QCAP Eligibility Criteria, described below, and who submit a complete Claim Form, along with any required supporting documents, by the deadline. Such individuals are referred in the QCAP Claim Forms as **“Tobacco-Victims”** collectively, and a **“Tobacco-Victim”** individually.

The QCAP Plan will also provide compensation to the estates or heirs of Tobacco-Victims who **died after November 20, 1998**, as well as to the estates or heirs of the heirs of Tobacco-Victims who died after November 20, 1998. These groups are referred to in the QCAP Claim Forms as **“Successions”** collectively, and each individually, as a **“Succession.”**

To be eligible to receive financial compensation, the Tobacco-Victim must meet **all** of the following QCAP Eligibility Criteria. They must:

1. reside in Quebec (or if deceased, have resided in Quebec at the time of their death);
2. have smoked a minimum of twelve pack-years of cigarettes sold by the Canadian Tobacco Companies **between January 1, 1950 and November 20, 1998**;

Note: You may use the calculator available at www.TobaccoClaimsCanada.ca/en/HomePCC/Calculator to help determine the number of cigarettes the Tobacco-Victim smoked.

3. have been diagnosed **before March 12, 2012** with:
 - (a) Primary lung cancer; or
 - (b) Primary cancer (squamous cell carcinoma) of the larynx, the oropharynx or the hypopharynx (throat cancer); or
 - (c) Emphysema or COPD (GOLD Grade III or IV).
4. have resided in Quebec on the date of diagnosis with lung cancer, throat cancer, emphysema, or COPD (GOLD Grade III or IV). **AND**
5. have been alive on **November 20, 1998**.

QCAP Claim Forms

A QCAP Claim Form must be completed and submitted to the Claims Administrator in order to receive financial compensation from the QCAP Plan.

There are two QCAP Plan Claim Forms:

The **Tobacco-Victim Claim Form** should be used if:

- You are a Tobacco-Victim, making a claim on your own behalf; or
- You are a Representative of living a Tobacco-Victim with a mandate or power of attorney to represent such individual.

The **Succession Claim Form** should be used if:

- You are the liquidator of the estate of a Tobacco-Victim;
- You are an heir of a Tobacco-Victim and the estate is closed;
- You have a mandate or power of attorney to represent the heir of a Tobacco-Victim;
- You are the heir of an heir of a Tobacco-Victim that would have been entitled to make a claim.

Claims Deadline

Your QCAP Claim Form, together with any required supporting documents, must be submitted to the Claims Administrator no later than 11:59 p.m., Eastern, on [Day Month, 20XX].

How to File a Claim

You can file your Claim Form with supporting documents in any of the following ways:

-  **Online**, through the Claims Administrator's website at www.TobaccoClaimsCanada.ca
-  **Email** to info@TobaccoClaimsCanada.ca
-  **Fax** to 1-866-262-0816
-  **Registered Mail**, sent to the following address postmarked by [Day Month, Year]:

Tobacco Claims Canada
Claims Administrator
P.O. Box 2958 STN B
Ottawa ON K1P 5W9

Your claim will be deemed to be received **only when the Claim Form and any required supporting documents are received by the Claims Administrator**. Claimants will be sent an Acknowledgement of Receipt of Claim by email or mail once their Claim Form has been received by the Claims Administrator. You must keep the record of transmission of your Claim Form until you receive the Acknowledgement of Receipt of Claim.

PLEASE DO NOT SUBMIT YOUR CLAIM MORE THAN ONCE OR THROUGH MULTIPLE METHODS.

The PCC Compensation Plan and Eligibility Criteria

If the Tobacco-Victim **does not meet** the above QCAP Eligibility Criteria, they may still be eligible to receive compensation under a separate compensation plan called the Pan-Canadian Claimant Compensation Plan ("**PCC Compensation Plan**"). To qualify under the PCC Compensation Plan, the Tobacco-Victim must meet all of the following criteria. They must:

1. reside in any Province or any Territory of Canada (or if deceased, have resided in Canada at the time of their death);
2. have been alive on **March 8, 2019**;
3. have smoked a minimum of twelve pack-years of cigarettes sold by the Canadian Tobacco Companies **between January 1, 1950 and November 20, 1998**;

Note: You may use the calculator available at www.TobaccoClaimsCanada.ca/en/HomePCC/Calculator to help determine the number of cigarettes the Tobacco-Victim smoked.

4. have been diagnosed **between March 8, 2015 and March 8, 2019** (inclusive of those dates) with:
- (a) Primary lung cancer; or
 - (b) Primary cancer (squamous cell carcinoma) of the larynx, the oropharynx or the hypopharynx (throat cancer); or
 - (c) Emphysema or COPD (GOLD Grade III or IV).

AND

5. have resided in any Province or any Territory of Canada on the date of diagnosis with lung cancer, throat cancer, emphysema or COPD (GOLD Grade III or IV).

A Tobacco-Victim will only be eligible for compensation under one plan and will be paid for the disease under the Plan which provides the highest amount of compensation to them. You cannot apply to both plans at the same time.

If you think you have a claim under the QCAP Plan, apply to the QCAP Plan, through the QCAP Agent (Proactio). The QCAP Agent (Proactio) will be able to verify if you also have a claim under the PCC Compensation Plan that could result in higher compensation for you, and if appropriate, will assist you to transfer your claim to the PCC Agent.

If you need any assistance in determining where to file, please contact the Claims Administrator.

Privacy and Confidentiality Declaration by the Claims Administrator

By submitting this Claim Form, the Tobacco-Victim or Representative of the Tobacco-Victim, as applicable, confirms that they have reviewed and agree to the collection, use, and disclosure of personal information as described below.

All personal information collected by the Claims Administrator through the Claims Process will be kept confidential in accordance with the Personal Information Protection and Electronic Documents Act, S.C. 2000, c. 5 and the Privacy Policy found on the Claims Administrator's website at www.TobaccoClaimsCanada.ca/en/Home/Privacy. This information is collected only for the purpose of administering the QCAP Plan and to assess the Claimant's eligibility to receive compensation.

The personal information of the Tobacco-Victim, including personal health information, may be collected, used, and disclosed by the Claims Administrator and the QCAP Agent (Proactio) to provide Agent and Claims Administration services. It will not be disclosed without the express written consent of Tobacco-Victim or Succession Claimant, except as provided for in the QCAP Plan, as required by law or Court Order, or if it is necessary to share with a future Court-appointed Claims Administrator in connection with the QCAP Claims Process. This information may not be used or disclosed for any other purpose.

For additional information, please visit the Claim Administrator's website at
www.TobaccoClaimsCanada.ca.

PART 1: INFORMATION ABOUT THE TOBACCO-VICTIM

Important: Before completing this Claim Form, we strongly recommend that you read the instructions in Attachment A to avoid delays or rejection.

We also suggest that you reach out to the QCAP Agent (Proactio) for assistance with your claim.

The Tobacco-Victim

1) Tobacco-Victim's full legal name:

Last Name:

First Name:

Middle Name (if applicable):

2) Tobacco-Victim's date of birth (YYYY-MM-DD):

3) Tobacco-Victim's Health Insurance Card Number (e.g., ABCD 1234 5678):

4) Did the Tobacco-Victim reside in Quebec on the date of diagnosis with primary lung cancer, primary squamous cell carcinoma of the larynx, oropharynx, hypopharynx (throat cancer), emphysema or COPD (GOLD Grade III or IV)?

☐ Yes ☐ No

5) Does the Tobacco-Victim currently reside in Quebec?

☐ Yes ☐ No

Representative of Tobacco-Victim

Please only fill out Question 6 and 7 if you are the Representative of a Tobacco-Victim. If you are the Tobacco-Victim, proceed to Question 8.

6) Full legal name of the Tobacco-Victim's Representative:

Last Name:

First Name:

7) Mandate, Judgment, and/or Order pursuant to which the Representative is acting?

☐ Power of Attorney or Detailed Mandate (for represented Tobacco-Victims with capacity only)

☐ Protection Mandate or Mandate in case of Incapacity, homologated by a judgment

☐ Judgment ordering tutorship to the Tobacco-Victim

☐ Judgment ordering curatorship to the Tobacco-Victim (prior to November 1, 2022)

☐ Order naming a provisional administrator to the property of the Tobacco-Victim

A copy of the mandate, judgment, and/or order pursuant to which the Tobacco-Victim's Representative is acting must be attached and marked with the Tobacco-Victim's Health Insurance Card Number and the words "Representative's Mandate". If submitting your Proof of Claim electronically, please save the all documents in one PDF file and name the document "[Health insurance card number of the Tobacco-Victim]-Representative's Mandate.pdf".

Contact Information

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Note: If you are the Tobacco-Victim, insert your mailing address and contact information. If you are the Representative of a Tobacco-Victim provide your own mailing address and contact information.

8) Provide your mailing address:

Number:	Street:	Apartment:
City/Town:	Province:	Postal Code:
Country:		

9) Provide your contact information:

Phone:	Fax:
Email:	

10) Which language should be used for communication?

- ☐ English ☐ French

PART 2: PROOF OF DIAGNOSIS

Diagnosis before March 12, 2012

1) Was the Tobacco-Victim diagnosed before March 12, 2012 with any of the following diseases? For all that apply, indicate the date of diagnosis and the place where the Tobacco-Victim was resident on the date of diagnosis.

☐ **Primary Lung Cancer**

Date of diagnosis (YYYY-MM-DD):	
Place of residence on date of diagnosis:	

☐ **Primary squamous cell carcinoma of the larynx, oropharynx, or hypopharynx (Throat Cancer)**

Date of diagnosis (YYYY-MM-DD):	
Place of residence on date of diagnosis:	

☐ **Emphysema or COPD (GOLD Grade III or IV)**

Date of diagnosis (YYYY-MM-DD):	
Place of residence on date of diagnosis:	

Please note, in the case of recurrence or relapse, please indicate the initial date of diagnosis only.

2) Authorization to obtain Official Confirmation of Diagnosis:

I hereby authorize the Claims Administrator to obtain a copy of the Tobacco-Victim's medical information relating to the diseases/diagnoses referenced in Question 1 above, and authorize the PCC Agent, the QCAP Agent, MSSS and/or the RAMQ, as applicable, to provide the Claims Administrator with copies of any of the following:

- A confirmation of the Tobacco-Victim's diagnosis from the Quebec Cancer Registry;
- An extract from RAMQ files confirming the Tobacco-Victim's diagnosis;
- An extract from the MED-ÉCHO database confirming the Tobacco-Victim's diagnosis; and
- All other medical files relating to the Tobacco-Victim.

☐ **By checking this box, I authorize Tobacco-Victim's above-referenced medical information to be released to the Claims Administrator.**

General Questions? Contact the Claims Administrator at 1-888-482-5852 or email info@TobaccoClaimsCanada.ca.
Need Claim Form help? Contact the QCAP Agent (Proactio) at 1-888-880-1844 or email tabac@proactio.ca.

If an official confirmation of disease/diagnosis cannot be made through these means, the Claims Administrator will contact you to request the submission of an alternative method of proof.

Do not submit any alternative evidence unless it has been explicitly requested by way of a Notice from the Claims Administrator titled "Notice to Provide Alternative Proof."

PART 3: PROOF OF SMOKING HISTORY

1) The Tobacco-Victim started smoking cigarettes:

- ☐ Before January 1, 1976;
- ☐ On or after January 1, 1976.

2) Between January 1, 1950 and November 20, 1998 the Tobacco-Victim smoked approximately _____ cigarettes per day for approximately _____ years.

OR

3) If the number of cigarettes the Tobacco-Victim smoked varied between January 1, 1950 and November 20, 1998, provide a summary below of the number of cigarettes the Tobacco-Victim smoked during that period of time:

- a) Smoked approximately _____ cigarettes per day between (YYYY) _____ and (YYYY) _____;
- b) Smoked approximately _____ cigarettes per day between (YYYY) _____ and (YYYY) _____;
- c) Smoked approximately _____ cigarettes per day between (YYYY) _____ and (YYYY) _____;
- d) Smoked approximately _____ cigarettes per day between (YYYY) _____ and (YYYY) _____;
- e) Smoked approximately _____ cigarettes per day between (YYYY) _____ and (YYYY) _____.

If more space is needed, attach additional sheet(s) to this Claim Form.

4) That I believe that the Tobacco-Victim regularly smoked the following brands of cigarettes. Check **all** that apply:

☐ **Accord**

- Accord KF

☐ **Avanti/Light**

☐ **B&H**

- B&H 100 Del.UL.LT/MEN
- B&H 100 F
- B&H 100 F Menthol
- B&H Light Menthol
- B&H Lights
- B&H Special KF
- B&H Special Lights KF

☐ **Belmont**

- Belmont KF

☐ **Belvedere**

- Belvedere Extra Mild

☐ **Camel**

☐ **Cameo**

- Cameo Extra Mild

☐ **Craven "A"**

- Craven "A" Special
- Craven "A" Light
- Craven "A" Ultra Light/Mild

☐ **Craven "M"**

- Craven "M" KF
- Craven "M" Special

☐ **du Maurier**

- du Maurier Light
- du Maurier Special
- du Maurier Ultra Light

☐ **Dunhill**

- Dunhill KF

☐ **Export**

- Export "A"
- Export "A" Lights
- Export "A" Medium
- Export "A" Extra Light
- Export "A" Special Edition
- Export "A" Ultra Light
- Export Mild
- Export Plain

☐ **LD**

☐ **Macdonald**

- Macdonald Menthol

☐ **Mark Ten**

- Mark Ten Filter

☐ **Matinee**

- Matinee Extra Mild
- Matinee Slims/Menthol
- Matinee Special/Menthol

☐ **Medallion**

☐ **More**

☐ **North American Spirit**

☐ **Number 7**

- Number 7 Lights

☐ **Peter Jackson**

- Peter Jackson Extra Light KF

☐ **Player's**

- John Player's Special
- Player's Extra Light
- Player's Filter
- Player's Light
- Player's Medium
- Player's Plain

☐ **Rothmans**

- Rothmans Extra Light
- Rothmans KF
- Rothmans Light
- Rothmans Special
- Rothmans UL LT KF

☐ **Select Special/Ultra Mild/Menthol**

☐ **Spirit**

☐ **Vantage**

- Vantage KF
- Vantage Light/Menthol

☐ **Viscount**

- Viscount #1 KF
- Viscount Extra Mild/Menthol

☐ **Winston**

PART 4: STATUTORY DECLARATION AND SIGNATURE

INSTRUCTIONS TO COMPLETE STATUTORY DECLARATION

You must sign the Statutory Declaration below in the presence of a Commissioner of Oaths, sometimes referred to as a Commissioner for taking Affidavits. Signing can be done remotely.

A Commissioner of Oaths is a person who is authorized to take affidavits or declarations by asking you to swear or affirm that the statements in a document are true. Every lawyer and some paralegals are Commissioners of Oaths.

If you need assistance, you may contact the QCAP Agent (Proactio) by phone toll-free (in Canada) at 1-888-880-1844, by email at tabac@proactio.ca, or online at www.RecoursTabac.com who can arrange for a Commissioner of Oaths to commission the signing of your Statutory Declaration before you submit your Claim Form to the Claims Administrator.

I, _____, solemnly declare that the information that I have provided on this Claim Form is true and correct and the documents submitted in support of my claim are genuine and have not been modified in any way whatsoever.

I make this solemn declaration conscientiously believing it to be true and knowing that it is of the same force and effect as if made under oath.

Where someone has helped me with this Claim Form, that person has read to me everything they wrote and included with this Claim Form, if necessary to allow me to understand the content of this completed Claim Form and any attachments to it, and I confirm that this information is true and correct.

this _____ day of _____, 20____.

Signature of Tobacco-Victim (or Representative)

SOLEMNLY AFFIRMED BEFORE ME, remotely

The Tobacco-Victim at _____.
(Town/City/Municipality)

The Commissioner of Oaths at _____.
(Town/City/Municipality)

Commissioner for Oaths Quebec Number

TOBACCO-VICTIM CLAIM FORM INSTRUCTIONS

As a person who has suffered from lung cancer, throat cancer, emphysema or COPD (GOLD Grade III or IV), you are considered a “Tobacco-Victim” under the terms of the QCAP Plan.

This document is intended to assist you in completing the Tobacco-Victim Claim Form and assembling the supporting documentation required to prove your claim.

If you require any assistance completing your Claim Form, please call the QCAP Agent (Proactio) toll-free at 1-888-880-1844 or send an email to tabac@proactio.ca or visit the QCAP Agent (Proactio) website at www.RecoursTabac.com.

PART 1: INFORMATION ABOUT THE TOBACCO VICTIM

In **Question 1**, provide the Tobacco-Victim’s full name.

In **Question 2**, provide the Tobacco-Victim’s birth date.

In **Question 3**, provide the Tobacco-Victim’s health insurance card number. This information is required to enable the Claims Administrator to make requests to the Ministry of Health and Social Services of Quebec (“MSSS”) and Régie de l’assurance maladie du Québec (“RAMQ”) for documents that will assist the Tobacco Victim Claimant proving the diagnosis and the date of diagnosis of the Tobacco-Victim’s tobacco-related disease(s).

In **Question 4**, confirm whether the Tobacco Victim resided in Quebec on the date of diagnosis with primary lung cancer, primary squamous cell carcinoma of the larynx, oropharynx, hypopharynx (throat cancer), emphysema or COPD (GOLD Grade III or IV).

In **Question 5**, indicate whether the Tobacco-Victim currently resides in Quebec.

In **Question 6**, if you are the Representative of a Tobacco-Victim, provide your full legal name.

In **Question 7**, provide the type of mandate pursuant to which you are acting as the Representative of the Tobacco-Victim. You must attach a copy of the mandate, power of attorney or judgment with the Claim Form, marked with the words “Representative’s Mandate”, followed by the Tobacco-Victim’s name on the front page of the document, and in the file name, if submitted electronically.

In **Questions 8 and 9**, provide your own mailing address and other contact information so that the Claims Administrator can communicate with you in respect of your claim. Note that the Claims Administrator will communicate with you by email, if an email address is provided. Please add the Claims Administrator’s email address info@TobaccoClaimsCanada.ca to your list of contacts to ensure that correspondence in connection with your claim reaches your Inbox.

In **Question 10**, indicate your language of preference for communications from the Claims Administrator.

To be eligible for compensation, the Tobacco-Victim must have been diagnosed **before March 12, 2012** with primary lung cancer, primary cancer (squamous cell carcinoma) of the larynx, oropharynx, hypopharynx, emphysema or COPD (GOLD Grade III or IV). These are the only diseases covered by the QCAP Plan.

In response to **Question 1**, indicate the disease(s) the Tobacco-Victim was diagnosed with, and for each, indicate the initial date of diagnosis. A recurrence or a relapse is not considered a primary cancer. In the case of a recurrence or relapse, only the initial diagnosis date should be indicated. Please note that the Tobacco-Victim Claimant will only receive compensation relating to the proven claim that entitles the Tobacco-Victim to the highest compensation.

If you do not recall the exact date of the Tobacco-Victim's diagnosis, please provide the most accurate estimate possible, as this information will be verified by the Claims Administrator.

If you need assistance, please contact the QCAP Agent (Proactio) at 1-888-880-1844 or send an email to tabac@proactio.ca or visit the QCAP Agent (Proactio) website at www.RecoursTabac.com.

In **Question 2**, you must provide your authorization for the QCAP Agent (Proactio) and the Claims Administrator to obtain medical information concerning the Tobacco-Victim from the sources listed therein for the purpose of confirming the diagnosis and the date of diagnosis of the disease(s) indicated in response to **Question 1**.

To facilitate the process of proving Tobacco-Victims' diagnoses for claimants, Class Counsel will request the official records, including from RAMQ, the MSSS, the Quebec Cancer Registry, and the MED-ÉCHO database. Both the QCAP Agent (Proactio) and the Claims Administrator will have access to this information.

If an official confirmation of disease/diagnosis cannot be made from these sources, the Claims Administrator will contact you to request that you submit an alternative method of proof. By way of example only, such proof may include:

- a copy of a pathology report which confirms that the Tobacco-Victim was diagnosed with Lung Cancer or Throat Cancer, as applicable, before March 12, 2012;
- a copy of a report of a spirometry test performed on the Tobacco-Victim before March 12, 2012, demonstrating a FEV1 (non-reversible) of less than 50% of the predicted value to establish a diagnosis of Emphysema or COPD (GOLD Grade III or IV);
- an extract from the Tobacco-Victim's medical records or a written statement of the Tobacco-Victim's Physician.

Do not submit any alternative evidence unless it has been explicitly requested from you by way of a Notice from the Claims Administrator entitled "Notice to Provide Alternative Proof."

If requested, when submitting your Alternative Proof electronically, please name the PDF document "[insert health insurance card number]-Alternative Medical Proof.pdf" as applicable.

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PART 3: PROOF OF SMOKING HISTORY

In **Question 1**, you must confirm the Tobacco-Victim's smoking habits. You must indicate whether the Tobacco-Victim started smoking either: (a) before January 1, 1976; or (b) on or after January 1, 1976. The Quebec Courts reduced the tobacco companies' liability by 20% for Tobacco-Victims who started smoking after January 1, 1976 because the Courts determined that, by January 1, 1980, the dangers of contracting a disease from smoking were known to the public, and that it would have taken 4 years for an individual to become addicted to smoking. Thus, people who started smoking after January 1, 1976 are deemed to have been aware of the dangers of contracting a disease from smoking (the Courts also determined that the public was deemed to have knowledge as of March 1, 1996 that cigarettes were addictive). Consequently, Tobacco-Victims who started smoking after January 1, 1976 are entitled to compensation of 80%. These determinations by the Courts are final and cannot be appealed.

Please note that in order to be entitled to compensation, the Tobacco-Victim must have smoked 12 pack-years, or 87,600 cigarettes between January 1, 1950 and November 20, 1998.

A pack-year is 7,300 cigarettes, expressed in terms of daily smoking. For example, 12 pack-years equals:

- 20 cigarettes a day for 12 years ($20 \times 365 \times 12 = 87,600$); or
- 30 cigarettes a day for 8 years ($30 \times 365 \times 8 = 87,600$); or
- 10 cigarettes a day for 24 years ($10 \times 365 \times 24 = 87,600$).

It is not necessary for you to calculate the number of pack-years smoked by the Tobacco-Victim, as this calculation will be done by the Claims Administrator when reviewing the Claim Form.

If the Tobacco-Victim's smoking history can be easily expressed in terms of number of cigarettes smoked per day per year, then please fill out the requisite information in **Question 2**. If the Tobacco Victim's smoking history cannot be easily expressed in such terms, please provide a summary in **Question 3** describing the Tobacco-Victim's smoking habits between January 1, 1950 and November 20, 1998.

In **Question 4**, please check the boxes for all brands of cigarettes that the Tobacco-Victim smoked on a regular basis between January 1, 1950 and November 20, 1998. The brand choices listed include the "family" of those brands. For example, Player's includes Player's Light and Player's Filter, etc. The purpose of providing this information is to confirm that the Tobacco-Victim smoked cigarettes manufactured by the defendant tobacco companies.

PART 4: STATUTORY DECLARATION AND SIGNATURE

Please provide the Tobacco-Victim's name, the date and add your signature. By signing the Claim Form, the Tobacco-Victim or the Tobacco-Victim's Representative acknowledges that the information submitted is true and that all supporting documents are authentic and have not been altered.

The Claim Form must be signed before a Commissioner for Oaths. Signing can be done remotely.

If the QCAP Agent (Proactio) is assisting you with your Claim Form, they can arrange for a Commissioner for Oaths to commission your Claim Form prior to submitting it to the Claims Administrator.

If you are not using the assistance of the QCAP Agent (Proactio), you may locate a Commissioner for Oaths by visiting the following link: <https://www.assermentation.justice.gouv.qc.ca/ServicesPublicsConsultation/Commissaires/Proximate/Criteres.aspx>

Attachment F



Submission Deadline:
[Day Month], 20XX

Tobacco Claims Canada
Claims Administrator
P.O. Box 2958 STN B
Ottawa ON K1P 5W9

<<Barcode>>

<<Name>>

<<Address1>>

<<Address2>>

<<Address3>>

<<City>> <<Province>> <<Zip>> OR <<Country>>

Quebec Class Action Administration Plan (QCAP) SUCCESSION CLAIM FORM

GENERAL INSTRUCTIONS

Submit Your Claim Online:

You can scan the QR code or visit
www.TobaccoClaimsCanada.ca

to file your claim. If you file your
claim online, it must be submitted by

11:59 p.m., Eastern, on Day Month, 20XX.



A completed Claim Form, along with any required accompanying documents, must be submitted to the Claims Administrator by **no later than the deadline of [day month, year] by 11:59 p.m., Eastern**, to receive financial compensation from the Quebec Class Action Administration Plan (the “QCAP Plan”).

You do not need a lawyer to submit a claim in the QCAP Plan. Proactio, the QCAP Agent, has been mandated to help you submit your claim, at no additional cost to you. If you need any assistance, please reach out to Proactio at the following contact information:

① **Phone: 1-888-880-1844**

✉ **Email: tabac@proactio.ca**

💻 **Website: www.RecoursTabac.com**

The QCAP Plan and Eligibility Criteria

The QCAP Plan will provide compensation to individuals who meet the QCAP Eligibility Criteria, described below, and who submit a complete Claim Form, along with any required supporting documents, by the deadline. Such individuals are referred in the QCAP Claim Forms as **“Tobacco-Victims”** collectively, and a **“Tobacco-Victim”** individually.

The QCAP Plan will also provide compensation to the estates or heirs of Tobacco-Victims who **died after November 20, 1998**, as well as to the estates or heirs of the heirs of Tobacco-Victims who died after November 20, 1998. These groups are referred to in the QCAP Claim Forms as **“Successions”** collectively, and each individually, as a **“Succession”**.

To be eligible to receive financial compensation, the Tobacco-Victim must meet all of the following QCAP Eligibility Criteria.

They must:

1. reside in Quebec (or if deceased, have resided in Quebec at the time of their death);
2. have smoked a minimum of twelve pack-years of cigarettes sold by the Canadian Tobacco Companies between **January 1, 1950 and November 20, 1998**;

Note: You may use the calculator available at www.TobaccoClaimsCanada.ca/en/HomePCC/Calculator to help determine the number of cigarettes the Tobacco-Victim smoked.

3. have been diagnosed **before March 12, 2012** with:
 - (a) Primary lung cancer; or
 - (b) Primary cancer (squamous cell carcinoma) of the larynx, the oropharynx or the hypopharynx (throat cancer); or
 - (c) Emphysema or COPD (GOLD Grade III or IV).
4. have resided in Quebec on the date of diagnosis with lung cancer, throat cancer, emphysema or COPD (GOLD Grade III or IV); **AND**
5. have been alive on **November 20, 1998**.

QCAP Claim Forms

A QCAP Claim Form must be completed and submitted to the Claims Administrator in order to receive financial compensation from the QCAP Plan.

There are two QCAP Plan Claim Forms:

The **Tobacco-Victim Claim** Form should be used if:

- You are a Tobacco-Victim, making a claim on your own behalf; or
- You are a Representative of living a Tobacco-Victim with a mandate or power of attorney to represent such individual.

The **Succession Claim Form** should be used if:

- You are the liquidator of the estate of a Tobacco-Victim;
- You are an heir of a Tobacco-Victim and the estate is closed;
- You have a mandate or power of attorney to represent the heir of a Tobacco-Victim;
- You are the heir of an heir of a Tobacco-Victim that would have been entitled to make a claim.

Claims Deadline

Your QCAP Claim Form, together with any required supporting documents, must be submitted to the Claims Administrator no later than 11:59 p.m., Eastern, on [Day Month, 20XX].

How to File a Claim

You can file your Claim Form with supporting documents in any of the following ways:

-  **Online**, through the Claims Administrator's website at www.TobaccoClaimsCanada.ca
-  **Email** to info@TobaccoClaimsCanada.ca
-  **Fax** to 1-866-262-0816
-  **Registered Mail**, sent to the following address postmarked by [Day Month, Year]:

Tobacco Claims Canada
Claims Administrator
P.O. Box 2958 STN B
Ottawa ON K1P 5W9

Your claim will be deemed to be received **only when the Claim Form and any required supporting documents are received by the Claims Administrator**. Claimants will be sent an Acknowledgement of Receipt of Claim by email or mail once their Claim Form has been received by the Claims Administrator. You must keep the record of transmission of your Claim Form until you receive the Acknowledgement of Receipt of Claim.

PLEASE DO NOT SUBMIT YOUR CLAIM MORE THAN ONCE OR THROUGH MULTIPLE METHODS.

The PCC Compensation Plan and Eligibility Criteria

If the Tobacco-Victim **does not meet** the above QCAP Eligibility Criteria, they may still be eligible to receive compensation under a separate compensation plan called the Pan-Canadian Claimant Compensation Plan ("**PCC Compensation Plan**"). To qualify under the PCC Compensation Plan, the Tobacco-Victim must meet all of the following criteria. They must:

1. reside in any Province or any Territory of Canada (or if deceased, have resided in Canada at the time of their death);
2. have been alive on **March 8, 2019**;
3. have smoked a minimum of twelve pack-years of cigarettes sold by the Canadian Tobacco Companies **between January 1, 1950 and November 20, 1998**;

Note: You may use the calculator available at www.TobaccoClaimsCanada.ca/en/HomePCC/Calculator to help determine the number of cigarettes the Tobacco-Victim smoked.

4. have been diagnosed between **March 8, 2015 and March 8, 2019** (inclusive of those dates) with:
- (a) Primary lung cancer; or
 - (b) Primary cancer (squamous cell carcinoma) of the larynx, the oropharynx or the hypopharynx (throat cancer); or
 - (c) Emphysema or COPD (GOLD Grade III or IV).

AND

5. have resided in any Province or any Territory of Canada on the date of diagnosis with lung cancer, throat cancer, emphysema or COPD (GOLD Grade III or IV).

A Tobacco-Victim will only be eligible for compensation under one plan and will be paid for the disease under the Plan which provides the highest amount of compensation to them. You cannot apply to both plans at the same time.

If you think you have a claim under the QCAP Plan, apply to the QCAP Plan, through the QCAP Agent (Proactio). The QCAP Agent (Proactio) will be able to verify if you also have a claim under the PCC Compensation Plan that could result in higher compensation for you, and if appropriate, will assist you to transfer your claim to the PCC Agent.

If you need any assistance in determining where to file, please contact the Claims Administrator.

Privacy and Confidentiality Declaration by the Claims Administrator

By submitting this Claim Form the Succession Claimant (or Representative) confirms that they have reviewed and agree to the collection, use, and disclosure of personal information as described below.

All personal information collected by the Claims Administrator through the Claims Process will be kept confidential in accordance with the Personal Information Protection and Electronic Documents Act, S.C. 2000, c. 5 and the Privacy Policy found on the Claims Administrator's website at www.TobaccoClaimsCanada.ca/en/Home/Privacy. This information is collected only for the purpose of administering the QCAP Plan and to assess the Claimant's eligibility to receive compensation.

The personal information of the Tobacco-Victim, including personal health information, may be collected, used, and disclosed by the Claims Administrator and the QCAP Agent (Proactio) to provide Agent and Claims Administration services. It will not be disclosed without the express written consent of Tobacco-Victim or Succession Claimant, except as provided for in the QCAP Plan, as required by law or Court Order, or if it is necessary to share with a future Court-appointed Claims Administrator in connection with the QCAP Claims Process. This information may not be used or disclosed for any other purpose.

For additional information, please visit the Claim Administrator's website at
www.TobaccoClaimsCanada.ca.

PART 1: INFORMATION ABOUT THE SUCCESSION CLAIMANT

Important: Before completing this Claim Form, we strongly recommend that you read the instructions in Attachment A to avoid delays or rejection.

We also suggest that you reach out to the QCAP Agent (Proactio) for assistance with your claim.

1) Succession Claimant's full legal name:

Last Name:

First Name:

Middle Name (if applicable):

2) Succession Claimant's date of birth (YYYY-MM-DD):

Please only fill out Question 3 and 4 if you are the Representative of the Succession Claimant. If you are the Succession Claimant, proceed to Question 5.

3) Full legal name of the Succession Claimant's Representative:

Last Name:

First Name:

4) Mandate, Judgment, and/or Order pursuant to which the Representative is acting?

☐ Power of Attorney or Detailed Mandate (for represented Succession Claimants with capacity only)	☐ Judgment ordering curatorship to the Succession Claimant (prior to November 1, 2022)
☐ Protection Mandate or Mandate in case of Incapacity, homologated by a judgment	☐ Order naming a provisional administrator to the property of the Succession Claimant
☐ Judgment ordering tutorship to the Succession Claimant	

A copy of the mandate, judgment and/or order pursuant to which the Succession Claimant's Representative is acting must be attached and marked with the Tobacco-Victim's Health Insurance Card Number and the words "Representative's Mandate". If submitting your Proof of Claim electronically, please save all documents in one PDF file and name the document "[Health insurance card number of the Deceased Tobacco-Victim]-Representative's Mandate.pdf".

5) Provide your mailing address: (**Note:** If you are the Succession Claimant's Representative, provide the Representative's mailing address.)

Number:

Street:

Apartment:

City/Town:

Province:

Postal Code:

Country:

6) Provide your contact information. (**Note:** If a Representative is filing the claim, provide the Representative's contact information.)

Phone:

Fax:

Email:

7) Which language should be used for communication?

- ☐ English ☐ French

PART 2: DECEASED TOBACCO-VICTIM INFORMATION

1) Deceased Tobacco-Victim's full legal name:

Last Name:

First Name:

Middle Name (if applicable):

2) Deceased Tobacco-Victim's date of birth (YYYY-MM-DD):

Date of Birth:

3) Deceased Tobacco-Victim's date of death (YYYY-MM-DD):

Date of Death:

4) Deceased Tobacco-Victim's Health Insurance Card Number (e.g., ABCD 1234 5678):

Health Insurance Card Number:

5) Did the deceased Tobacco-Victim reside in Quebec on the date on which they were diagnosed with primary lung cancer, primary squamous cell carcinoma of the larynx, oropharynx, hypopharynx (throat cancer), emphysema or COPD (GOLD Grade III or IV)?

☐ Yes ☐ No

6) Did the deceased Tobacco-Victim reside in Quebec on the date of their death?

☐ Yes ☐ No

PART 3: PROOF OF DIAGNOSIS

Diagnosis before March 12, 2012

1) Was the deceased Tobacco-Victim diagnosed before March 12, 2012 with any of the following diseases? For all that apply, indicate the date of diagnosis and the place where the deceased Tobacco-Victim was resident on the date of diagnosis.

☐ **Primary Lung Cancer**

Date of diagnosis (YYYY-MM-DD):

Place of residence on date of diagnosis:

☐ **Primary squamous cell carcinoma of the larynx, oropharynx, or hypopharynx (Throat Cancer)**

Date of diagnosis (YYYY-MM-DD):

Place of residence on date of diagnosis:

☐ **Emphysema or COPD (GOLD Grade III or IV)**

Date of diagnosis (YYYY-MM-DD):

Place of residence on date of diagnosis:

Please note, in the case of recurrence or relapse, please indicate the initial date of diagnosis only.

2) Authorization to obtain Official Confirmation of ¹²⁶Diagnosis:

I hereby authorize the Claims Administrator to obtain a copy of the deceased Tobacco-Victim's medical information relating to the diseases/diagnoses referenced in Question 1 above, and I authorize the PCC Agent, the QCAP Agent, MSSS and/or the RAMQ, as applicable, to provide the Claims Administrator with copies of any of the following:

- A confirmation of the deceased Tobacco-Victim's diagnosis from the Quebec Cancer Registry;
 - An extract from RAMQ files confirming the deceased Tobacco-Victim's diagnosis;
 - An extract from the MED-ÉCHO database confirming the deceased Tobacco-Victim's diagnosis; and
 - All other medical files relating to the deceased Tobacco-Victim.
- ☐ **By checking this box, I authorize the deceased Tobacco-Victim's above-referenced medical information to be released to the Claims Administrator.**

If an official confirmation of disease/diagnosis cannot be made through these means, the Claims Administrator will contact you to request the submission of an alternative method of proof.

Do not submit any alternative evidence unless it has been explicitly requested by way of a Notice from the Claims Administrator titled "Notice to Provide Alternative Proof."

PART 4: PROOF OF SMOKING HISTORY

1) The Tobacco-Victim started smoking cigarettes:

- ☐ Before January 1, 1976;
- ☐ On or after January 1, 1976.

2) Between January 1, 1950 and November 20, 1998 the deceased Tobacco-Victim smoked approximately _____ cigarettes per day for approximately _____ years.

OR

3) If the number of cigarettes the Tobacco-Victim smoked varied between January 1, 1950 and November 20, 1998, provide a summary below of the number of cigarettes the Tobacco-Victim smoked during that period of time:

- a) Smoked approximately _____ cigarettes per day between (YYYY) _____ and (YYYY) _____;
- b) Smoked approximately _____ cigarettes per day between (YYYY) _____ and (YYYY) _____;
- c) Smoked approximately _____ cigarettes per day between (YYYY) _____ and (YYYY) _____;
- d) Smoked approximately _____ cigarettes per day between (YYYY) _____ and (YYYY) _____;
- e) Smoked approximately _____ cigarettes per day between (YYYY) _____ and (YYYY) _____.

If more space is needed, attach additional sheet(s) to this Claim Form.

4) The Tobacco-Victim regularly smoked the following brands of cigarettes (select all that apply):

☐ **Accord**

- Accord KF

☐ **Avanti/Light**

☐ **B&H**

- B&H 100 Del.UL.LT/MEN
- B&H 100 F
- B&H 100 F Menthol
- B&H Light Menthol
- B&H Lights
- B&H Special KF
- B&H Special Lights KF

☐ **Belmont**

- Belmont KF

☐ **Belvedere**

- Belvedere Extra Mild

☐ **Camel**

☐ **Cameo**

- Cameo Extra Mild

☐ **Craven "A"**

- Craven "A" Special
- Craven "A" Light
- Craven "A" Ultra Light/Mild

☐ **Craven "M"**

- Craven "M" KF
- Craven "M" Special

☐ **du Maurier**

- du Maurier Light
- du Maurier Special
- du Maurier Ultra Light

☐ **Dunhill**

- Dunhill KF

☐ **Export**

- Export "A"
- Export "A" Lights
- Export "A" Medium
- Export "A" Extra Light
- Export "A" Special Edition
- Export "A" Ultra Light
- Export Mild
- Export Plain

☐ **LD**

☐ **Macdonald**

- Macdonald Menthol

☐ **Mark Ten**

- Mark Ten Filter

☐ **Matinee**

- Matinee Extra Mild
- Matinee Slims/Menthol
- Matinee Special/Menthol

☐ **Medallion**

☐ **More**

☐ **North American Spirit**

☐ **Number 7**

- Number 7 Lights

☐ **Peter Jackson**

- Peter Jackson Extra Light KF

☐ **Player's**

- John Player's Special
- Player's Extra Light
- Player's Filter
- Player's Light
- Player's Medium
- Player's Plain

☐ **Rothmans**

- Rothmans Extra Light
- Rothmans KF
- Rothmans Light
- Rothmans Special
- Rothmans UL LT KF

☐ **Select Special/Ultra Mild/Menthol**

☐ **Spirit**

☐ **Vantage**

- Vantage KF
- Vantage Light/Menthol

☐ **Viscount**

- Viscount #1 KF
- Viscount Extra Mild/Menthol

☐ **Winston**

PART 5: PROOF OF SUCCESSION STATUS

1) Are you the liquidator of the deceased Tobacco-Victim's estate? Please select and mark only one of the following options.

- ☐ Yes, I am the liquidator of the estate of the deceased Tobacco-Victim, appointed pursuant to the deceased Tobacco-Victim's will, codicil or by law pursuant to a marriage contract.

If you select this option, please complete and attach **Sub-Form B.1** to this Claim Form and provide all the required supporting documents.

- ☐ Yes, I am the liquidator of the estate of the deceased Tobacco-Victim, appointed by the legal heirs, as the deceased Tobacco-Victim did not have a valid will.

If you select this option, please complete and attach **Sub-Form B.2** to this Claim Form and provide all the required supporting documents.

- ☐ No, I am not a liquidator of the estate of the deceased Tobacco-Victim.

If you selected "No" above, please answer Question 2 below.

2) Are you an heir of the deceased Tobacco-Victim?

- ☐ Yes, I am an heir pursuant to the deceased Tobacco-Victim's will, codicil or marriage contract.

If you select this option, please complete and attach **Sub-Form B.3** to this Claim Form and provide all the required supporting documents.

- ☐ Yes, I am an heir of the deceased Tobacco-Victim by operation of law.

If you select this option, please complete and attach **Sub-Form B.4** to this Claim Form and provide all the required supporting documents.

- ☐ Yes, I am an heir of an heir of the deceased Tobacco-Victim.

If you select this option, please complete and attach either **Sub-Form B.3 or B.4**, as applicable regarding the deceased Tobacco-Victim, and provide all the required supporting documents and provide a similar declaration in respect of the deceased heir that you represent.

Reminder: For assistance with the submission of required documentation, you may contact the QCAP Agent (Proactio) by phone **toll-free in Canada at 1-888-880-1844**, by email at tabac@proactio.ca, or online at www.RecoursTabac.com.

INSTRUCTIONS TO COMPLETE STATUTORY DECLARATION

You must sign the Statutory Declaration below in the presence of a Commissioner of Oaths, sometimes referred to as a Commissioner for taking Affidavits. Signing can be done remotely.

A Commissioner of Oaths is a person who is authorized to take affidavits or declarations by asking you to swear or affirm that the statements in a document are true. Every lawyer and some paralegals are Commissioners of Oaths.

If you need assistance, you may contact the QCAP Agent (Proactio) by phone toll-free (in Canada) at 1-888-880-1844, by email at tabac@proactio.ca, or online at www.RecoursTabac.com who can arrange for a Commissioner of Oaths to commission the signing of your Statutory Declaration before you submit your Claim Form to the Claims Administrator.

I, _____, solemnly declare that the information that I have provided on this Claim Form is true and correct and the documents submitted in support of my claim are genuine and have not been modified in any way whatsoever.

I make this solemn declaration conscientiously believing it to be true and knowing that it is of the same force and effect as if made under oath.

Where someone has helped me with this Claim Form, that person has read to me everything they wrote and included with this Claim Form, if necessary to allow me to understand the content of this completed Claim Form and any attachments to it, and I confirm that this information is true and correct.

this _____ day of _____, 20____.

Signature of Succession Claimant (or Representative)

SOLEMNLY AFFIRMED BEFORE ME, remotely

The Succession Claimant (Representative) at _____.
(Town/City/Municipality)

The Commissioner of Oaths at _____.
(Town/City/Municipality)

Commissioner for Oaths Quebec Number

SUCCESSION CLAIM FORM INSTRUCTIONS

As the liquidator of a deceased Tobacco-Victim's estate or an heir of a deceased Tobacco-Victim, you are considered a "Succession Claimant" under the terms of the QCAP Plan. If the claim is proven, you will be entitled to receive compensation as a "Succession Class Member." In the case of a claim submitted by an heir, the compensation may be split among all eligible heirs.

This document is intended to assist you with completing the QCAP Succession Claim Form, and assemble the supporting documentation required to prove your claim.

If you require any assistance completing your Claim Form, please call the QCAP Agent (Proactio) toll-free at 1-888-880-1844 or send an email to tabac@proactio.ca or visit the QCAP Agent website at www.RecoursTabac.com.

PART 1: INFORMATION ABOUT THE SUCCESSION CLAIMANT

You must provide information to prove that you are entitled to submit a claim on behalf of the estate of the deceased Tobacco-Victim.

Succession claims **must** be submitted by the liquidator of the deceased Tobacco-Victim's estate, if there is still a liquidator acting in that capacity. If there is no liquidator (or no longer a liquidator) to the deceased Tobacco-Victim's estate, then a claim may be submitted by an heir to the deceased Tobacco-Victim, or by an heir of an heir. Please note that it is not sufficient to be a member of a deceased Tobacco-Victim's family in order to file a claim as an heir; a person must be an heir named in a will or registered marriage contract, or be the legal heir pursuant to the Quebec law on successions.

In response to **Questions 1 and 2**, provide the personal details of the person entitled to make the claim. If you are filing the claim on your own behalf, you are the "Succession Claimant." If you are filing as a representative, then the information requested concerns the person you represent.

In response to **Question 3**, indicate whether you are submitting the Claim Form as the Representative of a Succession Claimant.

Only answer **Question 4** if you are submitting the Claim Form as the Representative of the Succession Claimant. In response to these questions, indicate the type of mandate pursuant to which you are acting. You must also attach a copy of the mandate, power of attorney or judgment with the Claim Form, marked with the words "Succession Representative's Mandate," followed by the deceased Tobacco-Victim's name on the front page of the document, and in the file name, if submitted electronically.

In response to **Questions 5 and 6**, provide your mailing address and contact information so that the Claims Administrator can communicate with you in respect of the claim. The Claims Administrator will communicate with you by email, if an email address is provided. Please add the Claims Administrator's email address info@TobaccoClaimsCanada.ca to your list of contacts to ensure that correspondence in connection with your claim reaches your inbox.

In response to **Question 7**, indicate your language of preference for communications from the Claims Administrator.

PART 2: DECEASED TOBACCO-VICTIM INFORMATION

In response to **Question 1**, provide the deceased Tobacco-Victim's full name.

In response to **Question 2**, provide the deceased Tobacco-Victim's birth date.

In response to **Question 3**, provide the deceased Tobacco-Victim's date of death.

In response to **Question 4**, provide the deceased Tobacco-Victim's health insurance card number (e.g., ABCD 1234 5678). This information is required to enable the Claims Administrator to make requests to the MSSS and RAMQ for relevant documents to assist in proving the diagnosis and the date of diagnosis of the Tobacco-Victim's tobacco-related disease(s).

In response to **Question 5**, confirm whether the deceased Tobacco-Victim resided in Quebec on the date on which they were diagnosed with primary lung cancer, primary squamous cell carcinoma of the larynx, oropharynx, hypopharynx (throat cancer), emphysema or COPD (GOLD Grade III or IV).

In response to **Question 6**, indicate whether the deceased Tobacco-Victim resided in Quebec on the date of their death.

PART 3: PROOF OF DIAGNOSIS

To be eligible for compensation, the deceased Tobacco-Victim must have been **before March 12, 2012** with primary lung cancer, primary cancer (squamous cell carcinoma) of the larynx, oropharynx, hypopharynx, emphysema, or COPD (GOLD Grade III or IV). These are the only diseases covered by the QCAP Plan.

In response to **Question 1**, indicate the disease(s) the deceased Tobacco-Victim was diagnosed with, and for each, indicate the initial date of diagnosis. A recurrence or a relapse is not considered a primary cancer. In the case of a recurrence or relapse, only indicate the initial diagnosis date. Please note that the Succession Claimant will only receive compensation relating to the proven claim that entitles the estate of the Tobacco-Victim to the highest compensation.

If you do not recall the exact date of the deceased Tobacco-Victim's diagnosis, please provide the most accurate estimate possible, as this information will be verified by the Claim Administrator.

If you need assistance, please contact the QCAP Agent (Proactio) at 1-888-880-1844 or send an email to tabac@proactio.ca or visit the QCAP Agent (Proactio) website at www.RecoursTabac.com.

In **Question 2**, you must provide authorization for the Claims Administrator to obtain medical information concerning the deceased Tobacco-Victim from the sources listed therein for the purpose of confirming the diagnosis and the date of diagnosis of the disease(s) indicated in response to **Question 1**.

To facilitate the process of proving Tobacco-Victims' diagnoses for claimants, Class Counsel will request the official records, including from RAMQ, the MSSS, the Quebec Cancer Registry, and the MED-ÉCHO database. Both the QCAP Agent (Proactio) and the Claims Administrator will have access to this information.

If an official confirmation of disease/diagnosis cannot be made from these sources, the Claims Administrator will contact you to request that you submit an alternative method of proof. By way of example only, such proof may include:

- a copy of a pathology report which confirms that the Tobacco-Victim was diagnosed with Lung Cancer or Throat Cancer, as applicable, before March 12, 2012;
- a copy of a report of a spirometry test performed on the Tobacco-Victim before March 12, 2012, demonstrating a FEV1 (non-reversible) of less than 50% of the predicted value to establish a diagnosis of Emphysema or COPD (GOLD Grade III or IV);
- an extract from the Tobacco-Victim's medical records or a written statement of the Tobacco-Victim's Physician.

Do not submit any alternative evidence unless it has been explicitly requested from you by way of a Notice from the Claims Administrator entitled "Notice to Provide Alternative Proof".

If requested, when submitting your Alternative Proof electronically, please name the PDF document "[insert health insurance card number]-Alternative Medical Proof.pdf" as applicable.

PART 4: PROOF OF SMOKING HISTORY

In **Question 1**, you must confirm that you have knowledge of the deceased Tobacco-Victim's smoking habits and indicate whether the deceased Tobacco-Victim started smoking either: (a) before January 1, 1976; or (b) on or after, January 1, 1976. The Quebec Courts reduced the Tobacco companies' liability by 20% for Tobacco-Victims who started smoking after January 1, 1976 because the Courts determined that, by January 1, 1980, the dangers of contracting a disease from smoking were known to the public, and that it would have taken 4 years for an individual to become addicted to smoking. Thus, people who started smoking after January 1, 1976 are deemed to have been aware of the dangers of contracting a disease from smoking (the Courts also determined that the public was deemed to have knowledge as of March 1, 1996 that cigarettes were addictive). Consequently, deceased Tobacco-Victims who started smoking after January 1, 1976 are entitled to compensation of 80%. These determinations by the Courts are final and cannot be appealed.

Please note that in order to be entitled to compensation, the deceased Tobacco-Victim must have smoked 12 pack-years, or 87,600 cigarettes, between January 1, 1950 and November 20, 1998.

A pack-year is 7,300 cigarettes, expressed in terms of daily smoking. For example, 12 pack-years equals:

- 20 cigarettes a day for 12 years ($20 \times 365 \times 12 = 87,600$); or
- 30 cigarettes a day for 8 years ($30 \times 365 \times 8 = 87,600$); or
- 10 cigarettes a day for 24 years ($10 \times 365 \times 24 = 87,600$).

It is not necessary for you to calculate the number of pack-years smoked by the Tobacco-Victim, as this calculation will be done by the Claims Administrator when reviewing the Claim Form.

If the deceased Tobacco-Victim's smoking history¹³³ can be easily expressed in terms of number of cigarettes smoked per day per year, then please fill out the requisite information where indicated in **Question 2**. If the deceased Tobacco-Victim's smoking history cannot be easily expressed in such terms, please provide a summary where indicated in **Question 3** of the deceased Tobacco-Victim's smoking habits between January 1, 1950 and November 20, 1998.

In **Question 4**, please check the boxes for all brands of cigarettes that the deceased Tobacco-Victim smoked on a regular basis between January 1, 1950 and November 20, 1998. The brand choices listed include the "family" of those brands. For example, Player's includes Player's Light and Player's Filter, etc. The purpose of providing this information is to confirm that the deceased Tobacco-Victim smoked cigarettes manufactured by the Defendant Tobacco companies.

PART 5: PROOF OF SUCCESSION STATUS

Provide the required proof of the Succession Claimant's status to assert a Succession Claim.

In response to **Question 1**, indicate whether the Succession Claimant is a liquidator to the estate of the deceased Tobacco-Victim. Mark the first box if you are the liquidator pursuant to a will, codicil or by law pursuant to a marriage contract. Mark the second box if you are a liquidator pursuant to an appointment by the heirs, in the case of a deceased Tobacco-Victim who did not have a will. Mark the third box if the Succession Claimant is not a liquidator.

Question 2 only needs to be answered if you marked the third box "No" in Question 1. Mark the first box if the Succession Claimant is an heir pursuant to a will, codicil or marriage contract. Mark the second box if the Succession Claimant is an heir by operation of law (i.e., if the deceased Tobacco-Victim did not have a will). Mark the third box if the Succession Claimant is an heir of an heir who has died. If you are filing the Claim Form as an heir of an heir, you will need to complete and attach a Declaration in respect of the estate of the deceased Tobacco-Victim and a Declaration in respect of the estate of the heir whom you represent.

You must also fill in the Sub-Form required as indicated next to the box you marked. Follow the instructions found on that Sub-Form and provide all required supporting documents.

If you require assistance, please contact the QCAP Agent (Proactio) toll-free at 1-888-880-1844 or send an email to tabac@proactio.ca or visit the QCAP Agent (Proactio) website at www.RecoursTabac.com.

PART 6: STATUTORY DECLARATION AND SIGNATURE

Provide the Succession Claimant (or Representative)'s name, the date and add your signature. By signing the Claim Form, the Succession Claimant (or Representative) acknowledges that the information submitted is true and that all supporting documents are authentic and have not been altered.

The Claim Form must be signed before a Commissioner for Oaths. Signing can be done remotely.

If the QCAP Agent (Proactio) is assisting you with your Claim Form, they can arrange for a Commissioner for Oaths to commission your Claim Form prior to submitting it to the Claims Administrator.

If you are not using the assistance of the QCAP Agent (Proactio), you may locate a Commissioner for Oaths by visiting the following link: <https://www.assermentation.justice.gouv.qc.ca/ServicesPublicsConsultation/Commissaires/Proximate/Criteres.aspx>

LIQUIDATOR TO AN ESTATE OF THE DECEASED PURSUANT TO A WILL, CODICIL OR MARRIAGE CONTRACT

In **Section 1**, fill in the blanks where indicated. If options are listed, please check the box next to the option that is applicable to your situation.

Locate and attach all exhibits referred to in the Declaration. For ease of reference, the exhibits are also listed in **Section 2**.

The Declaration must be signed before a Commissioner of Oaths. Signing can be done remotely.

If the QCAP Agent (Proactio) is assisting you with your Declaration, they can arrange for a Commissioner of Oaths to commission your Declaration prior to submitting it to the Claims Administrator.

If you are not using the assistance of the QCAP Agent (Proactio), you may locate a Commissioner of Oaths to commission your Declaration at the following link: <https://www.assermentation.justice.gouv.qc.ca/ServicesPublicsConsultation/Commissaires/Proximate/Criteres.aspx>.

If submitting your Claim Form electronically, please save the Declaration and Exhibits together in one PDF file and name the document “[Health insurance card number of the deceased Tobacco Victim]-Declaration of Liquidator.pdf”.

SECTION 1. DECLARATION OF A LIQUIDATOR PURSUANT TO A WILL, CODICIL OR MARRIAGE CONTRACT

I _____ (name), _____ (profession), residing and domiciled at _____ (address), do solemnly affirm the following:

1. I attach hereto the death certificate of _____ (name of deceased).
2. I attach hereto the Will Search Certificate of _____ (name of deceased) from the *Chambre des notaires du Québec*.
3. I attach hereto the Will Search Certificate of _____ (name of deceased) from the Bar of Quebec.
4. I attach hereto:
 - ☐ the notarial will;
 - ☐ the will, together with the judgment probating the will or minutes of probate by a notary;
 - ☐ the notarial codicil;
 - ☐ the codicil, together with the judgment probating the codicil or the minutes of probate by a notary;
 - ☐ the registered marriage contract.

pursuant to which I was appointed the liquidator to the estate of _____ (name of deceased).

5. I confirm that I am still acting in the capacity ¹³⁵as liquidator to the estate of _____ (name of deceased) and confirm that I shall receive any compensation due to such estate and distribute such compensation in accordance with the deceased's instructions in accordance with my duties.
6. If applicable, I also attach any other relevant documents for the estate of _____ (name of deceased).

Examples of other relevant documents include a certified copy of will before witnesses or holograph will probated by a Notary; a court order appointing a provisional liquidator or replacement liquidator; or a notarial deed or private writing executed by the heirs appointing a liquidator.

7. All of the facts contained herein are true and all of the documents that I have submitted in support of this claim are genuine and have not been altered in any way.

AND I HAVE SIGNED,

Name of Succession Claimant

On _____ (Date)

SOLEMNLY AFFIRMED BEFORE ME remotely

the Succession Claimant at _____ (City), Quebec

the Commissioner of Oaths at _____ (City), Quebec

Commissioner for Oaths Quebec Number

SECTION 2. LIST OF DOCUMENTS TO ATTACH

- ☐ **Death Certificate**
- ☐ **Will Search Certificate — Chambres des notaires du Québec**
- ☐ **Will Search Certificate — Barreau du Québec**
- ☐ **(i) The Notarial Will; (ii) Will, together with the judgment probating the Will or minutes of probate by a notary; (iii) Notarial Codicil; (iv) Codicil, together with the judgment probating the Codicil or minutes of probate by a notary; or (v) Marriage Contract**
- ☐ **If applicable, other relevant documents**

LIQUIDATOR OF THE ESTATE OF A DECEASED, APPOINTED BY THE HEIRS

In **Section 1**, fill in the blanks where indicated. If options are listed, please check the box next to the option that is applicable.

Locate and attach all exhibits referred to in the Declaration. For ease of reference, the exhibits are also listed in **Section 2**.

The Declaration must be signed before a Commissioner of Oaths. Signing can be done remotely.

If the QCAP Agent (Proactio) is assisting you with your Declaration, they can arrange for a Commissioner of Oaths to commission your Declaration prior to submitting it to the Claims Administrator.

If you are not using the assistance of the QCAP Agent (Proactio), you may locate a Commissioner of Oaths to commission your Declaration at the following link: <https://www.assermentation.justice.gouv.qc.ca/ServicesPublicsConsultation/Commissaires/Proximite/Criteres.aspx>.

If submitting your Proof of Claim electronically, please save the Declaration and Exhibits together in one PDF file and name the document “[Health insurance card number of the Deceased Tobacco-Victim]-Declaration of Liquidator.pdf”.

SECTION 1. DECLARATION OF A LIQUIDATOR OF THE ESTATE OF THE DECEASED, APPOINTED BY THE HEIRS

I _____ (name), _____ (profession), residing and domiciled at _____ (address), do solemnly affirm the following:

1. I attach hereto the death certificate of _____ (name of deceased).
2. I attach hereto the Will Search Certificate of _____ (name of deceased) from the *Chambre des notaires du Québec*.
3. I attach hereto the Will Search Certificate of _____ (name of deceased) from the Bar of Quebec.
4. As appears from the foregoing, there are no registered wills in the name of _____ (name of deceased), and I do not believe that the deceased had a will.
5. I am the _____ (relationship) of _____ (name of deceased).
6. On _____ (date), I was appointed by the legal heirs of _____ (name of deceased) to act as liquidator to the estate of _____ (name of deceased), as appears from the following document:
 - ☐ a copy of a notarial deed;
 - ☐ a private writing;
 - ☐ any other document, as applicable.

7. I confirm that I am still acting in the capacity¹³⁷ as liquidator to the estate of _____ (name of deceased) and confirm that I shall receive any compensation due to such estate and distribute such compensation in accordance with the law in accordance with my duties as liquidator.
8. If applicable, I also attach any other relevant documents for the estate of _____ (name of deceased).
9. All of the facts contained herein are true and all of the documents that I have submitted in support of this claim are genuine and have not been altered in any way.

AND I HAVE SIGNED,

Name of Succession Claimant

On _____ (Date)

SOLEMNLY AFFIRMED BEFORE ME remotely

the Succession Claimant at _____ (City), Quebec

the Commissioner of Oaths at _____ (City), Quebec

Commissioner for Oaths Quebec Number

SECTION 2. LIST OF DOCUMENTS TO ATTACH

- ☐ **Death Certificate**
- ☐ **Will Search Certificate — Chambres des notaires du Québec**
- ☐ **Will Search Certificate — Barreau du Québec**
- ☐ **Copy of the Notarial Deed or Private Writing, or another document**
- ☐ **If applicable, other relevant documents**

SUB-FORM B.3:

HEIR OF THE ESTATE OF A DECEASED PURSUANT TO A WILL, CODICIL, OR MARRIAGE CONTRACT

In **Section 1**, fill in the blanks where indicated. If options are listed, please check the box next to the option that is applicable.

Locate and attach all exhibits referred to in the Declaration. For ease of reference, the exhibits are also listed in **Section 2**.

The Declaration must be signed before a Commissioner of Oaths. Signing can be done remotely.

If the QCAP Agent (Proactio) is assisting you with your Declaration, they can arrange for a Commissioner for Oaths to commission your Declaration prior to submitting it to the Claims Administrator.

If you are not using the assistance of the QCAP Agent (Proactio), you may locate a Commissioner of Oaths to commission your Declaration at the following link: <https://www.assermentation.justice.gouv.qc.ca/ServicesPublicsConsultation/Commissaires/Proximite/Criteres.aspx>.

If submitting your Claim Form electronically, please save the Declaration and Exhibits together in one PDF file and name the document “[Health insurance card number of the deceased Tobacco Victim]-Declaration of Heir.pdf”.

SECTION 1. DECLARATION OF AN HEIR PURSUANT TO A WILL, CODICIL OR MARRIAGE CONTRACT

I _____ (name), _____ (profession), residing and domiciled at _____ (address), do solemnly affirm the following:

1. I attach hereto the death certificate of _____ (name of deceased).
2. I attach hereto the Will Search Certificate of _____ (name of deceased) from the *Chambre des notaires*.
3. I attach hereto the Will Search Certificate of _____ (name of deceased) from the Bar of Quebec.
4. I attach hereto:
 - ☐ the notarial will;
 - ☐ the will, together with the judgment probating the will or minutes of probate by a notary;
 - ☐ the notarial codicil;
 - ☐ the codicil, together with the judgment probating the codicil or the minutes of probate by a notary;
 - ☐ the registered marriage contract.

5. As appears from such document, I was named ¹³⁹

- ☐ an heir to the estate of _____ (name of deceased);
- ☐ a particular legatee entitled to receive compensation from the class action.

6. The estate is closed and there is no liquidator in place.

7. I am:

- ☐ the sole heir;
- ☐ one of several heirs

to the estate of _____ (name of deceased).

8. If there are other heirs pursuant to the will or marriage contract entitled to receive compensation from the class action, I am attaching a list of their names and contact information.

9. If applicable, I also attach any other relevant documents for the estate of _____ (name of deceased).

10. All of the facts contained herein are true and all of the documents that I have submitted in support of this claim are genuine and have not been altered in any way.

AND I HAVE SIGNED,

Name of Succession Claimant or Representative

On _____ (Date)

SOLEMNLY AFFIRMED BEFORE ME remotely

the Succession Claimant at _____ (City), Quebec

the Commissioner of Oaths at _____ (City), Quebec

Commissioner for Oaths Quebec Number

SECTION 2. LIST OF DOCUMENTS TO ATTACH

- ☐ **Death Certificate**
- ☐ **Will Search Certificate — Chambres des notaires du Québec**
- ☐ **Will Search Certificate — Barreau du Québec**
- ☐ **(i) The Notarial Will; (ii) Will, together with the judgment probating the Will or minutes of probate by a notary; (iii) Notarial Codicil; (iv) Codicil, together with the judgment probating the Codicil or minutes of probate by a notary; or (v) Marriage Contract**
- ☐ **If applicable, other relevant documents**

HEIR OF THE ESTATE OF A DECEASED BY OPERATION OF LAW

For **Section 1**, fill in the blanks where indicated. This document must be printed and signed before a Commissioner of Oaths.

Locate and attach all exhibits referred to in the Declaration. For ease of reference, the exhibits are also listed in **Section 2**.

The Declaration must be signed before a Commissioner of Oaths. Signing can be done remotely.

If the QCAP Agent (Proactio) is assisting you with your Declaration, they can arrange for a Commissioner of Oaths to commission your Declaration prior to submitting it to the Claims Administrator.

If you are not using the QCAP Agent (Proactio), you may locate a Commissioner of Oaths to commission your Declaration at the following link: <https://www.assermentation.justice.gouv.qc.ca/ServicesPublicsConsultation/Commissaires/Proximite/Criteres.aspx>.

If submitting your Proof of Claim electronically, please save the Declaration and Exhibits together in one PDF file and name the document “[Health insurance card number of the deceased Tobacco Victim]-Declaration of Heir.pdf”.

SECTION 1. DECLARATION OF A LEGAL HEIR OF THE ESTATE OF A DECEASED

I _____ (name), _____ (profession), residing and domiciled at _____ (address), do solemnly affirm the following:

1. I attach hereto the death certificate of _____ (name of deceased).
2. I attach hereto the Will Search Certificate of _____ (name of deceased) from the *Chambre des notaires du Québec*.
3. I attach hereto the Will Search Certificate of _____ (name of deceased) from the Bar of Quebec.
4. As appears from the above-referenced searches, there are no registered wills in the name of _____ (name of deceased), and I do not believe that the deceased had a will.
5. I am the _____ (relationship) of _____ (name of deceased).

6. I attach a list containing the name and ¹⁴¹contact information (for living heirs) of all of _____ (name of deceased)'s other heirs, including, as applicable, the deceased's spouse, children, parents, siblings, nieces and nephews.
7. If applicable, I also attach any other relevant documents for the estate of _____ (name of deceased).
8. All of the facts contained herein are true and all of the documents that I have submitted in support of this claim are genuine and have not been altered in any way.

AND I HAVE SIGNED,

Name of Succession Claimant

On _____ (Date)

SOLEMNLY AFFIRMED BEFORE ME remotely

the Succession Claimant at _____ (City), Quebec

the Commissioner of Oaths at _____ (City), Quebec

Commissioner for Oaths Quebec Number

SECTION 2. LIST OF DOCUMENTS TO ATTACH

- ☐ **Death Certificate**
- ☐ **Will Search Certificate — Chambres des notaires du Québec**
- ☐ **Will Search Certificate — Barreau du Québec**
- ☐ **A list of any other heirs, including their name, address, email address and telephone number**
- ☐ **If applicable, other relevant documents**

Attachment G

TCC – Audio/Video Script**June 9, 2025 version (51 words)**

A claims program for harmed Canadians has begun as a result of a landmark tobacco settlement. If you smoked regularly before November 20, 1998, and were diagnosed with lung cancer, throat cancer, emphysema or COPD, you may qualify for a significant payment. To learn more, call 888-482-5852* or go to TobaccoClaimsCanada.ca.

*888-482-5852 is the Epiq toll-free number for Claims Administrator/PCC Agent. The IVR would be programmed to allow the selection to speak with the QCAP Agent (Proactio) and the IVR will automatically route to Proactio.

Attachment H

PCC-QCAP Notice
Digital Banners and Social Media

728x90 Online Display Banner

(Frame 1 – on screen for 8 seconds/Frame 2 on screen for 6 seconds)

**If you smoked regularly before
Nov. 20, 1998 and were diagnosed
with a tobacco-related disease,**



**you may qualify for
\$14,400-\$100,000 from a
landmark settlement.**

File a Claim Now



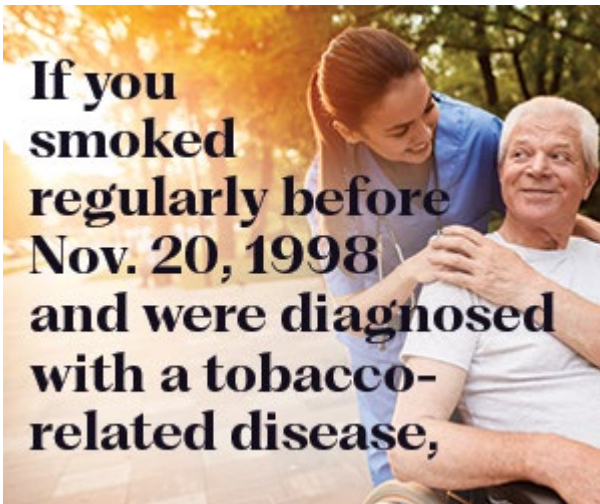
**If you smoked regularly before
Nov. 20, 1998 and were diagnosed with
a tobacco-related disease,**



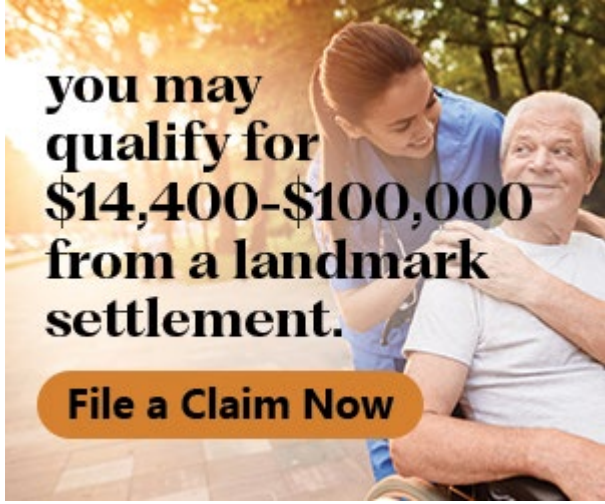
**you may qualify for
\$14,400-\$100,000 from a
landmark settlement.**

File a Claim Now



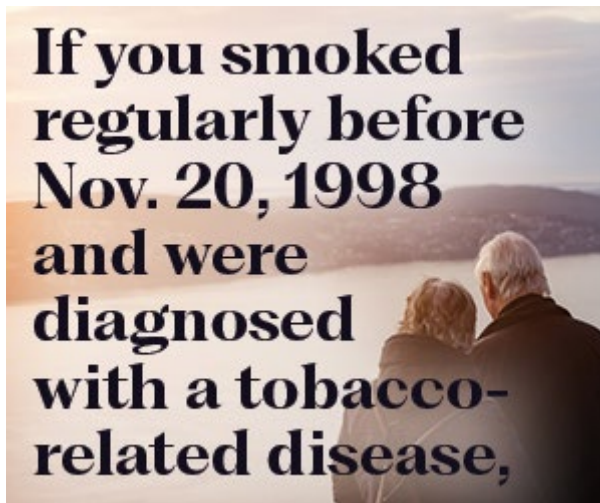
300 x 250 Online Display Banner**(Frame 1 – on screen for 8 seconds/Frame 2 on screen for 6 seconds)**

**If you
smoked
regularly before
Nov. 20, 1998
and were diagnosed
with a tobacco-
related disease,**



**you may
qualify for
\$14,400-\$100,000
from a landmark
settlement.**

File a Claim Now



**If you smoked
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and were
diagnosed
with a tobacco-
related disease,**



**you may qualify
for \$14,400-
\$100,000 from
a landmark
settlement.**

File a Claim Now

Facebook

 Tobacco Claims Canada
Sponsored · 

If you smoked regularly before Nov. 20, 1998 and were diagnosed with a tobacco-related disease, you may qualify for compensation.

If you smoked regularly before Nov. 20, 1998 and were diagnosed with a tobacco-related disease,

you may qualify for \$14,400-\$100,000 from a landmark settlement.

www.tobaccoclaimscanada.ca
File a Claim Now
If you smoked regularly b...

[Learn more](#)

 Like  Comment  Share

 Tobacco Claims Canada
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If you smoked regularly before Nov. 20, 1998 and were diagnosed with a tobacco-related disease, you may qualify for compensation.

If you smoked regularly before Nov. 20, 1998 and were diagnosed with a tobacco-related disease,

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www.tobaccoclaimscanada.ca
File a Claim Now
If you smoked regularly b...

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 Like  Comment  Share

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If you smoked regularly before Nov. 20, 1998 and were diagnosed with a tobacco-related disease,

you may qualify for \$14,400-\$100,000 from a landmark settlement.

Learn more >

Smoked regularly and were diagnosed with a tobacco-related disease?

Instagram

 Tobacco Claims Canada
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...

If you smoked regularly before Nov. 20, 1998 and were diagnosed with a tobacco-related disease,

you may qualify for \$14,400-\$100,000 from a landmark settlement.

Learn more >

Smoked regularly and were diagnosed with a tobacco-related disease?

X**Tobacco Claims Canada**

If you smoked regularly before Nov. 20, 1998 and were diagnosed with a tobacco-related disease, you may qualify for \$14,400-\$100,000 from a landmark settlement.



If you smoked regularly before Nov. 20, 1998 and were diagnosed with a tobacco-related disease,

you may qualify for \$14,400-\$100,000 from a landmark settlement.

www.tobaccoclaimscanada.ca



 Promoted

**Tobacco Claims Canada**

If you smoked regularly before Nov. 20, 1998 and were diagnosed with a tobacco-related disease, you may qualify for \$14,400-\$100,000 from a landmark settlement.



If you smoked regularly before Nov. 20, 1998 and were diagnosed with a tobacco-related disease,

you may qualify for \$14,400-\$100,000 from a landmark settlement.

www.tobaccoclaimscanada.ca



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 **Tobacco Claims Canada**

PROMOTED

If you smoked regularly before Nov. 20, 1998 and were diagnosed with a tobacco-related disease, you may qualify for \$14,400-\$100,000 from a landmark settlement.



If you smoked regularly before Nov. 20, 1998 and were diagnosed with a tobacco-related disease,

you may qualify for \$14,400-\$100,000 from a landmark settlement.

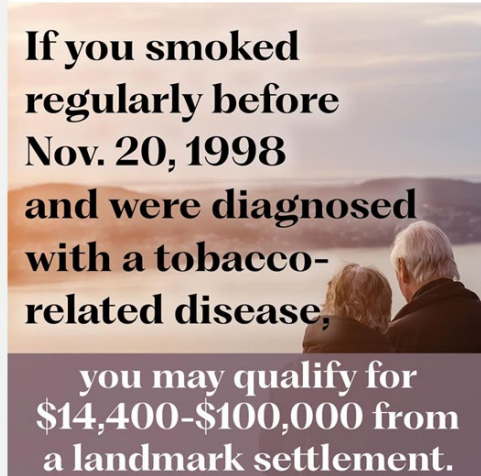
www.tobaccoclaimscanada.ca [LEARN MORE](#)

 Comment  Give Award  Share  Save ...

 **Tobacco Claims Canada**

PROMOTED

If you smoked regularly before Nov. 20, 1998 and were diagnosed with a tobacco-related disease, you may qualify for \$14,400-\$100,000 from a landmark settlement.



If you smoked regularly before Nov. 20, 1998 and were diagnosed with a tobacco-related disease,

you may qualify for \$14,400-\$100,000 from a landmark settlement.

www.tobaccoclaimscanada.ca [LEARN MORE](#)

 Comment  Give Award  Share  Save ...

Attachment I

If you smoked regularly before Nov. 20, 1998 and were diagnosed with a tobacco-related disease, you may qualify for \$14,400-\$100,000 from a landmark settlement.

Canadian Newswire / CITY, PROVINCE / Day Month, 20YY / As part of a landmark settlement with Canadian tobacco companies, the Ontario Superior Court of Justice (Commercial List) approved two compensation plans to provide payments to eligible smokers and ex-smokers diagnosed with certain tobacco-related diseases:

- The Pan-Canadian Claimants' Compensation Plan (**PCC**); and
- The Quebec Class Action Administration Plan (**QCAP**)

For those who have died that qualify, payments may be available for their estates.

What are the eligible diseases and dollar amounts?

This table shows the diseases covered by the plans and the maximum payment amounts:

Disease	You started smoking before January 1, 1976	You started smoking on or after January 1, 1976
Primary Lung Cancer or Primary Throat Cancer	\$60,000 PCC \$100,000 QCAP	\$48,000 PCC \$80,000 QCAP
Emphysema or COPD (GOLD Grade III or IV)	\$18,000 PCC \$30,000 QCAP	\$14,400 PCC \$24,000 QCAP

Important: Payments may be reduced depending on the number of eligible claims in each plan. A person will only be entitled to one payment, under one plan, and for one disease.

What are the claim deadlines?

The Claims Submission Periods commenced on Month DD, 2025 and the two plans have different claim deadlines:

- **PCC** claim deadline is **Month DD, 2027**
- **QCAP** claim deadline is **Month DD, 2026**

Important: QCAP deadline is one year earlier than PCC deadline.

How many cigarettes and which brands?

Both plans require the smoker or ex-smoker to have smoked at least 87,600 cigarettes (for example, 20 cigarettes a day for 12 years) between January 1, 1950 and November 20, 1998. The cigarettes must be from brands sold by the tobacco companies. The website has a list of the eligible brands, which include most legal cigarettes sold in Canada.

What are other PCC Requirements?

In addition to the disease and smoking requirements, the smoker or ex-smoker under **PCC** must:

- (a) reside in Canada (or if deceased, must have resided in Canada at the time of death);
- (b) have been diagnosed **between March 8, 2015 and March 8, 2019**, inclusive of those dates;
- (c) have resided in Canada at the time of diagnosis; and
- (d) have been alive on March 8, 2019.

What are other QCAP Requirements?

In addition to the disease and smoking requirements, the smoker or ex-smoker under **QCAP** must:

- (a) reside in Quebec (or if deceased, must have resided in Quebec at the time of death);
- (b) have been diagnosed **before March 12, 2012**;
- (c) have resided in Quebec at the time of diagnosis; and
- (d) have been alive on November 20, 1998.

How can I get Free help?

Agents are available **free of charge** to assist claimants under these plans. Agents will help you (a) complete your claim form; (b) commission your signature on the claim form; (c) provide guidance on how to obtain the necessary information and documents for your claim.

PCC Agent is Epiq +1 (888) 482-5852
PCCAgent@TobaccoClaimsCanada.ca

QCAP Agent is Proactio +1 (888) 880-1844
tabac@proactio.ca

If you do not submit a claim by the applicable deadline, you cannot be eligible to get a payment.

If you are not sure whether you qualify, the website has a simple questionnaire to help you. The plans have been designed so that you **do not need a lawyer** to prepare and submit your claim. If you have already registered, you will be notified by an Agent about how to complete your claim.

Full information is available at the official website www.TobaccoClaimsCanada.ca.

###

SOURCE// TBD

PRESS ONLY// TBD

b

View 1: Projected Costs by Court Appointment, Category and Year

Epiq Class Action Services Canada

August 22, 2025



Year 1 commences on the first day of the calendar month following the Plan Implementation Date and is comprised of the succeeding 12 calendar months.

Court Appointment/ Category	Pre-Implementation	Y1	Y2	Y3	Y4	Total
PCC Notice Plan						
Paid Media Noticing	\$ -	\$ 3,094,764	\$ 2,078,457	\$ -	\$ -	\$ 5,173,221
Print & Mail Operations	\$ -	\$ 110,080	\$ 66,725	\$ -	\$ -	\$ 176,805
Project & Escalation Mgmt/ Noticing	\$ 167,482	\$ 296,869	\$ 147,751	\$ -	\$ -	\$ 612,102
Technology Management	\$ -	\$ 10,692	\$ 10,692	\$ -	\$ -	\$ 21,384
Contact Centre	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Claims Operations	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Initial & Recurring Items	\$ -	\$ 5,816	\$ 1,056	\$ -	\$ -	\$ 6,872
Other	\$ 2,500	\$ 81,724	\$ 74,224	\$ -	\$ -	\$ 158,448
<i>Subtotal</i>	\$ 169,982	\$ 3,599,946	\$ 2,378,905	\$ -	\$ -	\$ 6,148,832
QCAP Notice Plan						
Paid Media Noticing	\$ -	\$ 406,528	\$ -	\$ -	\$ -	\$ 406,528
Print & Mail Operations	\$ -	\$ 148,145	\$ -	\$ -	\$ -	\$ 148,145
Project & Escalation Mgmt/ Noticing	\$ 191,581	\$ 234,155	\$ -	\$ -	\$ -	\$ 425,736
Technology Management	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Contact Centre	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Claims Operations	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Initial & Recurring Items	\$ -	\$ 7,920	\$ -	\$ -	\$ -	\$ 7,920
Other	\$ 10,000	\$ 131,962	\$ -	\$ -	\$ -	\$ 141,962
<i>Subtotal</i>	\$ 201,581	\$ 928,710	\$ -	\$ -	\$ -	\$ 1,130,291
PCC Agent						
Paid Media Noticing	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Print & Mail Operations	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Project & Escalation Mgmt/ Noticing	\$ 352,055	\$ 4,223,258	\$ 8,422,074	\$ 1,695,379	\$ 81,701	\$ 14,774,468
Technology Management	\$ 354,449	\$ 1,120,544	\$ 613,686	\$ 171,654	\$ 10,178	\$ 2,270,511
Contact Centre	\$ 351,213	\$ 7,200,009	\$ 5,428,270	\$ 607,331	\$ -	\$ 13,586,823
Claims Operations	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Initial & Recurring Items	\$ -	\$ 6,000	\$ -	\$ -	\$ -	\$ 6,000
Other	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
<i>Subtotal</i>	\$ 1,057,716	\$ 12,549,811	\$ 14,464,031	\$ 2,474,363	\$ 91,879	\$ 30,637,801
PCC Claim Administration						
Estimated Claims: 74,401						
Paid Media Noticing	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Print & Mail Operations	\$ -	\$ 175,832	\$ 223,652	\$ 281,732	\$ 11,441	\$ 692,657
Project & Escalation Mgmt/ Noticing	\$ 1,217,331	\$ 4,001,920	\$ 6,525,099	\$ 4,440,393	\$ 1,325,557	\$ 17,510,300
Technology Management	\$ 1,476,131	\$ 1,789,243	\$ 1,145,387	\$ 478,424	\$ 47,276	\$ 4,936,461
Contact Centre	\$ 56,931	\$ 545,012	\$ 458,623	\$ 1,777,166	\$ 114,656	\$ 2,952,388
Claims Operations	\$ 30,950	\$ 1,300,024	\$ 3,434,623	\$ 606,418	\$ -	\$ 5,372,015
Initial & Recurring Items	\$ -	\$ 30,986	\$ 9,676	\$ 10,732	\$ 5,056	\$ 56,450
Other	\$ 1,925	\$ -	\$ -	\$ 70,554	\$ 264	\$ 72,743
<i>Subtotal</i>	\$ 2,783,268	\$ 7,843,018	\$ 11,797,060	\$ 7,665,419	\$ 1,504,250	\$ 31,593,014
QCAP Claim Administration						
Estimated Claims: 69,970						
Paid Media Noticing	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Print & Mail Operations	\$ -	\$ 256,966	\$ 250,628	\$ 47,463	\$ -	\$ 555,057
Project & Escalation Mgmt/ Noticing	\$ 793,594	\$ 6,517,638	\$ 3,069,012	\$ 48,126	\$ -	\$ 10,428,369
Technology Management	\$ 1,065,309	\$ 1,844,519	\$ 698,447	\$ 30,403	\$ 7,000	\$ 3,645,678
Contact Centre	\$ 30,130	\$ 424,794	\$ 697,551	\$ 30,328	\$ -	\$ 1,182,803
Claims Operations	\$ 288,626	\$ 6,085,817	\$ 53,741	\$ -	\$ -	\$ 6,428,183
Initial & Recurring Items	\$ -	\$ 33,626	\$ 9,676	\$ 9,676	\$ 5,056	\$ 58,034
Other	\$ 10,000	\$ 28,075	\$ 75,436	\$ 20,145	\$ -	\$ 133,656
<i>Subtotal</i>	\$ 2,187,658	\$ 15,191,435	\$ 4,854,489	\$ 186,142	\$ 12,056	\$ 22,431,780
Total	\$ 6,400,205	\$ 40,112,920	\$ 33,494,485	\$ 10,325,924	\$ 1,608,185	\$ 91,941,719

Amounts provided exclude any applicable sales or other taxes.

CCAA TOBACCO GLOBAL CLAIM ADMINISTRATION COSTS FRAMEWORK

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View 2: Projected Costs by Category, CLIN and Year

Epiq Class Action Services Canada

August 22, 2025



Year 1 commences on the first day of the calendar month following the Plan Implementation Date and is comprised of the succeeding 12 calendar months.

Contract Line Item (CLIN)	Pre-Implementation	Y1	Y2	Y3	Y4	Total
Paid Media Noticing	\$ -	\$ 3,501,292	\$ 2,078,457	\$ -	\$ -	\$ 5,579,749
Print & Mail Operations						
Mailing Coordinator	\$ -	\$ 452,625	\$ 328,250	\$ 117,181	\$ 2,069	\$ 900,125
Account Mgmt & Reconciliation	\$ -	\$ -	\$ 37,500	\$ 45,000	\$ 7,500	\$ 90,000
Print 1-image Cheque with Stub	\$ -	\$ -	\$ 99,894	\$ 147,340	\$ 350	\$ 247,584
Print/Mail PCC or QCAP Int Ntc/CL Pkt	\$ -	\$ 2,010	\$ -	\$ -	\$ -	\$ 2,010
Requested Fulfillment Notice	\$ -	\$ 172,900	\$ -	\$ -	\$ -	\$ 172,900
Reminder Fulfillment Notice	\$ -	\$ 56,140	\$ 60,150	\$ -	\$ -	\$ 116,290
Record Undeliverable Mail	\$ -	\$ -	\$ 821	\$ 1,186	\$ 50	\$ 2,057
Email & Record Undeliverable Email	\$ -	\$ 5,800	\$ 200	\$ -	\$ -	\$ 6,000
Photocopy or Image	\$ -	\$ -	\$ 6,375	\$ 10,525	\$ 100	\$ 17,000
Box Storage	\$ -	\$ 1,548	\$ 3,765	\$ 3,003	\$ 462	\$ 8,778
Stop Payment Fee	\$ -	\$ -	\$ 750	\$ 1,000	\$ 250	\$ 2,000
Bank Fees - Account	\$ -	\$ -	\$ 3,300	\$ 3,960	\$ 660	\$ 7,920
Subtotal	\$ -	\$ 691,023	\$ 541,005	\$ 329,195	\$ 11,441	\$ 1,572,664
Project & Escalation Mgmt/ Noticing						
Project Coordinator	\$ 377,120	\$ 6,051,529	\$ 7,576,171	\$ 2,079,707	\$ 418,047	\$ 16,502,576
Proj Specialist/Proj Attorney	\$ 169,154	\$ 2,903,694	\$ 4,392,745	\$ 1,621,357	\$ 59,558	\$ 9,146,507
Project Manager	\$ 532,724	\$ 2,373,847	\$ 2,637,729	\$ 948,132	\$ 261,785	\$ 6,754,217
Graphic Design/ Planner	\$ 43,559	\$ 66,394	\$ 21,087	\$ -	\$ -	\$ 131,040
Program Mgr/ Noticing Mgr	\$ 164,054	\$ 827,569	\$ 841,951	\$ 307,598	\$ 139,418	\$ 2,280,590
Client Services Mgr/Notice Dir	\$ 289,554	\$ 884,082	\$ 890,540	\$ 575,945	\$ 506,135	\$ 3,146,255
Managing Director/Executive	\$ 1,145,878	\$ 2,033,725	\$ 1,800,713	\$ 649,408	\$ 22,066	\$ 5,651,789
Docusign Usage Fee	\$ -	\$ 130,001	\$ -	\$ -	\$ -	\$ 130,001
Dedicated Monthly Fax I&R Fee	\$ -	\$ 1,200	\$ 1,200	\$ 700	\$ 100	\$ 3,200
Dedicated Monthly Email I&R Fee	\$ -	\$ 1,800	\$ 1,800	\$ 1,050	\$ 150	\$ 4,800
Subtotal	\$ 2,722,042	\$ 15,273,841	\$ 18,163,936	\$ 6,183,898	\$ 1,407,259	\$ 43,750,975
Technology Management						
Data Analyst and Reporting	\$ 148,009	\$ 1,708,827	\$ 799,865	\$ 110,555	\$ 39,461	\$ 2,806,718
Software Engineer/SQL Developer	\$ 2,450,078	\$ 2,337,457	\$ 1,395,482	\$ 471,434	\$ 848	\$ 6,655,299
Solutions Architect	\$ 25,527	\$ 147,391	\$ -	\$ -	\$ -	\$ 172,918
Product/ Design Manager	\$ 53,460	\$ 114,085	\$ 5,940	\$ -	\$ -	\$ 173,485
Technology Mgr/Sr Software Eng	\$ 218,815	\$ 439,347	\$ 249,033	\$ 78,600	\$ 4,545	\$ 990,339
Website Hosting	\$ -	\$ 3,564	\$ 3,564	\$ 3,564	\$ -	\$ 10,692
Facilitator Monthly Support	\$ -	\$ 7,200	\$ 7,200	\$ 4,200	\$ 600	\$ 19,200
Dashboard Monthly Support	\$ -	\$ 7,128	\$ 7,128	\$ 7,128	\$ -	\$ 21,384
Data Storage Retention	\$ -	\$ -	\$ -	\$ 5,000	\$ 19,000	\$ 24,000
Subtotal	\$ 2,895,889	\$ 4,764,998	\$ 2,468,211	\$ 680,482	\$ 64,454	\$ 10,874,034
Contact Centre						
Contact Centre Agent	\$ 154,275	\$ 3,505,950	\$ 2,800,350	\$ 959,175	\$ 44,100	\$ 7,463,850
Contact Centre QA/Lead/Train	\$ 138,297	\$ 3,091,981	\$ 2,496,321	\$ 904,812	\$ 42,817	\$ 6,674,227
Contact Centre Help Desk	\$ 42,562	\$ 442,724	\$ 386,251	\$ 248,671	\$ 14,043	\$ 1,134,251
Contact Centre Supervisor	\$ 59,637	\$ 611,855	\$ 488,376	\$ 161,004	\$ 7,273	\$ 1,328,144
Contact Centre Manager	\$ 43,206	\$ 444,483	\$ 359,176	\$ 122,116	\$ 5,629	\$ 974,609
IVR Maintenance Fee	\$ 297	\$ 3,564	\$ 3,564	\$ 1,782	\$ -	\$ 9,207
IVR Minutes of Use	\$ -	\$ 69,259	\$ 50,406	\$ 17,265	\$ 794	\$ 137,724
Subtotal	\$ 438,274	\$ 8,169,816	\$ 6,584,444	\$ 2,414,825	\$ 114,656	\$ 17,722,014
Claims Operations Services						
Data Entry/ Clerical	\$ 7,535	\$ 77,517	\$ 47,269	\$ 9,504	\$ -	\$ 141,825
Claims Review	\$ 204,642	\$ 5,577,759	\$ 2,277,858	\$ 418,476	\$ -	\$ 8,478,734
Claims Lead/ QA	\$ 53,128	\$ 538,469	\$ 372,685	\$ 53,686	\$ -	\$ 1,017,968
Claims Supervisor	\$ 54,272	\$ 277,924	\$ 215,093	\$ 19,848	\$ -	\$ 567,138
Paper/Email/Fax Claims Doc Intake	\$ -	\$ 20,730	\$ 13,000	\$ 2,370	\$ -	\$ 36,100
Paper/Email/Fax Misc Doc Intake	\$ -	\$ 78,488	\$ 50,888	\$ 9,312	\$ -	\$ 138,688
Acknowledgement or Claim Notif.	\$ -	\$ 741,508	\$ 464,970	\$ 84,716	\$ -	\$ 1,291,194
Online Claim Document Intake	\$ -	\$ 33,923	\$ 21,398	\$ 3,902	\$ -	\$ 59,224
Scanning and Image Storage	\$ -	\$ 39,524	\$ 25,202	\$ 4,602	\$ -	\$ 69,328
Subtotal	\$ 319,576	\$ 7,385,841	\$ 3,488,363	\$ 606,418	\$ -	\$ 11,800,198
Initial & Recurring Items						
Import and Standardize Data	\$ -	\$ 2,640	\$ -	\$ -	\$ -	\$ 2,640
Form Set-up	\$ -	\$ 48,840	\$ -	\$ -	\$ -	\$ 48,840
IVR Configuration and Recording	\$ -	\$ 6,000	\$ -	\$ -	\$ -	\$ 6,000
Activation Fee for Fax & Inbox	\$ -	\$ 500	\$ -	\$ -	\$ -	\$ 500
Post Office Box - Dedicated	\$ -	\$ 3,168	\$ 3,168	\$ 3,168	\$ 2,112	\$ 11,616
Email Form or Notice Setup	\$ -	\$ 23,200	\$ -	\$ -	\$ -	\$ 23,200
Settlement Fund Tax Filing	\$ -	\$ -	\$ 8,000	\$ 8,000	\$ 8,000	\$ 24,000
Escrow Management Fee	\$ -	\$ -	\$ 9,240	\$ 9,240	\$ -	\$ 18,480
Subtotal	\$ -	\$ 84,348	\$ 20,408	\$ 20,408	\$ 10,112	\$ 135,276
Other						
Reimbursed Travel Expenses	\$ 1,925	\$ 18,075	\$ 15,000	\$ -	\$ -	\$ 35,000
Translation	\$ 22,500	\$ 27,500	\$ -	\$ -	\$ -	\$ 50,000
Postage	\$ -	\$ 196,186	\$ 133,910	\$ 89,499	\$ 214	\$ 419,809
Delivery	\$ -	\$ -	\$ 750	\$ 1,200	\$ 50	\$ 2,000
Subtotal	\$ 24,425	\$ 241,761	\$ 149,660	\$ 90,699	\$ 264	\$ 506,809
Total	\$ 6,400,205	\$ 40,112,920	\$ 33,494,485	\$ 10,325,924	\$ 1,608,185	\$ 91,941,719

Amounts provided exclude any applicable sales or other taxes.

CCAA TOBACCO GLOBAL CLAIM ADMINISTRATION COSTS FRAMEWORK ¹⁵⁶
View 3: Projected Costs by Category, CLIN and Court Appointment
 Epiq Class Action Services Canada
 August 22, 2025



Contract Line Item (CLIN)	PCC Notice Plan	QCAP Notice Plan	PCC Agent	PCC Claim Administration	QCAP Claim Administration	Total
Paid Media Noticing	\$ 5,173,221	\$ 406,528	\$ -	\$ -	\$ -	\$ 5,579,749
Print & Mail Operations						
Mailing Coordinator	\$ 12,750	\$ 15,000	\$ -	\$ 512,375	\$ 360,000	\$ 900,125
Account Mgmt & Reconciliation	\$ -	\$ -	\$ -	\$ 45,000	\$ 45,000	\$ 90,000
Print 1-image Cheque with Stub	\$ -	\$ -	\$ -	\$ 114,392	\$ 133,192	\$ 247,584
Print/Mail PCC or QCAP Int Ntc/CI Pkt	\$ 1,005	\$ 1,005	\$ -	\$ -	\$ -	\$ 2,010
Requested Fulfillment Notice	\$ 96,900	\$ 76,000	\$ -	\$ -	\$ -	\$ 172,900
Reminder Fulfillment Notice	\$ 60,150	\$ 56,140	\$ -	\$ -	\$ -	\$ 116,290
Record Undeliverable Mail	\$ -	\$ -	\$ -	\$ 962	\$ 1,095	\$ 2,057
Email & Record Undeliverable Email	\$ 6,000	\$ -	\$ -	\$ -	\$ -	\$ 6,000
Photocopy or Image	\$ -	\$ -	\$ -	\$ 8,500	\$ 8,500	\$ 17,000
Box Storage	\$ -	\$ -	\$ -	\$ 6,468	\$ 2,310	\$ 8,778
Stop Payment Fee	\$ -	\$ -	\$ -	\$ 1,000	\$ 1,000	\$ 2,000
Bank Fees - Account	\$ -	\$ -	\$ -	\$ 3,960	\$ 3,960	\$ 7,920
<i>Subtotal</i>	\$ 176,805	\$ 148,145	\$ -	\$ 692,657	\$ 555,057	\$ 1,572,664
Project & Escalation Mgmt/ Noticing						
Project Coordinator	\$ 61,200	\$ 67,500	\$ 8,276,804	\$ 4,204,139	\$ 3,892,932	\$ 16,502,576
Proj Specialist/Proj Attorney	\$ 33,600	\$ 16,800	\$ 3,492,132	\$ 4,540,561	\$ 1,063,414	\$ 9,146,507
Project Manager	\$ 83,640	\$ 62,730	\$ 1,675,613	\$ 3,098,519	\$ 1,833,715	\$ 6,754,217
Graphic Design/ Planner	\$ 87,360	\$ 43,680	\$ -	\$ -	\$ -	\$ 131,040
Program Mgr/ Noticing Mgr	\$ 135,432	\$ 67,716	\$ 420,890	\$ 1,053,303	\$ 603,249	\$ 2,280,590
Client Services Mgr/Notice Dir	\$ 87,120	\$ 43,560	\$ 223,608	\$ 1,918,733	\$ 873,234	\$ 3,146,255
Managing Director/Executive	\$ 123,750	\$ 123,750	\$ 685,420	\$ 2,690,296	\$ 2,028,574	\$ 5,651,789
DocuSign Usage Fee	\$ -	\$ -	\$ -	\$ -	\$ 130,001	\$ 130,001
Dedicated Monthly Fax I&R Fee	\$ -	\$ -	\$ -	\$ 1,900	\$ 1,300	\$ 3,200
Dedicated Monthly Email I&R Fee	\$ -	\$ -	\$ -	\$ 2,850	\$ 1,950	\$ 4,800
<i>Subtotal</i>	\$ 612,102	\$ 425,736	\$ 14,774,468	\$ 17,510,300	\$ 10,428,369	\$ 43,750,975
Technology Management						
Data Analyst and Reporting	\$ -	\$ -	\$ 507,530	\$ 1,398,859	\$ 900,329	\$ 2,806,718
Software Engineer/SQL Developer	\$ -	\$ -	\$ 1,339,942	\$ 2,992,260	\$ 2,323,097	\$ 6,655,299
Solutions Architect	\$ -	\$ -	\$ 46,671	\$ 68,334	\$ 57,913	\$ 172,918
Product/ Design Manager	\$ -	\$ -	\$ 47,128	\$ 66,939	\$ 59,418	\$ 173,485
Technology Mgr/Sr Software Eng	\$ -	\$ -	\$ 329,241	\$ 375,977	\$ 285,121	\$ 990,339
Website Hosting	\$ 7,128	\$ -	\$ -	\$ 3,564	\$ -	\$ 10,692
Facilitator Monthly Support	\$ -	\$ -	\$ -	\$ 11,400	\$ 7,800	\$ 19,200
Dashboard Monthly Support	\$ 14,256	\$ -	\$ -	\$ 7,128	\$ -	\$ 21,384
Data Storage Retention	\$ -	\$ -	\$ -	\$ 12,000	\$ 12,000	\$ 24,000
<i>Subtotal</i>	\$ 21,384	\$ -	\$ 2,270,511	\$ 4,936,461	\$ 3,645,678	\$ 10,874,034
Contact Centre						
Contact Centre Agent	\$ -	\$ -	\$ 5,898,300	\$ 1,135,575	\$ 429,975	\$ 7,463,850
Contact Centre QA/Lead/Train	\$ -	\$ -	\$ 5,114,138	\$ 1,102,533	\$ 457,557	\$ 6,674,227
Contact Centre Help Desk	\$ -	\$ -	\$ 627,101	\$ 361,620	\$ 145,530	\$ 1,134,251
Contact Centre Supervisor	\$ -	\$ -	\$ 1,066,337	\$ 187,278	\$ 74,529	\$ 1,328,144
Contact Centre Manager	\$ -	\$ -	\$ 762,194	\$ 144,942	\$ 67,473	\$ 974,609
IVR Maintenance Fee	\$ -	\$ -	\$ 9,207	\$ -	\$ -	\$ 9,207
IVR Minutes of Use	\$ -	\$ -	\$ 109,544	\$ 20,440	\$ 7,740	\$ 137,724
<i>Subtotal</i>	\$ -	\$ -	\$ 13,586,823	\$ 2,952,388	\$ 1,182,803	\$ 17,722,014
Claims Operations Services						
Data Entry/ Clerical	\$ -	\$ -	\$ -	\$ 74,625	\$ 67,200	\$ 141,825
Claims Review	\$ -	\$ -	\$ -	\$ 3,571,302	\$ 4,907,432	\$ 8,478,734
Claims Lead/ QA	\$ -	\$ -	\$ -	\$ 575,868	\$ 442,100	\$ 1,017,968
Claims Supervisor	\$ -	\$ -	\$ -	\$ 326,573	\$ 240,565	\$ 567,138
Paper/Email/Fax Claims Doc Intake	\$ -	\$ -	\$ -	\$ 18,600	\$ 17,500	\$ 36,100
Paper/Email/Fax Misc Doc Intake	\$ -	\$ -	\$ -	\$ 73,112	\$ 65,576	\$ 138,688
Acknowledgement or Claim Notif.	\$ -	\$ -	\$ -	\$ 665,166	\$ 626,028	\$ 1,291,194
Online Claim Document Intake	\$ -	\$ -	\$ -	\$ 30,636	\$ 28,588	\$ 59,224
Scanning and Image Storage	\$ -	\$ -	\$ -	\$ 36,134	\$ 33,194	\$ 69,328
<i>Subtotal</i>	\$ -	\$ -	\$ -	\$ 5,372,015	\$ 6,428,183	\$ 11,800,198
Initial & Recurring Items						
Import and Standardize Data	\$ -	\$ -	\$ -	\$ -	\$ 2,640	\$ 2,640
Form Set-up	\$ 3,960	\$ 7,920	\$ -	\$ 18,480	\$ 18,480	\$ 48,840
IVR Configuration and Recording	\$ -	\$ -	\$ 6,000	\$ -	\$ -	\$ 6,000
Activation Fee for Fax & Inbox	\$ -	\$ -	\$ -	\$ 250	\$ 250	\$ 500
Post Office Box - Dedicated	\$ 2,112	\$ -	\$ -	\$ 5,280	\$ 4,224	\$ 11,616
Email Form or Notice Setup	\$ 800	\$ -	\$ -	\$ 11,200	\$ 11,200	\$ 23,200
Settlement Fund Tax Filing	\$ -	\$ -	\$ -	\$ 12,000	\$ 12,000	\$ 24,000
Escrow Management Fee	\$ -	\$ -	\$ -	\$ 9,240	\$ 9,240	\$ 18,480
<i>Subtotal</i>	\$ 6,872	\$ 7,920	\$ 6,000	\$ 56,450	\$ 58,034	\$ 135,276
Other						
Reimbursed Travel Expenses	\$ -	\$ -	\$ -	\$ 1,925	\$ 33,075	\$ 35,000
Translation	\$ 10,000	\$ 20,000	\$ -	\$ -	\$ 20,000	\$ 50,000
Postage	\$ 148,448	\$ 121,962	\$ -	\$ 69,818	\$ 79,581	\$ 419,809
Delivery	\$ -	\$ -	\$ -	\$ 1,000	\$ 1,000	\$ 2,000
<i>Subtotal</i>	\$ 158,448	\$ 141,962	\$ -	\$ 72,743	\$ 133,656	\$ 506,809
Total	\$ 6,148,832	\$ 1,130,291	\$ 30,637,801	\$ 31,593,014	\$ 22,431,780	\$ 91,941,719

Amounts provided exclude any applicable sales or other taxes.

Pre-Implementation Detail: PCC Notice Plan

Epiq Class Action Services Canada

August 22, 2025

	To July 31, 2025 Invoiced	August 1-15, 2025 Actual	August 16-31, 2025 Estimated	August 2025 Subtotal	Total
Paid Media Noticing	\$ -	\$ -	\$ -	\$ -	\$ -
Print & Mail Operations					
Mailing Coordinator	\$ -	\$ -	\$ -	\$ -	\$ -
Account Mgmt & Reconciliation	\$ -	\$ -	\$ -	\$ -	\$ -
Print 1-image Cheque with Stub	\$ -	\$ -	\$ -	\$ -	\$ -
Print/Mail PCC or QCAP Int Ntc/CI Pkt	\$ -	\$ -	\$ -	\$ -	\$ -
Requested Fulfillment Notice	\$ -	\$ -	\$ -	\$ -	\$ -
Reminder Fulfillment Notice	\$ -	\$ -	\$ -	\$ -	\$ -
Record Undeliverable Mail	\$ -	\$ -	\$ -	\$ -	\$ -
Email & Record Undeliverable Email	\$ -	\$ -	\$ -	\$ -	\$ -
Photocopy or Image	\$ -	\$ -	\$ -	\$ -	\$ -
Box Storage	\$ -	\$ -	\$ -	\$ -	\$ -
Stop Payment Fee	\$ -	\$ -	\$ -	\$ -	\$ -
Bank Fees - Account	\$ -	\$ -	\$ -	\$ -	\$ -
<i>Subtotal</i>	\$ -	\$ -	\$ -	\$ -	\$ -
Project & Escalation Mgmt/ Noticing					
Project Coordinator	\$ -	\$ 135	\$ 585	\$ 720	\$ 720
Proj Specialist/Proj Attorney	\$ -	\$ -	\$ -	\$ -	\$ -
Project Manager	\$ 1,190	\$ 765	\$ 731	\$ 1,496	\$ 2,686
Graphic Design/ Planner	\$ -	\$ 104	\$ 11,848	\$ 11,952	\$ 11,952
Program Mgr/ Noticing Mgr	\$ 386	\$ 564	\$ (178)	\$ 386	\$ 772
Client Services Mgr/Notice Dir	\$ -	\$ -	\$ 182	\$ 182	\$ 182
Managing Director/Executive	\$ 2,970	\$ 149	\$ 162,113	\$ 162,261	\$ 165,231
Docusign Usage Fee	\$ -	\$ -	\$ -	\$ -	\$ -
Dedicated Monthly Fax I&R Fee	\$ -	\$ -	\$ -	\$ -	\$ -
Dedicated Monthly Email I&R Fee	\$ -	\$ -	\$ -	\$ -	\$ -
<i>Subtotal</i>	\$ 4,546	\$ 1,717	\$ 175,279	\$ 176,996	\$ 181,542
Technology Management					
Data Analyst and Reporting	\$ -	\$ -	\$ -	\$ -	\$ -
Software Engineer/SQL Developer	\$ -	\$ -	\$ -	\$ -	\$ -
Solutions Architect	\$ -	\$ -	\$ -	\$ -	\$ -
Product/ Design Manager	\$ -	\$ -	\$ -	\$ -	\$ -
Technology Mgr/Sr Software Eng	\$ -	\$ -	\$ -	\$ -	\$ -
Website Hosting	\$ -	\$ -	\$ -	\$ -	\$ -
Facilitator Monthly Support	\$ -	\$ -	\$ -	\$ -	\$ -
Dashboard Monthly Support	\$ -	\$ -	\$ -	\$ -	\$ -
Data Storage Retention	\$ -	\$ -	\$ -	\$ -	\$ -
<i>Subtotal</i>	\$ -	\$ -	\$ -	\$ -	\$ -
Contact Centre					
Contact Centre Agent	\$ -	\$ -	\$ -	\$ -	\$ -
Contact Centre QA/Lead/Train	\$ -	\$ -	\$ -	\$ -	\$ -
Contact Centre Help Desk	\$ -	\$ -	\$ -	\$ -	\$ -
Contact Centre Supervisor	\$ -	\$ -	\$ -	\$ -	\$ -
Contact Centre Manager	\$ -	\$ -	\$ -	\$ -	\$ -
IVR Maintenance Fee	\$ -	\$ -	\$ -	\$ -	\$ -
IVR Minutes of Use	\$ -	\$ -	\$ -	\$ -	\$ -
<i>Subtotal</i>	\$ -	\$ -	\$ -	\$ -	\$ -
Claims Operations Services					
Data Entry/ Clerical	\$ -	\$ -	\$ -	\$ -	\$ -
Claims Review	\$ -	\$ -	\$ -	\$ -	\$ -
Claims Lead/ QA	\$ -	\$ -	\$ -	\$ -	\$ -
Claims Supervisor	\$ -	\$ -	\$ -	\$ -	\$ -
Paper/Email/Fax Claims Doc Intake	\$ -	\$ -	\$ -	\$ -	\$ -
Paper/Email/Fax Misc Doc Intake	\$ -	\$ -	\$ -	\$ -	\$ -
Acknowledgement or Claim Notif.	\$ -	\$ -	\$ -	\$ -	\$ -
Online Claim Document Intake	\$ -	\$ -	\$ -	\$ -	\$ -
Scanning and Image Storage	\$ -	\$ -	\$ -	\$ -	\$ -
<i>Subtotal</i>	\$ -	\$ -	\$ -	\$ -	\$ -
Initial & Recurring Items					
Import and Standardize Data	\$ -	\$ -	\$ -	\$ -	\$ -
Form Set-up	\$ -	\$ -	\$ -	\$ -	\$ -
IVR Configuration and Recording	\$ -	\$ -	\$ -	\$ -	\$ -
Activation Fee for Fax & Inbox	\$ -	\$ -	\$ -	\$ -	\$ -
Post Office Box - Dedicated	\$ -	\$ -	\$ -	\$ -	\$ -
Email Form or Notice Setup	\$ -	\$ -	\$ -	\$ -	\$ -
Settlement Fund Tax Filing	\$ -	\$ -	\$ -	\$ -	\$ -
Escrow Management Fee	\$ -	\$ -	\$ -	\$ -	\$ -
<i>Subtotal</i>	\$ -	\$ -	\$ -	\$ -	\$ -
Other					
CCAA Outside Counsel - General	\$ -	\$ -	\$ -	\$ -	\$ -
CCAA Outside Counsel - Rpt/Motions	\$ -	\$ -	\$ -	\$ -	\$ -
Claims: Lgl Rep, Estate Succ. Counsel	\$ -	\$ -	\$ -	\$ -	\$ -
Claims: Other advisory/audit	\$ -	\$ -	\$ -	\$ -	\$ -
Reimbursed Travel Expenses	\$ -	\$ -	\$ -	\$ -	\$ -
Translation	\$ -	\$ -	\$ -	\$ -	\$ -
Postage	\$ -	\$ -	\$ -	\$ -	\$ -
Delivery	\$ -	\$ -	\$ -	\$ -	\$ -
<i>Subtotal</i>	\$ -	\$ -	\$ -	\$ -	\$ -
Total	\$ 4,546	\$ 1,717	\$ 175,279	\$ 176,996	\$ 181,542
Items Not Included in Framework	\$ -	\$ -	\$ -	\$ -	\$ -
Net Framework Totals	\$ 4,546	\$ 1,717	\$ 175,279	\$ 176,996	\$ 181,542
Total Epiq Hours	14.3	8.0	381.2	389.2	403.5

Amounts provided exclude any applicable sales or other taxes.

	To July 31, 2025 Invoiced	August 1-15, 2025 Actual	August 16-31, 2025 Estimated	August 2025 Subtotal	Total
Paid Media Noticing	\$ -	\$ -	\$ -	\$ -	\$ -
Print & Mail Operations					
Mailing Coordinator	\$ -	\$ -	\$ -	\$ -	\$ -
Account Mgmt & Reconciliation	\$ -	\$ -	\$ -	\$ -	\$ -
Print 1-image Cheque with Stub	\$ -	\$ -	\$ -	\$ -	\$ -
Print/Mail PCC or QCAP Int Ntc/CI Pkt	\$ -	\$ -	\$ -	\$ -	\$ -
Requested Fulfillment Notice	\$ -	\$ -	\$ -	\$ -	\$ -
Reminder Fulfillment Notice	\$ -	\$ -	\$ -	\$ -	\$ -
Record Undeliverable Mail	\$ -	\$ -	\$ -	\$ -	\$ -
Email & Record Undeliverable Email	\$ -	\$ -	\$ -	\$ -	\$ -
Photocopy or Image	\$ -	\$ -	\$ -	\$ -	\$ -
Box Storage	\$ -	\$ -	\$ -	\$ -	\$ -
Stop Payment Fee	\$ -	\$ -	\$ -	\$ -	\$ -
Bank Fees - Account	\$ -	\$ -	\$ -	\$ -	\$ -
<i>Subtotal</i>	\$ -	\$ -	\$ -	\$ -	\$ -
Project & Escalation Mgmt/ Noticing					
Project Coordinator	\$ -	\$ 450	\$ 1,905	\$ 2,355	\$ 2,355
Proj Specialist/Proj Attorney	\$ -	\$ -	\$ -	\$ -	\$ -
Project Manager	\$ 1,190	\$ 867	\$ 3,213	\$ 4,080	\$ 5,270
Graphic Design/ Planner	\$ -	\$ 26	\$ 12,160	\$ 12,186	\$ 12,186
Program Mgr/ Noticing Mgr	\$ 386	\$ 713	\$ 178	\$ 891	\$ 1,277
Client Services Mgr/Notice Dir	\$ -	\$ 36	\$ 653	\$ 690	\$ 690
Managing Director/Executive	\$ 2,970	\$ 545	\$ 163,845	\$ 164,390	\$ 167,360
Docusign Usage Fee	\$ -	\$ -	\$ -	\$ -	\$ -
Dedicated Monthly Fax I&R Fee	\$ -	\$ -	\$ -	\$ -	\$ -
Dedicated Monthly Email I&R Fee	\$ -	\$ -	\$ -	\$ -	\$ -
<i>Subtotal</i>	\$ 4,546	\$ 2,637	\$ 181,954	\$ 184,591	\$ 189,137
Technology Management					
Data Analyst and Reporting	\$ -	\$ -	\$ -	\$ -	\$ -
Software Engineer/SQL Developer	\$ -	\$ -	\$ -	\$ -	\$ -
Solutions Architect	\$ -	\$ -	\$ -	\$ -	\$ -
Product/ Design Manager	\$ -	\$ -	\$ -	\$ -	\$ -
Technology Mgr/Sr Software Eng	\$ -	\$ -	\$ -	\$ -	\$ -
Website Hosting	\$ -	\$ -	\$ -	\$ -	\$ -
Facilitator Monthly Support	\$ -	\$ -	\$ -	\$ -	\$ -
Dashboard Monthly Support	\$ -	\$ -	\$ -	\$ -	\$ -
Data Storage Retention	\$ -	\$ -	\$ -	\$ -	\$ -
<i>Subtotal</i>	\$ -	\$ -	\$ -	\$ -	\$ -
Contact Centre					
Contact Centre Agent	\$ -	\$ -	\$ -	\$ -	\$ -
Contact Centre QA/Lead/Train	\$ -	\$ -	\$ -	\$ -	\$ -
Contact Centre Help Desk	\$ -	\$ -	\$ -	\$ -	\$ -
Contact Centre Supervisor	\$ -	\$ -	\$ -	\$ -	\$ -
Contact Centre Manager	\$ -	\$ -	\$ -	\$ -	\$ -
IVR Maintenance Fee	\$ -	\$ -	\$ -	\$ -	\$ -
IVR Minutes of Use	\$ -	\$ -	\$ -	\$ -	\$ -
<i>Subtotal</i>	\$ -	\$ -	\$ -	\$ -	\$ -
Claims Operations Services					
Data Entry/ Clerical	\$ -	\$ -	\$ -	\$ -	\$ -
Claims Review	\$ -	\$ -	\$ -	\$ -	\$ -
Claims Lead/ QA	\$ -	\$ -	\$ -	\$ -	\$ -
Claims Supervisor	\$ -	\$ -	\$ -	\$ -	\$ -
Paper/Email/Fax Claims Doc Intake	\$ -	\$ -	\$ -	\$ -	\$ -
Paper/Email/Fax Misc Doc Intake	\$ -	\$ -	\$ -	\$ -	\$ -
Acknowledgement or Claim Notif.	\$ -	\$ -	\$ -	\$ -	\$ -
Online Claim Document Intake	\$ -	\$ -	\$ -	\$ -	\$ -
Scanning and Image Storage	\$ -	\$ -	\$ -	\$ -	\$ -
<i>Subtotal</i>	\$ -	\$ -	\$ -	\$ -	\$ -
Initial & Recurring Items					
Import and Standardize Data	\$ -	\$ -	\$ -	\$ -	\$ -
Form Set-up	\$ -	\$ -	\$ -	\$ -	\$ -
IVR Configuration and Recording	\$ -	\$ -	\$ -	\$ -	\$ -
Activation Fee for Fax & Inbox	\$ -	\$ -	\$ -	\$ -	\$ -
Post Office Box - Dedicated	\$ -	\$ -	\$ -	\$ -	\$ -
Email Form or Notice Setup	\$ -	\$ -	\$ -	\$ -	\$ -
Settlement Fund Tax Filing	\$ -	\$ -	\$ -	\$ -	\$ -
Escrow Management Fee	\$ -	\$ -	\$ -	\$ -	\$ -
<i>Subtotal</i>	\$ -	\$ -	\$ -	\$ -	\$ -
Other					
CCAA Outside Counsel - General	\$ -	\$ -	\$ -	\$ -	\$ -
CCAA Outside Counsel - Rpt/Motions	\$ -	\$ -	\$ -	\$ -	\$ -
Claims: Lgl Rep, Estate Succ. Counsel	\$ -	\$ -	\$ -	\$ -	\$ -
Claims: Other advisory/audit	\$ -	\$ -	\$ -	\$ -	\$ -
Reimbursed Travel Expenses	\$ -	\$ -	\$ -	\$ -	\$ -
Translation	\$ -	\$ -	\$ -	\$ -	\$ -
Postage	\$ -	\$ -	\$ -	\$ -	\$ -
Delivery	\$ -	\$ -	\$ -	\$ -	\$ -
<i>Subtotal</i>	\$ -	\$ -	\$ -	\$ -	\$ -
Total	\$ 4,546	\$ 2,637	\$ 181,954	\$ 184,591	\$ 189,137
Items Not Included in Framework	\$ -	\$ -	\$ -	\$ -	\$ -
Net Framework Totals	\$ 4,546	\$ 2,637	\$ 181,954	\$ 184,591	\$ 189,137
Total Epiq Hours	14.3	11.8	411.8	423.6	437.9

Amounts provided exclude any applicable sales or other taxes.

	To July 31, 2025 Invoiced	August 1-15, 2025 Actual	August 16-31, 2025 Estimated	August 2025 Subtotal	Total
Paid Media Noticing	\$ -	\$ -	\$ -	\$ -	\$ -
Print & Mail Operations					
Mailing Coordinator	\$ -	\$ -	\$ -	\$ -	\$ -
Account Mgmt & Reconciliation	\$ -	\$ -	\$ -	\$ -	\$ -
Print 1-image Cheque with Stub	\$ -	\$ -	\$ -	\$ -	\$ -
Print/Mail PCC or QCAP Int Ntc/CI Pkt	\$ -	\$ -	\$ -	\$ -	\$ -
Requested Fulfillment Notice	\$ -	\$ -	\$ -	\$ -	\$ -
Reminder Fulfillment Notice	\$ -	\$ -	\$ -	\$ -	\$ -
Record Undeliverable Mail	\$ -	\$ -	\$ -	\$ -	\$ -
Email & Record Undeliverable Email	\$ -	\$ -	\$ -	\$ -	\$ -
Photocopy or Image	\$ -	\$ -	\$ -	\$ -	\$ -
Box Storage	\$ -	\$ -	\$ -	\$ -	\$ -
Stop Payment Fee	\$ -	\$ -	\$ -	\$ -	\$ -
Bank Fees - Account	\$ -	\$ -	\$ -	\$ -	\$ -
<i>Subtotal</i>	\$ -	\$ -	\$ -	\$ -	\$ -
Project & Escalation Mgmt/ Noticing					
Project Coordinator	\$ 38,603	\$ 12,510	\$ 48,041	\$ 60,551	\$ 99,154
Proj Specialist/Proj Attorney	\$ -	\$ -	\$ 109,154	\$ 109,154	\$ 109,154
Project Manager	\$ 99,273	\$ 21,641	\$ 34,861	\$ 56,502	\$ 155,775
Graphic Design/ Planner	\$ -	\$ 78	\$ 2,470	\$ 2,548	\$ 2,548
Program Mgr/ Noticing Mgr	\$ 2,020	\$ 416	\$ 5,083	\$ 5,498	\$ 7,518
Client Services Mgr/Notice Dir	\$ 27,795	\$ 5,046	\$ 4,555	\$ 9,601	\$ 37,396
Managing Director/Executive	\$ 125,596	\$ 25,196	\$ (1,844)	\$ 23,352	\$ 148,948
Docusign Usage Fee	\$ -	\$ -	\$ -	\$ -	\$ -
Dedicated Monthly Fax I&R Fee	\$ -	\$ -	\$ -	\$ -	\$ -
Dedicated Monthly Email I&R Fee	\$ -	\$ -	\$ -	\$ -	\$ -
<i>Subtotal</i>	\$ 293,287	\$ 64,886	\$ 202,320	\$ 267,206	\$ 560,492
Technology Management					
Data Analyst and Reporting	\$ 4,762	\$ 1,258	\$ 11,400	\$ 12,658	\$ 17,419
Software Engineer/SQL Developer	\$ 241,726	\$ 35,567	\$ 60,115	\$ 95,682	\$ 337,407
Solutions Architect	\$ -	\$ 950	\$ 5,519	\$ 6,470	\$ 6,470
Product/ Design Manager	\$ -	\$ 2,792	\$ 8,366	\$ 11,157	\$ 11,157
Technology Mgr/Sr Software Eng	\$ -	\$ 9,837	\$ 26,656	\$ 36,493	\$ 36,493
Website Hosting	\$ -	\$ -	\$ -	\$ -	\$ -
Facilitator Monthly Support	\$ -	\$ -	\$ -	\$ -	\$ -
Dashboard Monthly Support	\$ -	\$ -	\$ -	\$ -	\$ -
Data Storage Retention	\$ -	\$ -	\$ -	\$ -	\$ -
<i>Subtotal</i>	\$ 246,487	\$ 50,404	\$ 112,055	\$ 162,459	\$ 408,946
Contact Centre					
Contact Centre Agent	\$ -	\$ -	\$ 154,275	\$ 154,275	\$ 154,275
Contact Centre QA/Lead/Train	\$ -	\$ 50	\$ 138,247	\$ 138,297	\$ 138,297
Contact Centre Help Desk	\$ -	\$ -	\$ 42,562	\$ 42,562	\$ 42,562
Contact Centre Supervisor	\$ -	\$ -	\$ 59,637	\$ 59,637	\$ 59,637
Contact Centre Manager	\$ -	\$ 884	\$ 42,322	\$ 43,206	\$ 43,206
IVR Maintenance Fee	\$ -	\$ -	\$ 297	\$ 297	\$ 297
IVR Minutes of Use	\$ -	\$ -	\$ -	\$ -	\$ -
<i>Subtotal</i>	\$ -	\$ 934	\$ 437,340	\$ 438,274	\$ 438,274
Claims Operations Services					
Data Entry/ Clerical	\$ -	\$ -	\$ 2,512	\$ 2,512	\$ 2,512
Claims Review	\$ -	\$ -	\$ 68,214	\$ 68,214	\$ 68,214
Claims Lead/ QA	\$ -	\$ -	\$ 14,584	\$ 14,584	\$ 14,584
Claims Supervisor	\$ -	\$ -	\$ 14,841	\$ 14,841	\$ 14,841
Paper/Email/Fax Claims Doc Intake	\$ -	\$ -	\$ -	\$ -	\$ -
Paper/Email/Fax Misc Doc Intake	\$ -	\$ -	\$ -	\$ -	\$ -
Acknowledgement or Claim Notif.	\$ -	\$ -	\$ -	\$ -	\$ -
Online Claim Document Intake	\$ -	\$ -	\$ -	\$ -	\$ -
Scanning and Image Storage	\$ -	\$ -	\$ -	\$ -	\$ -
<i>Subtotal</i>	\$ -	\$ -	\$ 100,150	\$ 100,150	\$ 100,150
Initial & Recurring Items					
Import and Standardize Data	\$ -	\$ -	\$ -	\$ -	\$ -
Form Set-up	\$ -	\$ -	\$ -	\$ -	\$ -
IVR Configuration and Recording	\$ -	\$ -	\$ -	\$ -	\$ -
Activation Fee for Fax & Inbox	\$ -	\$ -	\$ -	\$ -	\$ -
Post Office Box - Dedicated	\$ -	\$ -	\$ -	\$ -	\$ -
Email Form or Notice Setup	\$ -	\$ -	\$ -	\$ -	\$ -
Settlement Fund Tax Filing	\$ -	\$ -	\$ -	\$ -	\$ -
Escrow Management Fee	\$ -	\$ -	\$ -	\$ -	\$ -
<i>Subtotal</i>	\$ -	\$ -	\$ -	\$ -	\$ -
Other					
CCAA Outside Counsel - General	\$ 61,658	\$ 65,940	\$ 38,844	\$ 104,784	\$ 166,442
CCAA Outside Counsel - Rpt/Motions	\$ -	\$ -	\$ -	\$ -	\$ -
Claims: Lgl Rep, Estate Succ. Counsel	\$ 659,114	\$ 119,686	\$ 246,332	\$ 366,018	\$ 1,025,132
Claims: Other advisory/audit	\$ -	\$ -	\$ -	\$ -	\$ -
Reimbursed Travel Expenses	\$ -	\$ -	\$ -	\$ -	\$ -
Translation	\$ 3,130	\$ -	\$ 6,617	\$ 6,617	\$ 9,747
Postage	\$ -	\$ -	\$ -	\$ -	\$ -
Delivery	\$ -	\$ -	\$ -	\$ -	\$ -
<i>Subtotal</i>	\$ 723,902	\$ 185,626	\$ 291,793	\$ 477,420	\$ 1,201,321
Total	\$ 1,263,675	\$ 301,851	\$ 1,143,658	\$ 1,445,509	\$ 2,709,184
Items Not Included in Framework	\$ 720,772	\$ 185,626	\$ 285,176	\$ 470,802	\$ 1,191,575
Net Framework Totals	\$ 542,903	\$ 116,224	\$ 858,482	\$ 974,706	\$ 1,517,609
Total Epiq Hours	2,167.2	471.0	6,524.7	6,995.7	9,162.9

Amounts provided exclude any applicable sales or other taxes.

	To July 31, 2025 Invoiced	August 1-15, 2025 Actual	August 16-31, 2025 Estimated	August 2025 Subtotal	Total
Paid Media Noticing	\$ -	\$ -	\$ -	\$ -	\$ -
Print & Mail Operations					
Mailing Coordinator	\$ -	\$ -	\$ -	\$ -	\$ -
Account Mgmt & Reconciliation	\$ -	\$ -	\$ -	\$ -	\$ -
Print 1-image Cheque with Stub	\$ -	\$ -	\$ -	\$ -	\$ -
Print/Mail PCC or QCAP Int Ntc/CI Pkt	\$ -	\$ -	\$ -	\$ -	\$ -
Requested Fulfillment Notice	\$ -	\$ -	\$ -	\$ -	\$ -
Reminder Fulfillment Notice	\$ -	\$ -	\$ -	\$ -	\$ -
Record Undeliverable Mail	\$ -	\$ -	\$ -	\$ -	\$ -
Email & Record Undeliverable Email	\$ -	\$ -	\$ -	\$ -	\$ -
Photocopy or Image	\$ -	\$ -	\$ -	\$ -	\$ -
Box Storage	\$ -	\$ -	\$ -	\$ -	\$ -
Stop Payment Fee	\$ -	\$ -	\$ -	\$ -	\$ -
Bank Fees - Account	\$ -	\$ -	\$ -	\$ -	\$ -
<i>Subtotal</i>	\$ -	\$ -	\$ -	\$ -	\$ -
Project & Escalation Mgmt/ Noticing					
Project Coordinator	\$ 67,568	\$ 20,235	\$ 66,056	\$ 86,291	\$ 153,859
Proj Specialist/Proj Attorney	\$ -	\$ -	\$ 30,000	\$ 30,000	\$ 30,000
Project Manager	\$ 120,965	\$ 30,940	\$ 70,595	\$ 101,535	\$ 222,500
Graphic Design/ Planner	\$ -	\$ 260	\$ 9,412	\$ 9,672	\$ 9,672
Program Mgr/ Noticing Mgr	\$ 85,028	\$ 1,396	\$ 14,408	\$ 15,804	\$ 100,832
Client Services Mgr/Notice Dir	\$ 104,003	\$ 11,180	\$ 8,548	\$ 19,729	\$ 123,732
Managing Director/Executive	\$ 307,598	\$ 46,580	\$ 94,978	\$ 141,558	\$ 449,155
Docusign Usage Fee	\$ -	\$ -	\$ -	\$ -	\$ -
Dedicated Monthly Fax I&R Fee	\$ -	\$ -	\$ -	\$ -	\$ -
Dedicated Monthly Email I&R Fee	\$ -	\$ -	\$ -	\$ -	\$ -
<i>Subtotal</i>	\$ 685,162	\$ 110,591	\$ 293,998	\$ 404,589	\$ 1,089,751
Technology Management					
Data Analyst and Reporting	\$ 39,433	\$ 14,634	\$ 30,396	\$ 45,029	\$ 84,462
Software Engineer/SQL Developer	\$ 778,906	\$ 116,615	\$ 285,287	\$ 401,902	\$ 1,180,807
Solutions Architect	\$ -	\$ 1,426	\$ 8,549	\$ 9,974	\$ 9,974
Product/ Design Manager	\$ -	\$ 5,019	\$ 18,315	\$ 23,334	\$ 23,334
Technology Mgr/Sr Software Eng	\$ -	\$ 4,501	\$ 89,999	\$ 94,500	\$ 94,500
Website Hosting	\$ -	\$ -	\$ -	\$ -	\$ -
Facilitator Monthly Support	\$ -	\$ -	\$ -	\$ -	\$ -
Dashboard Monthly Support	\$ -	\$ -	\$ -	\$ -	\$ -
Data Storage Retention	\$ -	\$ -	\$ -	\$ -	\$ -
<i>Subtotal</i>	\$ 818,338	\$ 142,194	\$ 432,546	\$ 574,740	\$ 1,393,078
Contact Centre					
Contact Centre Agent	\$ -	\$ -	\$ -	\$ -	\$ -
Contact Centre QA/Lead/Train	\$ -	\$ 50	\$ (50)	\$ -	\$ -
Contact Centre Help Desk	\$ -	\$ -	\$ -	\$ -	\$ -
Contact Centre Supervisor	\$ -	\$ -	\$ -	\$ -	\$ -
Contact Centre Manager	\$ -	\$ 629	\$ (629)	\$ -	\$ -
IVR Maintenance Fee	\$ -	\$ -	\$ -	\$ -	\$ -
IVR Minutes of Use	\$ -	\$ -	\$ -	\$ -	\$ -
<i>Subtotal</i>	\$ -	\$ 679	\$ (679)	\$ -	\$ -
Claims Operations Services					
Data Entry/ Clerical	\$ -	\$ -	\$ 2,512	\$ 2,512	\$ 2,512
Claims Review	\$ -	\$ -	\$ 68,214	\$ 68,214	\$ 68,214
Claims Lead/ QA	\$ -	\$ -	\$ 19,272	\$ 19,272	\$ 19,272
Claims Supervisor	\$ -	\$ -	\$ 19,716	\$ 19,716	\$ 19,716
Paper/Email/Fax Claims Doc Intake	\$ -	\$ -	\$ -	\$ -	\$ -
Paper/Email/Fax Misc Doc Intake	\$ -	\$ -	\$ -	\$ -	\$ -
Acknowledgement or Claim Notif.	\$ -	\$ -	\$ -	\$ -	\$ -
Online Claim Document Intake	\$ -	\$ -	\$ -	\$ -	\$ -
Scanning and Image Storage	\$ -	\$ -	\$ -	\$ -	\$ -
<i>Subtotal</i>	\$ -	\$ -	\$ 109,713	\$ 109,713	\$ 109,713
Initial & Recurring Items					
Import and Standardize Data	\$ -	\$ -	\$ -	\$ -	\$ -
Form Set-up	\$ -	\$ -	\$ -	\$ -	\$ -
IVR Configuration and Recording	\$ -	\$ -	\$ -	\$ -	\$ -
Activation Fee for Fax & Inbox	\$ -	\$ -	\$ -	\$ -	\$ -
Post Office Box - Dedicated	\$ -	\$ -	\$ -	\$ -	\$ -
Email Form or Notice Setup	\$ -	\$ -	\$ -	\$ -	\$ -
Settlement Fund Tax Filing	\$ -	\$ -	\$ -	\$ -	\$ -
Escrow Management Fee	\$ -	\$ -	\$ -	\$ -	\$ -
<i>Subtotal</i>	\$ -	\$ -	\$ -	\$ -	\$ -
Other					
CCAA Outside Counsel - General	\$ 123,316	\$ 131,880	\$ 77,689	\$ 209,569	\$ 332,885
CCAA Outside Counsel - Rpt/Motions	\$ -	\$ -	\$ -	\$ -	\$ -
Claims: Lgl Rep, Estate Succ. Counsel	\$ -	\$ -	\$ -	\$ -	\$ -
Claims: Other advisory/audit	\$ -	\$ -	\$ -	\$ -	\$ -
Reimbursed Travel Expenses	\$ 1,925	\$ -	\$ -	\$ -	\$ 1,925
Translation	\$ 5,669	\$ -	\$ -	\$ -	\$ 5,669
Postage	\$ -	\$ -	\$ -	\$ -	\$ -
Delivery	\$ -	\$ -	\$ -	\$ -	\$ -
<i>Subtotal</i>	\$ 130,909	\$ 131,880	\$ 77,689	\$ 209,569	\$ 340,478
Total	\$ 1,634,409	\$ 385,344	\$ 913,266	\$ 1,298,610	\$ 2,933,020
Items Not Included in Framework	\$ 123,316	\$ 131,880	\$ 77,689	\$ 209,569	\$ 332,885
Net Framework Totals	\$ 1,511,094	\$ 253,464	\$ 835,577	\$ 1,089,041	\$ 2,600,135
Total Epiq Hours	5,672.6	1,029.4	3,858.4	4,887.8	10,560.3

Amounts provided exclude any applicable sales or other taxes.

Pre-Implementation Detail: QCAP Claim Administration

Epiq Class Action Services Canada

August 22, 2025

	To July 31, 2025 Invoiced	August 1-15, 2025 Actual	August 16-31, 2025 Estimated	August 2025 Subtotal	Total
Paid Media Noticing	\$ -	\$ -	\$ -	\$ -	\$ -
Print & Mail Operations					
Mailing Coordinator	\$ -	\$ -	\$ -	\$ -	\$ -
Account Mgmt & Reconciliation	\$ -	\$ -	\$ -	\$ -	\$ -
Print 1-image Cheque with Stub	\$ -	\$ -	\$ -	\$ -	\$ -
Print/Mail PCC or QCAP Int Ntc/CI Pkt	\$ -	\$ -	\$ -	\$ -	\$ -
Requested Fulfillment Notice	\$ -	\$ -	\$ -	\$ -	\$ -
Reminder Fulfillment Notice	\$ -	\$ -	\$ -	\$ -	\$ -
Record Undeliverable Mail	\$ -	\$ -	\$ -	\$ -	\$ -
Email & Record Undeliverable Email	\$ -	\$ -	\$ -	\$ -	\$ -
Photocopy or Image	\$ -	\$ -	\$ -	\$ -	\$ -
Box Storage	\$ -	\$ -	\$ -	\$ -	\$ -
Stop Payment Fee	\$ -	\$ -	\$ -	\$ -	\$ -
Bank Fees - Account	\$ -	\$ -	\$ -	\$ -	\$ -
<i>Subtotal</i>	\$ -	\$ -	\$ -	\$ -	\$ -
Project & Escalation Mgmt/ Noticing					
Project Coordinator	\$ 48,992	\$ 13,665	\$ 58,376	\$ 72,041	\$ 121,033
Proj Specialist/Proj Attorney	\$ -	\$ -	\$ 30,000	\$ 30,000	\$ 30,000
Project Manager	\$ 68,316	\$ 23,545	\$ 54,632	\$ 78,177	\$ 146,493
Graphic Design/ Planner	\$ -	\$ 208	\$ 6,994	\$ 7,202	\$ 7,202
Program Mgr/ Noticing Mgr	\$ 41,503	\$ 1,040	\$ 11,112	\$ 12,151	\$ 53,654
Client Services Mgr/Notice Dir	\$ 111,419	\$ 29,149	\$ (13,014)	\$ 16,135	\$ 127,554
Managing Director/Executive	\$ 94,515	\$ 33,116	\$ 87,553	\$ 120,669	\$ 215,184
Docusign Usage Fee	\$ -	\$ -	\$ -	\$ -	\$ -
Dedicated Monthly Fax I&R Fee	\$ -	\$ -	\$ -	\$ -	\$ -
Dedicated Monthly Email I&R Fee	\$ -	\$ -	\$ -	\$ -	\$ -
<i>Subtotal</i>	\$ 364,745	\$ 100,722	\$ 235,653	\$ 336,375	\$ 701,120
Technology Management					
Data Analyst and Reporting	\$ 18,711	\$ 2,276	\$ 25,142	\$ 27,417	\$ 46,128
Software Engineer/SQL Developer	\$ 648,534	\$ 114,155	\$ 169,174	\$ 283,329	\$ 931,863
Solutions Architect	\$ -	\$ 1,218	\$ 7,866	\$ 9,083	\$ 9,083
Product/ Design Manager	\$ -	\$ 4,128	\$ 14,840	\$ 18,968	\$ 18,968
Technology Mgr/Sr Software Eng	\$ -	\$ 22,724	\$ 65,097	\$ 87,821	\$ 87,821
Website Hosting	\$ -	\$ -	\$ -	\$ -	\$ -
Facilitator Monthly Support	\$ -	\$ -	\$ -	\$ -	\$ -
Dashboard Monthly Support	\$ -	\$ -	\$ -	\$ -	\$ -
Data Storage Retention	\$ -	\$ -	\$ -	\$ -	\$ -
<i>Subtotal</i>	\$ 667,245	\$ 144,500	\$ 282,119	\$ 426,619	\$ 1,093,864
Contact Centre					
Contact Centre Agent	\$ -	\$ -	\$ -	\$ -	\$ -
Contact Centre QA/Lead/Train	\$ -	\$ 50	\$ (50)	\$ -	\$ -
Contact Centre Help Desk	\$ -	\$ -	\$ -	\$ -	\$ -
Contact Centre Supervisor	\$ -	\$ -	\$ -	\$ -	\$ -
Contact Centre Manager	\$ -	\$ 629	\$ (629)	\$ -	\$ -
IVR Maintenance Fee	\$ -	\$ -	\$ -	\$ -	\$ -
IVR Minutes of Use	\$ -	\$ -	\$ -	\$ -	\$ -
<i>Subtotal</i>	\$ -	\$ 679	\$ (679)	\$ -	\$ -
Claims Operations Services					
Data Entry/ Clerical	\$ -	\$ -	\$ 2,512	\$ 2,512	\$ 2,512
Claims Review	\$ -	\$ -	\$ 68,214	\$ 68,214	\$ 68,214
Claims Lead/ QA	\$ -	\$ -	\$ 19,272	\$ 19,272	\$ 19,272
Claims Supervisor	\$ -	\$ -	\$ 19,716	\$ 19,716	\$ 19,716
Paper/Email/Fax Claims Doc Intake	\$ -	\$ -	\$ -	\$ -	\$ -
Paper/Email/Fax Misc Doc Intake	\$ -	\$ -	\$ -	\$ -	\$ -
Acknowledgement or Claim Notif.	\$ -	\$ -	\$ -	\$ -	\$ -
Online Claim Document Intake	\$ -	\$ -	\$ -	\$ -	\$ -
Scanning and Image Storage	\$ -	\$ -	\$ -	\$ -	\$ -
<i>Subtotal</i>	\$ -	\$ -	\$ 109,713	\$ 109,713	\$ 109,713
Initial & Recurring Items					
Import and Standardize Data	\$ -	\$ -	\$ -	\$ -	\$ -
Form Set-up	\$ -	\$ -	\$ -	\$ -	\$ -
IVR Configuration and Recording	\$ -	\$ -	\$ -	\$ -	\$ -
Activation Fee for Fax & Inbox	\$ -	\$ -	\$ -	\$ -	\$ -
Post Office Box - Dedicated	\$ -	\$ -	\$ -	\$ -	\$ -
Email Form or Notice Setup	\$ -	\$ -	\$ -	\$ -	\$ -
Settlement Fund Tax Filing	\$ -	\$ -	\$ -	\$ -	\$ -
Escrow Management Fee	\$ -	\$ -	\$ -	\$ -	\$ -
<i>Subtotal</i>	\$ -	\$ -	\$ -	\$ -	\$ -
Other					
CCAA Outside Counsel - General	\$ 123,316	\$ 131,880	\$ 77,689	\$ 209,569	\$ 332,885
CCAA Outside Counsel - Rpt/Motions	\$ -	\$ -	\$ -	\$ -	\$ -
Claims: Lgl Rep, Estate Succ. Counsel	\$ -	\$ -	\$ -	\$ -	\$ -
Claims: Other advisory/audit	\$ -	\$ -	\$ -	\$ -	\$ -
Reimbursed Travel Expenses	\$ -	\$ -	\$ -	\$ -	\$ -
Translation	\$ 7,084	\$ -	\$ -	\$ -	\$ 7,084
Postage	\$ -	\$ -	\$ -	\$ -	\$ -
Delivery	\$ -	\$ -	\$ -	\$ -	\$ -
<i>Subtotal</i>	\$ 130,400	\$ 131,880	\$ 77,689	\$ 209,569	\$ 339,969
Total	\$ 1,162,390	\$ 377,781	\$ 704,495	\$ 1,082,276	\$ 2,244,666
Items Not Included in Framework	\$ 123,316	\$ 131,880	\$ 77,689	\$ 209,569	\$ 332,885
Net Framework Totals	\$ 1,039,074	\$ 245,901	\$ 626,806	\$ 872,707	\$ 1,911,781
Total Epiq Hours	4,051.0	932.9	3,044.9	3,977.8	8,028.8

Amounts provided exclude any applicable sales or other taxes.

CLIN No.	Contract Line Item (CLIN) Description	Rate
099	Media Noticing	
100	Paid Media Noticing	As used
199	Print & Mail Operations	
200-210	Print & Mail Operations Hourly Rates	\$125-\$170
211	Print 1-image Cheque with Stub	\$2.00
212	Print/Mail PCC or QCAP Int Ntc/Cl Pkt	\$2.01
213	Requested Fulfillment Notice	\$3.80
214	Reminder Fulfillment Notice	\$4.01
270	Record Undeliverable Mail	\$0.50
275	Email & Record Undeliverable Email	\$0.20
290	Photocopy or Image	\$0.20
295	Box Storage per Box per Month	\$4.62
296	Stop Payment Fee	\$25.00
297	Bank Fees - Account	\$330.00
299	Project & Escalation Mgmt/Noticing	
300-340	Proj Mgmt, Noticing and Tech Hourly Rates	\$150-\$363
345	Senior Management	\$495.00
346	Docusign Usage Fee	\$2.10
353	Dedicated Monthly Fax I&R Fee	\$50.00
354	Dedicated Monthly Email I&R Fee	\$75.00
399	Technology Management	
400-440	Proj Mgmt, Noticing and Tech Hourly Rates	\$150-\$363
450	Website Hosting	\$297.00
452	Facilitator Monthly Support	\$300.00
455	Dashboard Monthly Support	\$594.00
460	Data Storage Retention	\$500.00
499	Contact Centre	
500-624	Contact Centre Hourly Rates	\$75-\$170
550	IVR Maintenance Fee	\$297.00
555	IVR Minutes of Use	\$0.09
599	Claims Operations	
600-639	Claims Operations Hourly Rates	\$75-\$170
650	Paper/Email/Fax Claims Doc Intake	\$5.00
651	Paper/Email/Fax Misc Doc Intake	\$8.00
652	Acknowledgement or Claim Notif.	\$2.00
655	Online Claim Document Intake	\$0.35
660	Scanning and Image Storage	\$0.20
699	Initial & Recurring Items	
705	Import and Standardize Data	\$1,320.00
710	Form Set-up	\$1,320.00
715	IVR Configuration and Recording	\$3,000.00
717	Activation Fee for Fax & Inbox	\$250.00
720	Post Office Box - Dedicated	\$1,056.00
735	Email Form or Notice Setup	\$800.00
760	Settlement Fund Tax Filing	\$4,000.00
765	Escrow Management Fee	\$4,620.00
799	Other	As used
805	Reimbursed Travel Expenses	
806	Translation	
807	Postage	
808	Delivery	

Rates subject to standard adjustment increases.

B

Court File No.: CV-19-616077-00CL

ONTARIO
SUPERIOR COURT OF JUSTICE
(COMMERCIAL LIST)

THE HONOURABLE CHIEF	)	WEDNESDAY, THE 27 TH
	)	
JUSTICE MORAWETZ	)	DAY OF AUGUST, 2025

IN THE MATTER OF THE *COMPANIES' CREDITORS ARRANGEMENT ACT*, R.S.C. 1985,
c. C-36, AS AMENDED

AND IN THE MATTER OF A PLAN OF COMPROMISE
OR ARRANGEMENT OF IMPERIAL TOBACCO CANADA
LIMITED AND IMPERIAL TOBACCO COMPANY LIMITED

CLAIMS ADMINISTRATOR ORDER

THIS MOTION, made by Epiq Class Actions Services Canada, Inc. ("**Epiq**") pursuant to the *Companies' Creditors Arrangement Act*, R.S.C. 1985, c. C-36, as amended (the "**CCAA**"), was heard this day by videoconference at 330 University Avenue, Toronto, Ontario.

ON READING Epiq's Motion Record, including the affidavit of Michael O'Connor sworn on August 22, 2025 (the "**O'Connor Affidavit**") and the exhibits thereto, and [**the Thirty-Second Report of the Monitor dated August [●], 2025**], and on hearing submissions of counsel for Epiq, counsel for the Court-Appointed Mediator, counsel for each of the Monitors and CCAA Plan Administrators, counsel for each of the Tobacco Companies, PCC Representative Counsel, Quebec Class Counsel, and counsel for such other parties as were listed on the Participant Information Form and wished to be heard, with no one else appearing although duly served as appears from the certificate of service, filed:

Service and Definitions

1. **THIS COURT ORDERS** that the time for service of the Notice of Motion and the Motion Record is hereby abridged and validated so that this Motion is properly returnable today and hereby dispenses with further service thereof.

2. **THIS COURT ORDERS** that, unless otherwise stated herein, all capitalized terms used herein and not otherwise defined herein shall have the meanings ascribed to them in the CCAA Plans (defined below), the PCC Compensation Plan or the Quebec Administration Plan (each as defined in the Fourth Amended and Restated Court-Appointed Mediator’s and Monitor’s CCAA Plan of Compromise and Arrangement in respect of Imperial Tobacco Canada Limited and Imperial Tobacco Company Limited (collectively, “**Imperial**”) dated February 27, 2025 (the “**Imperial CCAA Plan**”), the Fourth Amended and Restated Court-Appointed Mediator’s and Monitor’s CCAA Plan of Compromise and Arrangement in respect of JTI-Macdonald Corp. (“**JTIM**”) dated February 27, 2025 (the “**JTIM CCAA Plan**”), and the Fourth Amended and Restated Court-Appointed Mediator’s and Monitor’s CCAA Plan of Compromise and Arrangement in respect of Rothmans, Benson & Hedges Inc. (“**RBH**”) dated February 27, 2025 (the “**RBH CCAA Plan**”, and collectively with the Imperial CCAA Plan and the JTIM CCAA Plan, the “**CCAA Plans**”)) or the O’Connor Affidavit, as applicable.

Appointment of the PCC Agent

3. **THIS COURT ORDERS** that, pursuant to Section 18.3 of the PCC Compensation Plan, Epiq is appointed as the agent for the PCC Representative Counsel in respect of the PCC Compensation Plan (the “**PCC Agent**”). The PCC Agent is hereby authorized to communicate with and collaborate with the PCC Representative Counsel.

No Contract between CCAA Plan Administrators and Claims Administrator and/or PCC Agent

4. **THIS COURT ORDERS** that, notwithstanding anything to the contrary in the PCC Compensation Plan, Quebec Administration Plan, CCAA Plans, Sanction Orders or otherwise (including, without limitation, Article 14, Sections 14.4(k)(ii) and 14.4(m)(ii) of the CCAA Plans, Sections 17.2 and 21.3 of the PCC Compensation Plan, and Sections 16.2 and 20.3 of the Quebec Administration Plan), no written agreement regarding the provision of services in respect of the PCC Compensation Plan or the Quebec Administration Plan, or the Costs (defined below) of the Claims Administrator or the PCC Agent, shall be required to be entered into between the CCAA Plan Administrators and the Claims Administrator and/or the PCC Agent. Article 14, Sections 14.4(k)(ii) and 14.4(m)(ii) of the CCAA Plans, Sections 17.2 and 21.3 of the PCC Compensation Plan, and Sections 16.2 and 20.3 of the Quebec Administration Plan are hereby varied to delete any references to a written agreement between the CCAA Plan Administrators and the Claims Administrator.

Approval of Notice Plan

5. **THIS COURT ORDERS** that the notice plan in the form attached hereto as **Schedule “A”** (the “**Global Notice Plan**”) shall constitute the PCC Notice Plan (for purposes of the PCC Compensation Plan) and the *Blais* Notice Plan (for purposes of the Quebec Administration Plan), and that the Global Notice Plan, including the Claims Process as described therein, is hereby approved. For greater certainty, and without limiting the generality of the foregoing, the forms of notices, claim forms and any other forms included as part of the Global Notice Plan are hereby approved for purposes of the PCC Compensation Plan and the Quebec Administration Plan, as

applicable, notwithstanding the forms of the notices, claim forms and any other forms attached as Appendices to the PCC Compensation Plan and Appendices to the Quebec Administration Plan that were approved by the CCAA Court in the Sanction Order.

Amendment of Notices and Forms

6. **THIS COURT ORDERS** that the form of PCC Notice of Incomplete Claim attached as Exhibit “C” to the O’Connor Affidavit and the form of PCC Notice to Provide Alternative Proof attached as Exhibit “D” to the O’Connor Affidavit are hereby approved for purposes of the PCC Compensation Plan.

7. **THIS COURT ORDERS** that, following consultation with each of the Tobacco Companies, the Administrative Coordinator, the PCC Representative Counsel (for amendments relating to the PCC Compensation Plan) and the Quebec Class Counsel (for amendments relating to the Quebec Administration Plan), the Claims Administrator may make amendments to the forms of notices, claim forms and any other forms that are Attachments to the Global Notice Plan, Exhibits to the O’Connor Affidavit, Appendices to the PCC Compensation Plan and/or Appendices to the Quebec Administration Plan, including the preparation of any additional notices or forms required to administer the PCC Compensation Plan and the Quebec Administration Plan, provided that the Claims Administrator complies with Section 8.2 of the PCC Compensation Plan and Section 7.2 of the Quebec Administration Plan. No other changes, modifications or revisions shall be made to the PCC Compensation Plan except in accordance with Section 8.1 thereof, or to the Quebec Administration Plan except in accordance with Section 7.1 thereof.

Purpose and Use of Claims Administrator's Checklists

8. **THIS COURT ORDERS** that, notwithstanding anything to the contrary in the PCC Compensation Plan and the Quebec Administration Plan, the Checklist which is Appendix “H” to the PCC Compensation Plan, and the Proof of Claim Checklist for Tobacco-Victim Claims and the Proof of Claim Checklist for Succession Claims that are respectively Appendices “I” and “J” to the Quebec Administration Plan, are directory guides prepared for the convenience of and to assist the Claims Administrator in the determination of whether a PCC-Claimant meets the PCC Eligibility Criteria to be an Eligible PCC-Claimant who will receive an Individual Payment, or (ii) a Tobacco-Victim Claimant or Succession Claimant meets the *Blais* Eligibility Criteria to be an Eligible *Blais* Class Member who will receive a Compensation Payment.

Approval of Global Claims Administration Costs Framework

9. **THIS COURT ORDERS** that the Global Claims Administration Costs Framework (the “**Global Claims Administration Costs Framework**”) in the form attached hereto as **Schedule “B”** is hereby approved for purposes of both the PCC Compensation Plan (including, for certainty, in respect of Epiq’s roles as Claims Administrator and as PCC Agent) and the Quebec Administration Plan as the framework basis against which the Costs of the PCC Compensation Plan and the Quebec Administration Plan shall be reviewed and assessed in accordance with the provisions of this Order, with such amendments as may be approved by further Order of the CCAA Court, provided that, other than in respect of the Costs set out in the Global Claims Administration Costs Framework with respect to the PCC Notice Plan and the Blais Notice Plan, the Global Claims Administration Costs Framework provides the structure for the future budgeting processes set forth in this Order, and the amounts reflected in the Global Claims

Administration Costs Framework, other than in respect of the Costs with respect to the PCC Notice Plan and the Blais Notice Plan, are not approved under this Order. The Claims Administrator and the PCC Agent shall not be entitled to be paid any of the Costs contemplated in the Global Claims Administration Costs Framework unless such Costs are validly incurred and payable in accordance with the provisions of this Order.

10. **THIS COURT ORDERS** that the Global Claims Administration Costs Framework shall include in respect of each of (i) the claims administration under the PCC Compensation Plan (“**PCC Claims Administration**”), (ii) the claims administration under the Quebec Administration Plan (“**QCAP Claims Administration**”), (iii) the PCC Agent services, (iv) the PCC Notice Plan, (v) the *Blais* Notice Plan and (vi) the pre-CCAA Plan implementation activities relating to the PCC Compensation Plan, as applicable:

- (a) the actual time spent and standard rates charged by the Claims Administrator and the PCC Agent in connection with all work done up to August 15, 2025, and the estimated time that will be spent and standard rates that will be charged up to the Plan Implementation Date;
- (b) a forecast of the estimated time that will be incurred and standard rates to be charged by the Claims Administrator and the PCC Agent; and
- (c) an estimate of the number of claims to be reviewed during the PCC Claims Submission Period and the *Blais* Claims Submission Period.

11. **THIS COURT ORDERS** that, during the first three calendar months commencing on and following the Plan Implementation Date (“**Weekly Reporting Period**”), the Claims

Administrator and the PCC Agent shall provide to the CCAA Plan Administrators, on a weekly basis, to be received within four Business Days from the end of each week, and as circumstances warrant at any other times during the Weekly Reporting Period as requested by the CCAA Plan Administrators in their discretion, or as the CCAA Court directs, the following reports in writing (collectively, “**Weekly Reports**”), in each case based on the information available at such time:

- (a) a report (“**Weekly Actual Costs Report**”) setting out the actual costs incurred, including actual time spent and hourly rates applied, and expenditures made by the Claims Administrator and the PCC Agent during the immediately prior week on account of the following activities, as applicable, in regard to each of the PCC Claims Administration, QCAP Claims Administration, PCC Agent, PCC Notice Plan and *Blais* Notice Plan:

- (i) paid media noticing;
- (ii) initial and non-recurring items;
- (iii) print and mail operations;
- (iv) project and escalation management and noticing;
- (v) technology management;
- (vi) Contact Centre; and
- (vii) claims operation services,

accompanied by an explanation of all variances between the actual costs and expenditures for the immediately prior week and the actual costs and expenditures for the week upon which the Weekly Reports are based;

- (b) a report (“**Weekly Claims Administration Report**”) setting out in respect of the week upon which the Weekly Reports are based for each of the PCC Compensation Plan and the Quebec Administration Plan, the particulars regarding (i) the number of claims received, (ii) the number of claims reviewed, (iii) the number of incomplete claims awaiting submission of further information, (iv) the number of claims approved, (v) the number of claims rejected, (vi) the number of rejected claims that are in the process of being reviewed by the Review Officer, and (vii) the overall status of the claims administration process; and
- (c) a report (“**Weekly Events Report**”) in respect of the week upon which the Weekly Reports are based identifying and explaining any unusual, unexpected or inexplicable events that occurred and/or out of the ordinary trends that were observed in the PCC Claims Administration and the QCAP Claims Administration to enable the Claims Administrator and/or the PCC Agent, as applicable, to take prompt steps to correct any issues, problems, errors and/or mistakes in the claims administration processes as soon as possible.

12. **THIS COURT ORDERS** that, commencing upon the end of the Weekly Reporting Period and continuing for the duration of the PCC Claims Administration and the QCAP Claims Administration (“**Monthly Reporting Period**”), the Claims Administrator and the PCC Agent shall provide to the CCAA Plan Administrators, on a monthly basis, to be received within five Business Days from the end of each month, and as circumstances warrant at any other times during the Monthly Reporting Period as requested by the CCAA Plan Administrators in their discretion, or as the CCAA Court directs, the following reports in writing (collectively, “**Monthly Reports**”), in each case based on the information available at such time:

- (a) a report (“**Monthly Actual Costs Report**”) setting out the actual costs incurred, including actual time spent and hourly rates applied, and expenditures made by the Claims Administrator and the PCC Agent during the immediately prior month on account of the activities enumerated in subparagraphs 11(a)(i) to 11(a)(vii) of this Order, as applicable, in regard to each of the PCC Claims Administration, QCAP Claims Administration, PCC Agent, PCC Notice Plan and *Blais* Notice Plan, accompanied by an explanation of all variances between the actual costs and expenditures for the immediately prior month and the actual costs and expenditures for the month upon which the Monthly Reports are based;
- (b) a report (“**Monthly Claims Administration Report**”) setting out in respect of the month upon which the Monthly Reports are based for each of the PCC Compensation Plan and the Quebec Administration Plan the particulars regarding (i) the number of claims received, (ii) the number of claims reviewed, (iii) the number of incomplete claims awaiting submission of further information, (iv) the number of claims approved, (v) the number of claims rejected, (vi) the number of rejected claims that are in the process of being reviewed by the Review Officer, and (vii) the overall status of the claims administration process; and
- (c) a report (“**Monthly Events Report**”) in respect of the month upon which the Monthly Reports are based identifying and explaining any unusual, unexpected or inexplicable events that occurred and/or out of the ordinary trends that were observed in the PCC Claims Administration and the QCAP Claims Administration to enable the Claims Administrator and/or the PCC Agent, as

applicable, to take prompt steps to correct any issues, problems, errors and/or mistakes in the claims administration processes as soon as possible.

13. **THE COURT ORDERS** that, as the PCC Claims Administration and the QCAP Claims Administration progress, the CCAA Plan Administrators may, in their discretion if they deem it to be necessary and appropriate, direct that the Weekly Reporting Period shall be extended for a period longer than the first three calendar months following the Plan Implementation Date.

14. **THIS COURT ORDERS** that the Claims Administrator and the PCC Agent shall provide copies of their Weekly Reports and their Monthly Reports to the Tobacco Companies, Court-Appointed Mediator, Administrative Coordinator, PCC Representative Counsel and Quebec Class Counsel concurrently when such reports are provided to the CCAA Plan Administrators. The CCAA Plan Administrators shall file copies of all the Weekly Reports and Monthly Reports with the CCAA Court provided, however, that Epiq may redact from the public copies of such reports filed with the CCAA Court any confidential or commercially sensitive information.

15. **THIS COURT ORDERS** that, for greater certainty, the reporting obligations set forth in paragraphs 11 to 14 of this Order do not replace any of the reporting obligations of the Claims Administrator set forth in the PCC Compensation Plan and the Quebec Administration Plan.

16. **THIS COURT ORDERS** that, within fifteen calendar days following the end of the Weekly Reporting Period, the Claims Administrator and PCC Agent shall provide to the CCAA Plan Administrators, with copies to the Tobacco Companies, Court-Appointed Mediator, Administrative Coordinator, PCC Representative Counsel and Quebec Class Counsel: (i) a budget for the PCC Claims Administration, and (ii) a budget for the QCAP Claims

Administration (collectively, the “**First Annual Global Claims Administration Costs Budget**”) that: (a) are consistent with the format of the Global Claims Administration Costs Framework, (b) include estimates in respect of (1) professional fees, costs and expenses of all legal or other advisors to Epiq, and (2) the applicable taxes, fees, duties or charges owed to a Governmental Authority, whether incurred by Epiq, its legal or other advisors, and/or its providers of associated services, (c) are informed by the Weekly Actual Costs Reports, Weekly Claims Administration Reports and Weekly Events Reports, and (d) cover the next twelve calendar month period commencing on the end of the Weekly Reporting Period. Notwithstanding anything to the contrary in Section 56.3 of the PCC Compensation Plan and Section 57.3 of the Quebec Administration Plan, within forty-five calendar days following the end of the Weekly Reporting Period, the Claims Administrator and the PCC Agent shall submit the First Annual Global Claims Administration Costs Budget to the CCAA Court and the Quebec Superior Court for joint approval. Epiq may redact from the public copies of the First Annual Global Claims Administration Costs Budget filed with the CCAA Court and Quebec Superior Court any confidential or commercially sensitive information.

17. **THIS COURT ORDERS** that, for each subsequent twelve calendar month period following the end of the twelve calendar month period covered by the First Annual Global Claims Administration Costs Budget until the PCC Claims Administration and the QCAP Claims Administration, respectively, are complete, the Claims Administrator and the PCC Agent shall provide to the CCAA Plan Administrators, concurrently with copies provided to the Tobacco Companies, Court-Appointed Mediator, Administrative Coordinator, PCC Representative Counsel and Quebec Class Counsel: (i) a budget for the PCC Claims Administration and (ii) a budget for the QCAP Claims Administration of the Quebec Administration Plan (collectively,

“**Subsequent Annual Global Claims Administration Costs Budget**”) that cover the next twelve calendar month period. Notwithstanding anything to the contrary in Section 56.3 of the PCC Compensation Plan and Section 57.3 of the Quebec Administration Plan, within forty-five calendar days following the end of the previous twelve calendar month period, the Claims Administrator and the PCC Agent shall submit the Subsequent Annual Global Claims Administration Costs Budget to the CCAA Court and the Quebec Superior Court for joint approval. Epiq may redact from the public copies of the Subsequent Annual Global Claims Administration Costs Budgets filed with the CCAA Court and Quebec Superior Court any confidential or commercially sensitive information. The Subsequent Annual Global Claims Administration Costs Budgets shall be consistent with the format of the Global Claims Administration Costs Framework and the First Annual Global Claims Administration Costs Budget, and shall be provided by the Claims Administrator and the PCC Agent thirty calendar days in advance of the end of the current twelve calendar month period.

18. **THIS COURT ORDERS** that, notwithstanding anything to the contrary in Sections 17.2 and 21.3 of the PCC Compensation Plan and Sections 16.2 and 20.3 of the Quebec Administration Plan, in respect of each year until the PCC Claims Administration and the QCAP Claims Administration are complete, the aggregate Costs (defined below) of Epiq in its capacities as the Claims Administrator and the PCC Agent up to and including such year shall not exceed (i) by more than 10% of the total amount of the First Annual Global Claims Administration Costs Budget up to and including such year, or (ii) by more than 10% of the total amount of any Subsequent Annual Global Claims Administration Costs Budget up to and including such year, without prior approval of the CCAA Plan Administrators and further Orders of the CCAA Court

and the Quebec Superior Court on motions brought by Epiq seeking approval of such increase in Costs (defined below).

Confidentiality and Information Management

19. **THIS COURT ORDERS** that the Claims Administrator shall comply with all of its duties and responsibilities set forth in Sections 57.1 to 57.6 and Sections 58.1 and 58.2 of the PCC Compensation Plan in regard to the receipt, storage, disclosure, retention and destruction of all Personal Information and documentation provided to the Claims Administrator in connection with the Claim Packages submitted by PCC-Claimants and PCC-Claimants' Legal Representatives. The PCC Agent shall also comply with Sections 57.1 to 57.6 and Sections 58.1 and 58.2 of the PCC Compensation Plan. The Claims Administrator and the PCC Agent shall comply with the Official Confirmations of Diagnoses Order.

20. **THIS COURT ORDERS** that the Claims Administrator shall comply with all of the duties and responsibilities set forth in Sections 58.1 to 58.6 and Sections 59.1 and 59.2 of the Quebec Administration Plan in regard to the receipt, storage, disclosure, retention and destruction of all Personal Information and documentation provided to the Claims Administrator in connection with the Proofs of Claim submitted by Tobacco-Victim Claimants and Succession Claimants. Raymond Chabot (Proactio) shall also comply with Sections 57.1 to 57.6 and Sections 58.1 and 58.2 of the Quebec Administration Plan. The Claims Administrator and Raymond Chabot (Proactio) shall comply with the Official Confirmations of Diagnoses Order.

Payment of Fees, Costs and Expenses

21. **THIS COURT ORDERS** that, subject to paragraph 18 of this Order, each of the Claims Administrator and the PCC Agent, and their respective legal and other advisors, shall be paid their reasonable professional fees, other fees, costs, disbursements, expenses, Court costs and other expenditures, and all applicable Sales and Excise Taxes, directly incurred in relation to the carrying out of their duties and responsibilities as the Claims Administrator and the PCC Agent or the advisors thereto, as applicable (collectively, “**Costs**”), in each case at their standard rates and charges, which (i) if incurred in the period prior to the Plan Implementation Date, are consistent with the Global Claims Administration Costs Framework, (ii) are incurred during the Weekly Reporting Period, or (iii) if incurred following the Weekly Reporting Period, are consistent with, as applicable, the Global Claims Administration Costs Framework, the First Annual Global Claims Administration Costs Budget and any Subsequent Annual Global Claims Administration Costs Budgets.

22. **THIS COURT ORDERS** that, subject to paragraphs 18 and 21 of this Order, the Tobacco Companies are directed to pay directly to Epiq the following reasonable Costs, and such payments shall not be deducted from the PCC Compensation Plan Amount or from the QCAP Settlement Amount, as applicable:

- (a) all Costs incurred by the Claims Administrator in connection with the administration of the PCC Compensation Plan;
- (b) all Costs incurred by the PCC Agent in connection with the administration of the PCC Compensation Plan;

- (c) all Costs associated with the PCC Notice Plan; and
- (d) all Costs associated with the *Blais* Notice Plan,

in each case within thirty calendar days of the issuance of any invoice by Epiq in respect thereof, provided that: (x) Epiq has been set up as a vendor in each of the Tobacco Companies' accounting systems, and (y) such invoice of Epiq, as well as the invoices rendered by all legal and other advisors of Epiq, have been approved by the CCAA Plan Administrators. The invoices of Epiq's legal advisors may be redacted for solicitor-client privilege before they are submitted to the CCAA Plan Administrators for review and approval. The Tobacco Companies shall pre-fund within thirty calendar days of Epiq's presentment of a reasonable written estimate of any: (a) paid media insertion orders planned to be placed by Epiq during the subsequent thirty calendar day period; or (b) postage for mailings of 25,000 pieces or more that are expected to occur during the subsequent thirty calendar day period. Amounts that remain unpaid following the date that is thirty calendar days after the issuance of an invoice by Epiq (provided that the conditions in (x) and (y) above have been met) shall be subject to an interest charge of 0.5% per month. All such Costs shall be paid by the Tobacco Companies in equal parts. The liability of the Tobacco Companies for their respective share of the Costs shall be several and not joint and several.

23. **THIS COURT ORDERS** that, subject to paragraphs 18 and 21 of this Order, the reasonable Costs of the Claims Administrator incurred in connection with the administration of the Quebec Administration Plan, other than the Costs associated with the Blais Notice Plan (which shall be paid by the Tobacco Companies pursuant to paragraph 22(d) of this Order), shall be paid to Epiq from the balance of the QCAP Settlement Amount net of the Quebec Class Counsel Fee. The CCAA Plan Administrators shall direct the trustee of the QCAP Trust Account

(the “**Trustee**”) to pay, and the Trustee shall pay from the QCAP Trust Account, all Costs of the Claims Administrator incurred in connection with the administration of the Quebec Administration Plan within thirty calendar days of the issuance of any invoice by Epiq in respect thereof, provided that such invoice of Epiq, as well as the invoices rendered by all legal and other advisors of Epiq, have been approved first by the Quebec Class Counsel and then by CCAA Plan Administrators. The invoices of Epiq’s legal advisors may be redacted for solicitor-client privilege before they are submitted to the Quebec Class Counsel and to the CCAA Plan Administrators for review and approval. Amounts that remain unpaid following the date that is thirty calendar days after the issuance of an invoice by Epiq shall be subject to an interest charge of 0.5% per month.

24. **THIS COURT ORDERS** that, for greater certainty, the PCC Compensation Plan Reserve Costs shall include the Costs of the services which the PCC Agent, including its legal and other advisors, provides in relation to the PCC Compensation Plan, and Epiq, in its capacity as PCC Agent, shall also be entitled to the benefit of the PCC Compensation Plan Reserve. Paragraphs 21 and 23 of the Sanction Order shall be interpreted to include the foregoing Order.

Advisors to Claims Administrator and PCC Agent

25. **THIS COURT ORDERS** that the Claims Administrator and the PCC Agent may, in their discretion, retain any legal or other advisors, to advise and assist them in carrying out their respective duties in relation to the PCC Compensation Plan and the Quebec Administration Plan, as applicable.

Distributions by Claims Administrator

26. **THIS COURT ORDERS** that the Claims Administrator is hereby authorized to distribute (i) Individual Payments to Eligible PCC Claimants pursuant to and in accordance with the procedures and process set forth in Sections 49.1, 49.2, 51.1, 52.1, 53.1, 53.2, 53.3, 53.4, 53.5, 55.1 and 55.2 of the PCC Compensation Plan, and (ii) Compensation Payments to Eligible Blais Class Members pursuant to and in accordance with the procedures and process set forth in Sections 50.1, 50.2, 52.1, 53.1, 54.1, 54.2, 54.3, 54.4, 54.5, 56.1 and 56.2 of the Quebec Administration Plan.

Liability - Variation of Sanction Order and relating to PCC Representative Counsel, Court-Appointed Mediator, Monitors, CCAA Plan Administrators and Administrative Coordinator

27. **THIS COURT ORDERS** that the Sanction Order is hereby varied to delete Section 27 thereof.

28. **THIS COURT ORDERS** that, for greater certainty and without limiting any other protections available to the PCC Representative Counsel pursuant to (i) paragraph 9 of the Amended and Restated Orders re Appointment of PCC Representative Counsel dated November 22, 2024, or (ii) any other Order of the CCAA Court, the PCC Representative Counsel shall not be liable, including vicariously liable, for any act or omission of the PCC Agent in connection with the PCC Agent's duties under this Order, the PCC Compensation Plan, the CCAA Plans, or any other court Order, or in regard to any other matter whatsoever. For further certainty, although Epiq is appointed as the PCC Agent for the PCC Representative Counsel pursuant to Section 18.3 of the PCC Compensation Plan and paragraph 3 of this Order, the PCC Agent operates

independently and is solely responsible for the performance of its duties, and no other Person shall be held responsible for Epiq's acts and omissions.

29. **THIS COURT ORDERS** that, for greater certainty and without limiting any other protections available to the Court-Appointed Mediator, Monitors, CCAA Plan Administrators and Administrative Coordinator pursuant to (i) paragraphs 28 and 38-52 inclusive of the Sanction Order, (ii) paragraphs 5, 6 and 28-33 inclusive of the CCAA Plan Administrator Appointment Order, (iii) Article 18, Sections 18.1.4, 18.1.5, 18.1.6, 18.1.7, 18.1.8 and 18.1.10 of the Imperial CCAA Plan, or (iv) any other court Order, the Court-Appointed Mediator, Monitors, CCAA Plan Administrators and Administrative Coordinator shall not be liable, including vicariously liable, for any acts or omissions of Epiq in its capacities as Claims Administrator and PCC Agent, or in regard to any other matter whatsoever. Epiq in its capacities as the Claims Administrator and the PCC Agent operates independently and is solely responsible for the performance of its duties, and no other Person shall be held responsible for Epiq's acts and omissions.

Termination of Engagement

30. **THIS COURT ORDERS** that, notwithstanding anything to the contrary in the PCC Compensation Plan, the Quebec Administration Plan, the CCAA Plans, the Sanction Orders or otherwise, and subject to the approval of the CCAA Court, the engagement of the Claims Administrator and/or the PCC Agent may be terminated by the CCAA Plan Administrators upon at least thirty calendar days' prior written notice delivered by the CCAA Plan Administrators to Epiq. For certainty, Epiq's rights to oppose any such motion and relief are fully reserved.

31. **THIS COURT ORDERS** that upon the effective date of such termination of its engagement, Epiq shall take all steps requested by the CCAA Plan Administrators and/or directed

by the CCAA Court to effect the transfer of the role of Claims Administrator and/or PCC Agent, as applicable, to an alternative service provider or providers, including but not limited to the transfer of:

- (a) all Claim Packages received in respect of the PCC Compensation Plan;
- (b) all Proofs of Claim received in respect of the Quebec Administration Plan;
- (c) all completed assessments of Claim Packages submitted by PCC-Claimants and Legal Representatives;
- (d) all completed assessments of Proofs of Claims submitted by Tobacco-Victim Claimants and Succession Claimants;
- (e) all communications received from or transmitted to PCC-Claimants, Legal Representatives, Tobacco-Victim Claimants and Succession Claimants;
- (f) all information supporting claims, including medical data, proofs of diagnoses and Official Confirmations in Epiq's possession or control;
- (g) all reports or analyses performed by any of Epiq's advisors in connection with the PCC Compensation Plan or Quebec Administration Plan;
- (h) all information and approvals required to transfer or assign the bank accounts used by the Claims Administrator to distribute funds to PCC-Claimants, Tobacco-Victim Claimants and Succession Claimants; and
- (i) all other documents, information and data pertaining to the PCC Compensation Plan and Quebec Administration Plan.

General

32. **THIS COURT ORDERS** that in the event of a conflict between (i) this Order, (ii) the Sanction Order and (iii) the Imperial CCAA Plan, including the PCC Compensation Plan and the Quebec Administration Plan, the terms of this Order shall govern.

33. **THIS COURT ORDERS** that the Claims Administrator may seek directions in respect of a matter relating to the Quebec Administration Plan jointly from the CCAA Court and the Quebec Superior Court in accordance with the procedure set forth in Sections 11.2.1, 11.2.2.6, 11.2.3.3, 12.1.1, 12.1.2 and 12.1.3 of the Quebec Administration Plan. The Claims Administrator may seek directions in respect of a matter relating to the PCC Compensation Plan from the CCAA Court in accordance with the procedure set forth in Sections 12.2.1, 12.2.2.6, 13.1.1, 13.1.2 and 13.1.3 of the PCC Compensation Plan.

34. **THIS COURT ORDERS** that this Order shall have full force and effect in all provinces and territories in Canada, outside Canada and against all Persons against whom it may be enforceable.

35. **THIS COURT REQUESTS** the aid and recognition of any court, tribunal, judicial, regulatory or administrative body having jurisdiction in Canada, the United States or elsewhere to give effect to this Order, and to assist Epiq and the CCAA Plan Administrators and their respective agents in carrying out the terms of this Order. All courts, tribunals, judicial, regulatory and administrative bodies are hereby respectfully requested to make such orders and to provide such assistance to Epiq and the CCAA Plan Administrators as may be necessary or desirable to give effect to this Order or to assist Epiq and the CCAA Plan Administrators and their respective agents in carrying out the terms of this Order.

36. **THIS COURT ORDERS** that Epiq, the CCAA Plan Administrators or the Foreign Representative shall be at liberty and are hereby authorized and empowered to apply to any court, tribunal, regulatory or administrative body, wherever located, for the recognition of this Order and for the assistance in carrying out the terms of this Order and/or to confirm this Order as binding and effective in any appropriate foreign jurisdiction, including in the Chapter 15 Proceedings.

37. **THIS COURT ORDERS** that this Order and all of its provisions are enforceable and effective as of the Plan Implementation Date, without the need for entry or filing.

Chief Justice Geoffrey B. Morawetz

	ONTARIO SUPERIOR COURT OF JUSTICE- COMMERCIAL LIST Proceeding commenced at Toronto
	ORDER
	GOODMANS LLP Barristers & Solicitors 333 Bay Street, Suite 3400 Toronto, ON M5H 2S7
	Robert J. Chadwick LSO#: 35165K rchadwick@goodmans.ca Caroline Descours LSO#: 58251A cdescours@goodmans.ca Bradley Wiffen LSO#: 64279L bwiffen@goodmans.ca Josh Sloan LSO#: 90581H jsloan@goodmans.ca Tel: (416) 979-2211 Lawyers for Epiq Class Actions Services Canada, Inc.

Schedule A – Global Notice Plan

[omitted as duplicate of Schedule A to Order in CV-19-615862-00CL]

Schedule B - Global Claims Administration Costs Framework

[omitted as duplicate of Schedule B to Order in CV-19-615862-00CL]

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Court File No.: CV-19-616779-00CL

ONTARIO
SUPERIOR COURT OF JUSTICE
(COMMERCIAL LIST)

THE HONOURABLE CHIEF	)	WEDNESDAY, THE 27 TH
	)	
JUSTICE MORAWETZ	)	DAY OF AUGUST, 2025

IN THE MATTER OF THE *COMPANIES' CREDITORS ARRANGEMENT ACT*, R.S.C. 1985,
c. C-36, AS AMENDED

AND IN THE MATTER OF A PLAN OF COMPROMISE
OR ARRANGEMENT OF ROTHMANS, BENSON & HEDGES INC.

CLAIMS ADMINISTRATOR ORDER

THIS MOTION, made by Epiq Class Actions Services Canada, Inc. ("**Epiq**") pursuant to the *Companies' Creditors Arrangement Act*, R.S.C. 1985, c. C-36, as amended (the "**CCAA**"), was heard this day by videoconference at 330 University Avenue, Toronto, Ontario.

ON READING Epiq's Motion Record, including the affidavit of Michael O'Connor sworn on August 22, 2025 (the "**O'Connor Affidavit**") and the exhibits thereto, and **[the Thirtieth Report of the Monitor dated August [●], 2025]**, and on hearing submissions of counsel for Epiq, counsel for the Court-Appointed Mediator, counsel for each of the Monitors and CCAA Plan Administrators, counsel for each of the Tobacco Companies, PCC Representative Counsel, Quebec Class Counsel, and counsel for such other parties as were listed on the Participant Information Form and wished to be heard, with no one else appearing although duly served as appears from the certificate of service, filed:

Service and Definitions

1. **THIS COURT ORDERS** that the time for service of the Notice of Motion and the Motion Record is hereby abridged and validated so that this Motion is properly returnable today and hereby dispenses with further service thereof.

2. **THIS COURT ORDERS** that, unless otherwise stated herein, all capitalized terms used herein and not otherwise defined herein shall have the meanings ascribed to them in the CCAA Plans (defined below), the PCC Compensation Plan or the Quebec Administration Plan (each as defined in the Fourth Amended and Restated Court-Appointed Mediator’s and Monitor’s CCAA Plan of Compromise and Arrangement in respect of Imperial Tobacco Canada Limited and Imperial Tobacco Company Limited (collectively, “**Imperial**”) dated February 27, 2025 (the “**Imperial CCAA Plan**”), the Fourth Amended and Restated Court-Appointed Mediator’s and Monitor’s CCAA Plan of Compromise and Arrangement in respect of JTI-Macdonald Corp. (“**JTIM**”) dated February 27, 2025 (the “**JTIM CCAA Plan**”), and the Fourth Amended and Restated Court-Appointed Mediator’s and Monitor’s CCAA Plan of Compromise and Arrangement in respect of Rothmans, Benson & Hedges Inc. (“**RBH**”) dated February 27, 2025 (the “**RBH CCAA Plan**”, and collectively with the Imperial CCAA Plan and the JTIM CCAA Plan, the “**CCAA Plans**”)) or the O’Connor Affidavit, as applicable.

Appointment of the PCC Agent

3. **THIS COURT ORDERS** that, pursuant to Section 18.3 of the PCC Compensation Plan, Epiq is appointed as the agent for the PCC Representative Counsel in respect of the PCC Compensation Plan (the “**PCC Agent**”). The PCC Agent is hereby authorized to communicate with and collaborate with the PCC Representative Counsel.

No Contract between CCAA Plan Administrators and Claims Administrator and/or PCC Agent

4. **THIS COURT ORDERS** that, notwithstanding anything to the contrary in the PCC Compensation Plan, Quebec Administration Plan, CCAA Plans, Sanction Orders or otherwise (including, without limitation, Article 14, Sections 14.4(k)(ii) and 14.4(m)(ii) of the CCAA Plans, Sections 17.2 and 21.3 of the PCC Compensation Plan, and Sections 16.2 and 20.3 of the Quebec Administration Plan), no written agreement regarding the provision of services in respect of the PCC Compensation Plan or the Quebec Administration Plan, or the Costs (defined below) of the Claims Administrator or the PCC Agent, shall be required to be entered into between the CCAA Plan Administrators and the Claims Administrator and/or the PCC Agent. Article 14, Sections 14.4(k)(ii) and 14.4(m)(ii) of the CCAA Plans, Sections 17.2 and 21.3 of the PCC Compensation Plan, and Sections 16.2 and 20.3 of the Quebec Administration Plan are hereby varied to delete any references to a written agreement between the CCAA Plan Administrators and the Claims Administrator.

Approval of Notice Plan

5. **THIS COURT ORDERS** that the notice plan in the form attached hereto as **Schedule “A”** (the “**Global Notice Plan**”) shall constitute the PCC Notice Plan (for purposes of the PCC Compensation Plan) and the *Blais* Notice Plan (for purposes of the Quebec Administration Plan), and that the Global Notice Plan, including the Claims Process as described therein, is hereby approved. For greater certainty, and without limiting the generality of the foregoing, the forms of notices, claim forms and any other forms included as part of the Global Notice Plan are hereby approved for purposes of the PCC Compensation Plan and the Quebec Administration Plan, as

applicable, notwithstanding the forms of the notices, claim forms and any other forms attached as Appendices to the PCC Compensation Plan and Appendices to the Quebec Administration Plan that were approved by the CCAA Court in the Sanction Order.

Amendment of Notices and Forms

6. **THIS COURT ORDERS** that the form of PCC Notice of Incomplete Claim attached as Exhibit “C” to the O’Connor Affidavit and the form of PCC Notice to Provide Alternative Proof attached as Exhibit “D” to the O’Connor Affidavit are hereby approved for purposes of the PCC Compensation Plan.

7. **THIS COURT ORDERS** that, following consultation with each of the Tobacco Companies, the Administrative Coordinator, the PCC Representative Counsel (for amendments relating to the PCC Compensation Plan) and the Quebec Class Counsel (for amendments relating to the Quebec Administration Plan), the Claims Administrator may make amendments to the forms of notices, claim forms and any other forms that are Attachments to the Global Notice Plan, Exhibits to the O’Connor Affidavit, Appendices to the PCC Compensation Plan and/or Appendices to the Quebec Administration Plan, including the preparation of any additional notices or forms required to administer the PCC Compensation Plan and the Quebec Administration Plan, provided that the Claims Administrator complies with Section 8.2 of the PCC Compensation Plan and Section 7.2 of the Quebec Administration Plan. No other changes, modifications or revisions shall be made to the PCC Compensation Plan except in accordance with Section 8.1 thereof, or to the Quebec Administration Plan except in accordance with Section 7.1 thereof.

Purpose and Use of Claims Administrator's Checklists

8. **THIS COURT ORDERS** that, notwithstanding anything to the contrary in the PCC Compensation Plan and the Quebec Administration Plan, the Checklist which is Appendix “H” to the PCC Compensation Plan, and the Proof of Claim Checklist for Tobacco-Victim Claims and the Proof of Claim Checklist for Succession Claims that are respectively Appendices “I” and “J” to the Quebec Administration Plan, are directory guides prepared for the convenience of and to assist the Claims Administrator in the determination of whether a PCC-Claimant meets the PCC Eligibility Criteria to be an Eligible PCC-Claimant who will receive an Individual Payment, or (ii) a Tobacco-Victim Claimant or Succession Claimant meets the *Blais* Eligibility Criteria to be an Eligible *Blais* Class Member who will receive a Compensation Payment.

Approval of Global Claims Administration Costs Framework

9. **THIS COURT ORDERS** that the Global Claims Administration Costs Framework (the “**Global Claims Administration Costs Framework**”) in the form attached hereto as **Schedule “B”** is hereby approved for purposes of both the PCC Compensation Plan (including, for certainty, in respect of Epiq’s roles as Claims Administrator and as PCC Agent) and the Quebec Administration Plan as the framework basis against which the Costs of the PCC Compensation Plan and the Quebec Administration Plan shall be reviewed and assessed in accordance with the provisions of this Order, with such amendments as may be approved by further Order of the CCAA Court, provided that, other than in respect of the Costs set out in the Global Claims Administration Costs Framework with respect to the PCC Notice Plan and the Blais Notice Plan, the Global Claims Administration Costs Framework provides the structure for the future budgeting processes set forth in this Order, and the amounts reflected in the Global Claims

Administration Costs Framework, other than in respect of the Costs with respect to the PCC Notice Plan and the Blais Notice Plan, are not approved under this Order. The Claims Administrator and the PCC Agent shall not be entitled to be paid any of the Costs contemplated in the Global Claims Administration Costs Framework unless such Costs are validly incurred and payable in accordance with the provisions of this Order.

10. **THIS COURT ORDERS** that the Global Claims Administration Costs Framework shall include in respect of each of (i) the claims administration under the PCC Compensation Plan (“**PCC Claims Administration**”), (ii) the claims administration under the Quebec Administration Plan (“**QCAP Claims Administration**”), (iii) the PCC Agent services, (iv) the PCC Notice Plan, (v) the *Blais* Notice Plan and (vi) the pre-CCAA Plan implementation activities relating to the PCC Compensation Plan, as applicable:

- (a) the actual time spent and standard rates charged by the Claims Administrator and the PCC Agent in connection with all work done up to August 15, 2025, and the estimated time that will be spent and standard rates that will be charged up to the Plan Implementation Date;
- (b) a forecast of the estimated time that will be incurred and standard rates to be charged by the Claims Administrator and the PCC Agent; and
- (c) an estimate of the number of claims to be reviewed during the PCC Claims Submission Period and the *Blais* Claims Submission Period.

11. **THIS COURT ORDERS** that, during the first three calendar months commencing on and following the Plan Implementation Date (“**Weekly Reporting Period**”), the Claims

Administrator and the PCC Agent shall provide to the CCAA Plan Administrators, on a weekly basis, to be received within four Business Days from the end of each week, and as circumstances warrant at any other times during the Weekly Reporting Period as requested by the CCAA Plan Administrators in their discretion, or as the CCAA Court directs, the following reports in writing (collectively, “**Weekly Reports**”), in each case based on the information available at such time:

- (a) a report (“**Weekly Actual Costs Report**”) setting out the actual costs incurred, including actual time spent and hourly rates applied, and expenditures made by the Claims Administrator and the PCC Agent during the immediately prior week on account of the following activities, as applicable, in regard to each of the PCC Claims Administration, QCAP Claims Administration, PCC Agent, PCC Notice Plan and *Blais* Notice Plan:

- (i) paid media noticing;
- (ii) initial and non-recurring items;
- (iii) print and mail operations;
- (iv) project and escalation management and noticing;
- (v) technology management;
- (vi) Contact Centre; and
- (vii) claims operation services,

accompanied by an explanation of all variances between the actual costs and expenditures for the immediately prior week and the actual costs and expenditures for the week upon which the Weekly Reports are based;

- (b) a report (“**Weekly Claims Administration Report**”) setting out in respect of the week upon which the Weekly Reports are based for each of the PCC Compensation Plan and the Quebec Administration Plan, the particulars regarding (i) the number of claims received, (ii) the number of claims reviewed, (iii) the number of incomplete claims awaiting submission of further information, (iv) the number of claims approved, (v) the number of claims rejected, (vi) the number of rejected claims that are in the process of being reviewed by the Review Officer, and (vii) the overall status of the claims administration process; and
- (c) a report (“**Weekly Events Report**”) in respect of the week upon which the Weekly Reports are based identifying and explaining any unusual, unexpected or inexplicable events that occurred and/or out of the ordinary trends that were observed in the PCC Claims Administration and the QCAP Claims Administration to enable the Claims Administrator and/or the PCC Agent, as applicable, to take prompt steps to correct any issues, problems, errors and/or mistakes in the claims administration processes as soon as possible.

12. **THIS COURT ORDERS** that, commencing upon the end of the Weekly Reporting Period and continuing for the duration of the PCC Claims Administration and the QCAP Claims Administration (“**Monthly Reporting Period**”), the Claims Administrator and the PCC Agent shall provide to the CCAA Plan Administrators, on a monthly basis, to be received within five Business Days from the end of each month, and as circumstances warrant at any other times during the Monthly Reporting Period as requested by the CCAA Plan Administrators in their discretion, or as the CCAA Court directs, the following reports in writing (collectively, “**Monthly Reports**”), in each case based on the information available at such time:

- (a) a report (“**Monthly Actual Costs Report**”) setting out the actual costs incurred, including actual time spent and hourly rates applied, and expenditures made by the Claims Administrator and the PCC Agent during the immediately prior month on account of the activities enumerated in subparagraphs 11(a)(i) to 11(a)(vii) of this Order, as applicable, in regard to each of the PCC Claims Administration, QCAP Claims Administration, PCC Agent, PCC Notice Plan and *Blais* Notice Plan, accompanied by an explanation of all variances between the actual costs and expenditures for the immediately prior month and the actual costs and expenditures for the month upon which the Monthly Reports are based;
- (b) a report (“**Monthly Claims Administration Report**”) setting out in respect of the month upon which the Monthly Reports are based for each of the PCC Compensation Plan and the Quebec Administration Plan the particulars regarding (i) the number of claims received, (ii) the number of claims reviewed, (iii) the number of incomplete claims awaiting submission of further information, (iv) the number of claims approved, (v) the number of claims rejected, (vi) the number of rejected claims that are in the process of being reviewed by the Review Officer, and (vii) the overall status of the claims administration process; and
- (c) a report (“**Monthly Events Report**”) in respect of the month upon which the Monthly Reports are based identifying and explaining any unusual, unexpected or inexplicable events that occurred and/or out of the ordinary trends that were observed in the PCC Claims Administration and the QCAP Claims Administration to enable the Claims Administrator and/or the PCC Agent, as

applicable, to take prompt steps to correct any issues, problems, errors and/or mistakes in the claims administration processes as soon as possible.

13. **THE COURT ORDERS** that, as the PCC Claims Administration and the QCAP Claims Administration progress, the CCAA Plan Administrators may, in their discretion if they deem it to be necessary and appropriate, direct that the Weekly Reporting Period shall be extended for a period longer than the first three calendar months following the Plan Implementation Date.

14. **THIS COURT ORDERS** that the Claims Administrator and the PCC Agent shall provide copies of their Weekly Reports and their Monthly Reports to the Tobacco Companies, Court-Appointed Mediator, Administrative Coordinator, PCC Representative Counsel and Quebec Class Counsel concurrently when such reports are provided to the CCAA Plan Administrators. The CCAA Plan Administrators shall file copies of all the Weekly Reports and Monthly Reports with the CCAA Court provided, however, that Epiq may redact from the public copies of such reports filed with the CCAA Court any confidential or commercially sensitive information.

15. **THIS COURT ORDERS** that, for greater certainty, the reporting obligations set forth in paragraphs 11 to 14 of this Order do not replace any of the reporting obligations of the Claims Administrator set forth in the PCC Compensation Plan and the Quebec Administration Plan.

16. **THIS COURT ORDERS** that, within fifteen calendar days following the end of the Weekly Reporting Period, the Claims Administrator and PCC Agent shall provide to the CCAA Plan Administrators, with copies to the Tobacco Companies, Court-Appointed Mediator, Administrative Coordinator, PCC Representative Counsel and Quebec Class Counsel: (i) a budget for the PCC Claims Administration, and (ii) a budget for the QCAP Claims

Administration (collectively, the “**First Annual Global Claims Administration Costs Budget**”) that: (a) are consistent with the format of the Global Claims Administration Costs Framework, (b) include estimates in respect of (1) professional fees, costs and expenses of all legal or other advisors to Epiq, and (2) the applicable taxes, fees, duties or charges owed to a Governmental Authority, whether incurred by Epiq, its legal or other advisors, and/or its providers of associated services, (c) are informed by the Weekly Actual Costs Reports, Weekly Claims Administration Reports and Weekly Events Reports, and (d) cover the next twelve calendar month period commencing on the end of the Weekly Reporting Period. Notwithstanding anything to the contrary in Section 56.3 of the PCC Compensation Plan and Section 57.3 of the Quebec Administration Plan, within forty-five calendar days following the end of the Weekly Reporting Period, the Claims Administrator and the PCC Agent shall submit the First Annual Global Claims Administration Costs Budget to the CCAA Court and the Quebec Superior Court for joint approval. Epiq may redact from the public copies of the First Annual Global Claims Administration Costs Budget filed with the CCAA Court and Quebec Superior Court any confidential or commercially sensitive information.

17. **THIS COURT ORDERS** that, for each subsequent twelve calendar month period following the end of the twelve calendar month period covered by the First Annual Global Claims Administration Costs Budget until the PCC Claims Administration and the QCAP Claims Administration, respectively, are complete, the Claims Administrator and the PCC Agent shall provide to the CCAA Plan Administrators, concurrently with copies provided to the Tobacco Companies, Court-Appointed Mediator, Administrative Coordinator, PCC Representative Counsel and Quebec Class Counsel: (i) a budget for the PCC Claims Administration and (ii) a budget for the QCAP Claims Administration of the Quebec Administration Plan (collectively,

“**Subsequent Annual Global Claims Administration Costs Budget**”) that cover the next twelve calendar month period. Notwithstanding anything to the contrary in Section 56.3 of the PCC Compensation Plan and Section 57.3 of the Quebec Administration Plan, within forty-five calendar days following the end of the previous twelve calendar month period, the Claims Administrator and the PCC Agent shall submit the Subsequent Annual Global Claims Administration Costs Budget to the CCAA Court and the Quebec Superior Court for joint approval. Epiq may redact from the public copies of the Subsequent Annual Global Claims Administration Costs Budgets filed with the CCAA Court and Quebec Superior Court any confidential or commercially sensitive information. The Subsequent Annual Global Claims Administration Costs Budgets shall be consistent with the format of the Global Claims Administration Costs Framework and the First Annual Global Claims Administration Costs Budget, and shall be provided by the Claims Administrator and the PCC Agent thirty calendar days in advance of the end of the current twelve calendar month period.

18. **THIS COURT ORDERS** that, notwithstanding anything to the contrary in Sections 17.2 and 21.3 of the PCC Compensation Plan and Sections 16.2 and 20.3 of the Quebec Administration Plan, in respect of each year until the PCC Claims Administration and the QCAP Claims Administration are complete, the aggregate Costs (defined below) of Epiq in its capacities as the Claims Administrator and the PCC Agent up to and including such year shall not exceed (i) by more than 10% of the total amount of the First Annual Global Claims Administration Costs Budget up to and including such year, or (ii) by more than 10% of the total amount of any Subsequent Annual Global Claims Administration Costs Budget up to and including such year, without prior approval of the CCAA Plan Administrators and further Orders of the CCAA Court

and the Quebec Superior Court on motions brought by Epiq seeking approval of such increase in Costs (defined below).

Confidentiality and Information Management

19. **THIS COURT ORDERS** that the Claims Administrator shall comply with all of its duties and responsibilities set forth in Sections 57.1 to 57.6 and Sections 58.1 and 58.2 of the PCC Compensation Plan in regard to the receipt, storage, disclosure, retention and destruction of all Personal Information and documentation provided to the Claims Administrator in connection with the Claim Packages submitted by PCC-Claimants and PCC-Claimants' Legal Representatives. The PCC Agent shall also comply with Sections 57.1 to 57.6 and Sections 58.1 and 58.2 of the PCC Compensation Plan. The Claims Administrator and the PCC Agent shall comply with the Official Confirmations of Diagnoses Order.

20. **THIS COURT ORDERS** that the Claims Administrator shall comply with all of the duties and responsibilities set forth in Sections 58.1 to 58.6 and Sections 59.1 and 59.2 of the Quebec Administration Plan in regard to the receipt, storage, disclosure, retention and destruction of all Personal Information and documentation provided to the Claims Administrator in connection with the Proofs of Claim submitted by Tobacco-Victim Claimants and Succession Claimants. Raymond Chabot (Proactio) shall also comply with Sections 57.1 to 57.6 and Sections 58.1 and 58.2 of the Quebec Administration Plan. The Claims Administrator and Raymond Chabot (Proactio) shall comply with the Official Confirmations of Diagnoses Order.

Payment of Fees, Costs and Expenses

21. **THIS COURT ORDERS** that, subject to paragraph 18 of this Order, each of the Claims Administrator and the PCC Agent, and their respective legal and other advisors, shall be paid their reasonable professional fees, other fees, costs, disbursements, expenses, Court costs and other expenditures, and all applicable Sales and Excise Taxes, directly incurred in relation to the carrying out of their duties and responsibilities as the Claims Administrator and the PCC Agent or the advisors thereto, as applicable (collectively, “**Costs**”), in each case at their standard rates and charges, which (i) if incurred in the period prior to the Plan Implementation Date, are consistent with the Global Claims Administration Costs Framework, (ii) are incurred during the Weekly Reporting Period, or (iii) if incurred following the Weekly Reporting Period, are consistent with, as applicable, the Global Claims Administration Costs Framework, the First Annual Global Claims Administration Costs Budget and any Subsequent Annual Global Claims Administration Costs Budgets.

22. **THIS COURT ORDERS** that, subject to paragraphs 18 and 21 of this Order, the Tobacco Companies are directed to pay directly to Epiq the following reasonable Costs, and such payments shall not be deducted from the PCC Compensation Plan Amount or from the QCAP Settlement Amount, as applicable:

- (a) all Costs incurred by the Claims Administrator in connection with the administration of the PCC Compensation Plan;
- (b) all Costs incurred by the PCC Agent in connection with the administration of the PCC Compensation Plan;

- (c) all Costs associated with the PCC Notice Plan; and
- (d) all Costs associated with the *Blais* Notice Plan,

in each case within thirty calendar days of the issuance of any invoice by Epiq in respect thereof, provided that: (x) Epiq has been set up as a vendor in each of the Tobacco Companies' accounting systems, and (y) such invoice of Epiq, as well as the invoices rendered by all legal and other advisors of Epiq, have been approved by the CCAA Plan Administrators. The invoices of Epiq's legal advisors may be redacted for solicitor-client privilege before they are submitted to the CCAA Plan Administrators for review and approval. The Tobacco Companies shall pre-fund within thirty calendar days of Epiq's presentment of a reasonable written estimate of any: (a) paid media insertion orders planned to be placed by Epiq during the subsequent thirty calendar day period; or (b) postage for mailings of 25,000 pieces or more that are expected to occur during the subsequent thirty calendar day period. Amounts that remain unpaid following the date that is thirty calendar days after the issuance of an invoice by Epiq (provided that the conditions in (x) and (y) above have been met) shall be subject to an interest charge of 0.5% per month. All such Costs shall be paid by the Tobacco Companies in equal parts. The liability of the Tobacco Companies for their respective share of the Costs shall be several and not joint and several.

23. **THIS COURT ORDERS** that, subject to paragraphs 18 and 21 of this Order, the reasonable Costs of the Claims Administrator incurred in connection with the administration of the Quebec Administration Plan, other than the Costs associated with the Blais Notice Plan (which shall be paid by the Tobacco Companies pursuant to paragraph 22(d) of this Order), shall be paid to Epiq from the balance of the QCAP Settlement Amount net of the Quebec Class Counsel Fee. The CCAA Plan Administrators shall direct the trustee of the QCAP Trust Account

(the “**Trustee**”) to pay, and the Trustee shall pay from the QCAP Trust Account, all Costs of the Claims Administrator incurred in connection with the administration of the Quebec Administration Plan within thirty calendar days of the issuance of any invoice by Epiq in respect thereof, provided that such invoice of Epiq, as well as the invoices rendered by all legal and other advisors of Epiq, have been approved first by the Quebec Class Counsel and then by CCAA Plan Administrators. The invoices of Epiq’s legal advisors may be redacted for solicitor-client privilege before they are submitted to the Quebec Class Counsel and to the CCAA Plan Administrators for review and approval. Amounts that remain unpaid following the date that is thirty calendar days after the issuance of an invoice by Epiq shall be subject to an interest charge of 0.5% per month.

24. **THIS COURT ORDERS** that, for greater certainty, the PCC Compensation Plan Reserve Costs shall include the Costs of the services which the PCC Agent, including its legal and other advisors, provides in relation to the PCC Compensation Plan, and Epiq, in its capacity as PCC Agent, shall also be entitled to the benefit of the PCC Compensation Plan Reserve. Paragraphs 21 and 23 of the Sanction Order shall be interpreted to include the foregoing Order.

Advisors to Claims Administrator and PCC Agent

25. **THIS COURT ORDERS** that the Claims Administrator and the PCC Agent may, in their discretion, retain any legal or other advisors, to advise and assist them in carrying out their respective duties in relation to the PCC Compensation Plan and the Quebec Administration Plan, as applicable.

Distributions by Claims Administrator

26. **THIS COURT ORDERS** that the Claims Administrator is hereby authorized to distribute (i) Individual Payments to Eligible PCC Claimants pursuant to and in accordance with the procedures and process set forth in Sections 49.1, 49.2, 51.1, 52.1, 53.1, 53.2, 53.3, 53.4, 53.5, 55.1 and 55.2 of the PCC Compensation Plan, and (ii) Compensation Payments to Eligible Blais Class Members pursuant to and in accordance with the procedures and process set forth in Sections 50.1, 50.2, 52.1, 53.1, 54.1, 54.2, 54.3, 54.4, 54.5, 56.1 and 56.2 of the Quebec Administration Plan.

Liability - Variation of Sanction Order and relating to PCC Representative Counsel, Court-Appointed Mediator, Monitors, CCAA Plan Administrators and Administrative Coordinator

27. **THIS COURT ORDERS** that the Sanction Order is hereby varied to delete Section 27 thereof.

28. **THIS COURT ORDERS** that, for greater certainty and without limiting any other protections available to the PCC Representative Counsel pursuant to (i) paragraph 9 of the Amended and Restated Orders re Appointment of PCC Representative Counsel dated November 22, 2024, or (ii) any other Order of the CCAA Court, the PCC Representative Counsel shall not be liable, including vicariously liable, for any act or omission of the PCC Agent in connection with the PCC Agent's duties under this Order, the PCC Compensation Plan, the CCAA Plans, or any other court Order, or in regard to any other matter whatsoever. For further certainty, although Epiq is appointed as the PCC Agent for the PCC Representative Counsel pursuant to Section 18.3 of the PCC Compensation Plan and paragraph 3 of this Order, the PCC Agent operates

independently and is solely responsible for the performance of its duties, and no other Person shall be held responsible for Epiq's acts and omissions.

29. **THIS COURT ORDERS** that, for greater certainty and without limiting any other protections available to the Court-Appointed Mediator, Monitors, CCAA Plan Administrators and Administrative Coordinator pursuant to (i) paragraphs 28 and 38-52 inclusive of the Sanction Order, (ii) paragraphs 5, 6 and 28-33 inclusive of the CCAA Plan Administrator Appointment Order, (iii) Article 18, Sections 18.1.4, 18.1.5, 18.1.6, 18.1.7, 18.1.8 and 18.1.10 of the RBH CCAA Plan, or (iv) any other court Order, the Court-Appointed Mediator, Monitors, CCAA Plan Administrators and Administrative Coordinator shall not be liable, including vicariously liable, for any acts or omissions of Epiq in its capacities as Claims Administrator and PCC Agent, or in regard to any other matter whatsoever. Epiq in its capacities as the Claims Administrator and the PCC Agent operates independently and is solely responsible for the performance of its duties, and no other Person shall be held responsible for Epiq's acts and omissions.

Termination of Engagement

30. **THIS COURT ORDERS** that, notwithstanding anything to the contrary in the PCC Compensation Plan, the Quebec Administration Plan, the CCAA Plans, the Sanction Orders or otherwise, and subject to the approval of the CCAA Court, the engagement of the Claims Administrator and/or the PCC Agent may be terminated by the CCAA Plan Administrators upon at least thirty calendar days' prior written notice delivered by the CCAA Plan Administrators to Epiq. For certainty, Epiq's rights to oppose any such motion and relief are fully reserved.

31. **THIS COURT ORDERS** that upon the effective date of such termination of its engagement, Epiq shall take all steps requested by the CCAA Plan Administrators and/or directed

by the CCAA Court to effect the transfer of the role of Claims Administrator and/or PCC Agent, as applicable, to an alternative service provider or providers, including but not limited to the transfer of:

- (a) all Claim Packages received in respect of the PCC Compensation Plan;
- (b) all Proofs of Claim received in respect of the Quebec Administration Plan;
- (c) all completed assessments of Claim Packages submitted by PCC-Claimants and Legal Representatives;
- (d) all completed assessments of Proofs of Claims submitted by Tobacco-Victim Claimants and Succession Claimants;
- (e) all communications received from or transmitted to PCC-Claimants, Legal Representatives, Tobacco-Victim Claimants and Succession Claimants;
- (f) all information supporting claims, including medical data, proofs of diagnoses and Official Confirmations in Epiq's possession or control;
- (g) all reports or analyses performed by any of Epiq's advisors in connection with the PCC Compensation Plan or Quebec Administration Plan;
- (h) all information and approvals required to transfer or assign the bank accounts used by the Claims Administrator to distribute funds to PCC-Claimants, Tobacco-Victim Claimants and Succession Claimants; and
- (i) all other documents, information and data pertaining to the PCC Compensation Plan and Quebec Administration Plan.

General

32. **THIS COURT ORDERS** that in the event of a conflict between (i) this Order, (ii) the Sanction Order and (iii) the RBH CCAA Plan, including the PCC Compensation Plan and the Quebec Administration Plan, the terms of this Order shall govern.

33. **THIS COURT ORDERS** that the Claims Administrator may seek directions in respect of a matter relating to the Quebec Administration Plan jointly from the CCAA Court and the Quebec Superior Court in accordance with the procedure set forth in Sections 11.2.1, 11.2.2.6, 11.2.3.3, 12.1.1, 12.1.2 and 12.1.3 of the Quebec Administration Plan. The Claims Administrator may seek directions in respect of a matter relating to the PCC Compensation Plan from the CCAA Court in accordance with the procedure set forth in Sections 12.2.1, 12.2.2.6, 13.1.1, 13.1.2 and 13.1.3 of the PCC Compensation Plan.

34. **THIS COURT ORDERS** that this Order shall have full force and effect in all provinces and territories in Canada, outside Canada and against all Persons against whom it may be enforceable.

35. **THIS COURT REQUESTS** the aid and recognition of any court, tribunal, judicial, regulatory or administrative body having jurisdiction in Canada, the United States or elsewhere to give effect to this Order, and to assist Epiq and the CCAA Plan Administrators and their respective agents in carrying out the terms of this Order. All courts, tribunals, judicial, regulatory and administrative bodies are hereby respectfully requested to make such orders and to provide such assistance to Epiq and the CCAA Plan Administrators as may be necessary or desirable to give effect to this Order or to assist Epiq and the CCAA Plan Administrators and their respective agents in carrying out the terms of this Order.

36. **THIS COURT ORDERS** that Epiq, the CCAA Plan Administrators or the Foreign Representative shall be at liberty and are hereby authorized and empowered to apply to any court, tribunal, regulatory or administrative body, wherever located, for the recognition of this Order and for the assistance in carrying out the terms of this Order and/or to confirm this Order as binding and effective in any appropriate foreign jurisdiction, including in the Chapter 15 Proceedings.

37. **THIS COURT ORDERS** that this Order and all of its provisions are enforceable and effective as of the Plan Implementation Date, without the need for entry or filing.

Chief Justice Geoffrey B. Morawetz

ONTARIO	
SUPERIOR COURT OF JUSTICE- COMMERCIAL LIST	
Proceeding commenced at Toronto	
ORDER	
GOODMANS LLP Barristers & Solicitors 333 Bay Street, Suite 3400 Toronto, ON M5H 2S7	
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Lawyers for Epiq Class Actions Services Canada, Inc.	

Schedule A – Global Notice Plan

[omitted as duplicate of Schedule A to Order in CV-19-615862-00CL]

Schedule B - Global Claims Administration Costs Framework

[omitted as duplicate of Schedule B to Order in CV-19-615862-00CL]

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Court File No. CV-19-615862-00CL
Court File No. CV-19-616077-00CL
Court File No. CV-19-616779-00CL

ONTARIO
SUPERIOR COURT OF JUSTICE
COMMERCIAL LIST

IN THE MATTER OF THE *COMPANIES' CREDITORS ARRANGEMENT ACT*,
R.S.C. 1985, c. C-36, AS AMENDED

AND IN THE MATTER OF A PLAN OF COMPROMISE
OR ARRANGEMENT OF **JTI-MACDONALD CORP.**

AND IN THE MATTER OF A PLAN OF COMPROMISE
OR ARRANGEMENT OF **IMPERIAL TOBACCO CANADA LIMITED**
AND **IMPERIAL TOBACCO COMPANY LIMITED**

AND IN THE MATTER OF A PLAN OF COMPROMISE
OR ARRANGEMENT OF **ROTHMANS, BENSON & HEDGES INC.**

AFFIDAVIT OF MICHAEL O'CONNOR

I, Michael O'Connor, of the city of Washington, in the District of Columbia in the United States of America, **AFFIRM AND SAY:**

1. I am the Senior Vice President of Client Services at Epiq Class Actions & Claims Solutions, Inc. In this role, the head of Epiq Class Action Services Canada, Inc. ("**Epiq**"), Vice President Elizabeth deBoer, reports to me.
2. I have personal knowledge of the matters affirmed in this affidavit, except where I have otherwise stated my knowledge to be based on understanding, information or belief, in which cases I have indicated the source of such understanding, information or belief and believe the information from each source to be true.

3. Unless otherwise defined herein, all capitalized terms used in this affidavit have the meanings ascribed to them in the Pan-Canadian Compensation Plan (the “**PCC Compensation Plan**”) or the Quebec Class Action Administration Plan (the “**Quebec Administration Plan**”, and together with the PCC Compensation Plan, the “**Compensation Plans**”), as applicable, or in the Third Amended and Restated Plans of Compromise and Arrangement dated February 27, 2025 (collectively, the “**CCAA Plans**”) in respect of each of JTI-Macdonald Corp., Rothmans, Benson & Hedges Inc., and Imperial Tobacco Canada Limited and Imperial Tobacco Company Limited (collectively, the “**Tobacco Companies**”) arising from the proceedings under the *Companies’ Creditors Arrangement Act*, RSC 1985, c C-36, as amended (“**CCAA**”) before the Ontario Superior Court of Justice (Commercial List) in Toronto (“**CCAA Court**”).
4. I affirm this affidavit in support of the motion brought by Epiq seeking the Orders attached as Schedules “A” to “C” to the Notice of Motion (the “**Motion**”).
5. As part of the Sanction Orders (defined below), the CCAA Court approved the appointment of Epiq as the Claims Administrator, to manage the administration of the Claims Processes for both Compensation Plans.
6. The Compensation Plans require Epiq to seek Court approval for certain specified matters, including the Global Notice Plan (as defined below). In addition, in the course of developing the Global Notice Plan and preparing for the Claims Processes, Epiq has made limited updates or modifications to certain matters prescribed by the Compensation Plans as well as to the documentation attached to, or contemplated by, the Compensation Plans.

7. In all cases, the proposed updates and modifications contemplated as part of the Motion were made to ensure the objectives of the Compensation Plans are achieved.
8. As described in further detail in this affidavit, the Motion seeks, among other things:
 - (a) confirmation of the appointment of Epiq as the agent for the PCC Representative Counsel in respect of the PCC Compensation Plan (the “**PCC Agent**”), as contemplated in section 18.3 of the PCC Compensation Plan;
 - (b) removal of the obligation in the CCAA Plans and the Compensation Plans for the CCAA Plan Administrators and Epiq to enter into written engagement agreements;
 - (c) approval of the Global Notice Plan as contemplated in section 19.1 of the PCC Compensation Plan and section 18.1 of the Quebec Administration Plan, including approval of all forms appended to the Global Notice Plan;
 - (d) approval of the form of PCC Notice of Incomplete Claim and the form of PCC Notice to Provide Alternative Proof (each as defined below) for purposes of the PCC Compensation Plan;
 - (e) authorization to, following consultation with each of the Tobacco Companies, the Administrative Coordinator, the PCC Representative Counsel (for amendments relating to the PCC Compensation Plan) and the Quebec Class Counsel (for amendments relating to the Quebec Administration Plan), amend the forms of notices, claim forms and any other forms that are attachments to the Global Notice Plan, exhibits to this affidavit, appendices to the PCC Compensation Plan and/or appendices to the Quebec Administration Plan, and to prepare any additional

notices or forms required to administer the Compensation Plans, in a manner that complies with section 8.2 of the PCC Compensation Plan and section 7.2 of the Quebec Administration Plan;

- (f) confirmation that, notwithstanding anything to the contrary in the Compensation Plans, the checklists which are Appendix H to the PCC Compensation Plan and Appendices I and J to the Quebec Administration Plan are directory guides prepared for the convenience of and to assist the Claims Administration in the determination of whether claimants meet the eligibility criteria of the respective Compensation Plans;
- (g) approval of the Global Claims Administration Costs Framework which Epiq has developed as the framework basis to understand Epiq's projected Costs (as defined in the proposed Order) with respect to its roles as Claims Administrator and PCC Agent (the "**Global Claims Administration Costs Framework**");
- (h) approval of the scope and timing of the reporting to be provided by the Claims Administrator and the PCC Agent to the CCAA Plan Administrators during the administration of the Compensation Plans, which reporting obligations do not replace any of the reporting obligations of the Claims Administrator set forth in the Compensation Plans;
- (i) approval of the process under which Epiq will deliver a budget for administrative activities related to the PCC Compensation Plan and the Quebec Administration Plan on an annual basis that is consistent with the format of the Global Claims Administration Costs Framework and includes an estimated forecast for the next

twelve calendar month period (defined in the proposed Order as the “First Annual Global Claims Administration Costs Budget” and the “Subsequent Annual Global Claims Administration Costs Budgets”), which shall be submitted to the CCAA Court and the Quebec Superior Court for joint approval;

- (j) authorization for the specific payment mechanisms and terms for the payment of the Costs of the Claims Administrator, the PCC Agent and their advisors;
- (k) extension of additional limitations on liability for the benefit of PCC Representative Counsel, the Court-Appointed Mediator, the Administrative Coordinator and the CCAA Plan Administrators; and
- (l) certain other terms and relief set out in the proposed Order.¹

I. EPIQ AS CLAIMS ADMINISTRATOR AND PCC AGENT – APPOINTMENT AND EXPERIENCE

9. The CCAA Plans, the PCC Compensation Plan, and the Quebec Administration Plan were approved by Orders of the Honourable Chief Justice Morawetz dated March 6, 2025 (the “**Sanction Orders**”).
10. The CCAA Plans will effect a global settlement of various claims defined as the “Tobacco Claims” against the Tobacco Companies, including through the Compensation Plans.

¹ Epiq understands that amendments to the PCC Compensation Plan and the Quebec Administration Plan consistent with the relief sought in the Proposed Order are the subject of a separate motion to be filed by the CCAA Plan Administrators.

A. Appointment of Epiq as Claims Administrator

11. As part of the Sanction Orders, the CCAA Court approved the appointment of Epiq as the Claims Administrator, to manage the administration of the Claims Processes for both Compensation Plans.
12. Epiq's role as Claims Administrator is to administer the Compensation Plans, including designing, implementing and managing the Global Notice Plan, reviewing and administering claims submitted by claimants, and disbursing the compensation to eligible claimants under the PCC Compensation Plan or the Quebec Administration Plan.
13. Epiq has extensive experience administering large and complex class action settlements across Canada. Epiq has administered well over 100 Canadian settlements and is part of a global organization that has provided settlement administration services in thousands of matters in Canada, the United States, the United Kingdom, Europe, and Australia. In providing such settlement administration services, Epiq has, among other things:
 - (a) securely managed large volumes of data;
 - (b) drafted, designed and executed notice plans;
 - (c) developed claim websites, which enable claimants to submit their claims via a secure web portal;
 - (d) set up and operated call centres to support claimants;
 - (e) processed and adjudicated claims; and
 - (f) calculated and disbursed payments to eligible claimants.

14. Epiq's experience includes administering the landmark *Indian Residential Schools Settlement*, which was to provide over \$2 billion in compensation to former students, and the *Hepatitis C* settlements entered into by federal, provincial and territorial governments to provide \$2 billion in compensation to those infected by tainted blood products. In each case, Epiq's approach was tailored to address the unique characteristics and needs of the affected populations, including individuals living in remote communities, vulnerable persons, and those with limited access to digital platforms.
15. As set out in Guiding Principle #7 of the Compensation Plans, in carrying out its role as Claims Administrator, Epiq is neutral and independent from PCC Representative Counsel, Quebec Class Counsel, the QCAP Agent, Tobacco Companies, PCC Claimants, QCAP Claimants, the CCAA Plan Administrators, the Administrative Coordinator, and the Court-Appointed Mediator.
16. The Compensation Plans contemplated Epiq entering into written agreements with the CCAA Plan Administrators. I am advised by Epiq's counsel, Goodmans LLP, that the CCAA Plan Administrators have advised that they do not consider such written agreements necessary and have requested to have such requirement removed.

B. Appointment of Epiq as PCC Agent

17. Pursuant to section 18.3 of the PCC Compensation Plan, in addition to its role as Claims Administrator, Epiq was also appointed as PCC Agent (being the agent for PCC Representative Counsel in respect of the PCC Compensation Plan). In Quebec, a similar role of agent for Quebec Class Counsel is being performed by Proactio (the "**QCAP Agent**").

18. The Compensation Plans were designed to allow claimants to submit claims without the need for a lawyer. As PCC Agent, Epiq will provide assistance free of charge to PCC Claimants, including guidance on how the claimant can assemble and/or obtain necessary information and documents, and on how to prepare and submit their Claim Form. Epiq will also assist PCC Claimants by commissioning the statutory declaration that is to be included in the Claim Form.
19. Epiq is assembling two separate staff teams with a different reporting structure for its roles as PCC Agent and Claims Administrator. The structure will ensure the separation of duties by which Epiq is assisting PCC Claimants on behalf of PCC Representative Counsel in its role as PCC Agent and by which it is acting as a neutral decision-maker in its role as Claims Administrator.

II. THE PROPOSED GLOBAL NOTICE PLAN

A. Epiq's Expertise in Notice Plan Design

20. As part of its experience administering large and complex class action settlements across Canada and globally, Epiq has frequently designed and implemented tailored notice programs, including national and multilingual campaigns involving newspaper, magazine, radio, television, digital, and social media placements.
21. One of Epiq's business units, Epiq Legal Noticing (a/k/a Hilsoft Notifications), is a recognized leader in legal notice design and has managed complex notice plans in implementing Canadian class action settlements, such as the Indian Residential School

Settlement Agreement² (discussed above) and the Canadian Credit Cards Class Actions Settlements,³ which involved the disbursement of \$188 million to merchants that accepted Visa and Mastercard between 2001 and 2021. Worldwide, Epiq Legal Noticing has provided expert notification services for over 700 cases in 53 languages with its notices appearing in almost every country in the world. Epiq’s mandates routinely require detailed media targeting, outreach to marginalized communities, and delivery of multilingual notices across a wide range of formats.

22. As set out in section 19.1 of the PCC Compensation Plan and section 18.1 of the Quebec Administration Plan, Epiq is required to design the PCC Notice Plan and *Blais* Notice Plan to “effectively reach” prospective PCC Claimants, Tobacco-Victim Claimants and Succession Claimants with “communications in newspapers, other print media, television, radio, social media, other digital media and direct communications where appropriate in order to reach as many prospective Claimants across Canada as possible.” In designing the Global Notice Plan, Epiq drew from its experience, including that set out above. To highlight two specific examples:

- (a) In the Indian Residential School Settlement, multiple phases of the notice program informed individuals as to the hearings, opt-out process, claims process, and various claim deadlines. The multiple notice program included hundreds of print insertions in traditional and Indigenous publications and thousands of radio and television spots across traditional and Indigenous broadcasters. This approach

² <http://www.residentialschoolsettlement.com>

³ <https://www.creditcardsettlements.ca>

achieved an estimated reach of more than 95% of Indigenous people aged 25 years and older.

- (b) In the Deepwater Horizon oil spill class action settlement in the United States, Epiq’s notice program featured 5,000+ print insertions in newspapers, consumer publications and trade journals, along with over 10,000 traditional broadcast spots via TV and radio, as well as digital media and individual notice. The notice program successfully reached 95% of U.S. Gulf Coast region adults.
23. I believe that Epiq’s experience has enabled it to create the Global Notice Plan that is well-designed to achieve the objectives of the Compensation Plans in an effective and efficient manner, and will allow it to exercise sound judgment, in consultation with key stakeholders as provided for in the proposed Order and in the Compensation Plans, in its work throughout the Claim Period.

B. Decision to Prepare a Combined Global Notice Plan

24. Epiq designed the proposed combined notice plan, a copy of which is attached as **Exhibit “A”** to my affidavit (the “**Global Notice Plan**”), and the combined First Notice (as defined and described in detail below), which is intended to provide notice to potential claimants under both Compensation Plans. The approach of preparing a combined Global Notice Plan and First Notice was adopted to ensure that prospective claimants receive a clear explanation of the two separate, but related, Compensation Plans approved by the Court.

25. While the Compensation Plans differ with respect to certain eligibility criteria, compensation amounts, and claims deadlines, both relate to compensation for tobacco-related diseases and will be administered concurrently. Given this context, the combined Global Notice Plan (including the combined First Notice, as discussed below) is the most effective way to limit confusion amongst claimants.
26. Consistent with this combined approach, Epiq determined that the combined notification effort and Claims Processes under both Compensation Plans will commence on the same date, i.e., on the First Notice Date, which is expected to occur on or shortly after the Plan Implementation Date, as detailed in the Global Notice Plan.

C. Development of the Notice Plan

27. In developing the Global Notice Plan, the goal was to reach individuals who may qualify for compensation under the Compensation Plans (“**Tobacco-Victims**”) as well as their family members, including spouses and adult children, who may either be Succession Claimants or Legal Representatives, as defined in the Compensation Plans, or otherwise may be assisting claimants in the submission of claims.
28. Epiq considered data from relevant sources regarding the media use of its target audiences prior to developing the Global Notice Plan in order to determine effective strategies for reaching potential claimants. The data considered related to, among other things, the likely age, geographic distribution, media habits, and language preferences of both claimants and their relatives who may be assisting them with submission of their claims. Based on this data, Epiq selected various print, television, radio, digital, and social media notice avenues

for incorporation into the Global Notice Plan. Epiq's analysis in this regard is referenced (non-exhaustively) within the Global Notice Plan.

D. The Global Notice Plan

(i) Overview

29. The Global Notice Plan provides a detailed outline of the methods of dissemination of notice, the types of media that will be used to effect notice, and the duration and frequency of publication and/or broadcasting that will be implemented, all of which are subject to ongoing evaluation and adjustment as needed in Epiq's reasoned judgment, following consultation with each of the Tobacco Companies, the Administrative Coordinator, the PCC Representative Counsel (for amendments relating to the PCC Compensation Plan) and the Quebec Class Counsel (for amendments relating to the Quebec Administration Plan), and subject to the consent of the Administrative Coordinator.

30. The Global Notice Plan will be implemented in phases over a two-year period. The cost estimates set out in the Global Notice Plan relating to the paid media program are premised on Epiq's current expectations for the entire Global Notice Plan program and are reflected in the Global Claims Administration Costs Framework. As the Global Notice Plan is implemented, Epiq will gather and review actual results on a month-to-month basis, including the number of claims received and whether certain geographic areas are underrepresented or overrepresented and need higher or lower levels of paid media coverage. Epiq also intends to gather and analyze data on other quantifiable aspects of the claims submissions, such as the number of claims for each disease diagnosis, the relative number of claims from metropolitan areas as compared to rural or remote areas, and self-reported media channel(s) by which a claimant was notified (e.g., television, radio, Internet

banner, newspaper, etc.). This data analysis will permit Epiq to make informed adjustments to the implementation of the Global Notice Plan. For example, if the claims response rate exceeds expectations, less paid advertising may be appropriate (and vice versa). Similarly, Epiq may adjust the specific media choices, depending on how claimants report that they received notice.

(ii) Key Components of the Global Notice Plan

31. The following is a summary of key components of the Global Notice Plan.

(a) Traditional Media Notice

32. The Global Notice Plan incorporates a range of traditional media avenues to ensure a broad reach across Canada, including remote areas.

33. Epiq will publish the combined First Notice in both national and local newspapers across all provinces and territories. Newspapers were chosen because they are a trusted source of information for local communities, particularly among older adults, who represent a significant portion of the eligible population under the Compensation Plans.

34. For similar reasons, the First Notice will also appear in high circulation print magazines nationwide.

35. The print placements will appear in both English and French.

36. The Global Notice Plan also includes print placements in a number of Indigenous-focused publications and newspapers circulated in northern and remote communities.

37. Where those publications publish in languages other than English or French, the combined First Notice will be translated accordingly, depending on the language of the publication.

For example, in Nunavut, the First Notice will be translated into Inuktitut and Inuinnaqtun for placement in the *Nunavut News North*. Similarly, in other northern publications serving Indigenous communities, the First Notice will be translated into the primary language(s) used by those publications, such as Oji-Cree and Siglit. The Indigenous language translations will be carried out in consultation with experienced local translation and communications providers.

38. The Global Notice Plan also includes television advertisements. These ads will be aired during programming that performs well with the intended audience of older viewers, such as news, game shows, and daytime television. The Global Notice Plan also includes placements on APTN and CBC North to ensure reach within Indigenous and northern communities.
39. In addition, radio ads will be broadcast in regional markets. Radio remains a relevant medium among older Canadians and complements the print and television strategies.

(b) Digital and Targeted Media Notice

40. To complement the traditional media campaign, and in order to reach younger audiences who may be Succession Claimants or Legal Representatives or otherwise assisting claimants in the submission of their claims, the Global Notice Plan incorporates a variety of digital media components.
41. These include:
 - (a) online display banners on the Google Display Network, placed using interest- and behaviour-based targeting;

- (b) online display banner ads on local newspaper websites to complement the print notice and to reach those who read their local news websites, but do not subscribe to the physical newspaper;
 - (c) social media notices on Facebook and Instagram, targeting users who have expressed interest in smoking content and/or tobacco-related disease topics such as cancer, COPD, and emphysema;
 - (d) ads on X (formerly Twitter) served to individuals who post or tweet on specific topics such as smoking-related diseases, quitting tobacco, and/or inquiring how to receive compensation related to smoking; and
 - (e) notices placed on YouTube, podcasts/streaming radio via Google and Spotify, and audiovisual streaming services, such as Disney+, ESPN+, and others.
42. The digital video and audio campaign will use the same content as used for broadcast television and radio advertising. The standardized content will ensure that there is consistent messaging across formats (e.g., traditional cable TV and streaming TV) and provide cost efficiencies.
43. The Global Notice Plan also includes search engine advertising to help guide users to the official claims administration website (discussed further below). Individuals searching for terms such as “tobacco settlement” or “how to file a smoking-related claim” will see a sponsored result directing them to the official claims administration website.

(c) Other Forms of Notice

44. A bilingual press release will be distributed over Canadian Newswire beginning on the First Notice Date to further raise public awareness of the commencement of the Claims Processes. This will help to generate interest from reporters and journalists who have been following the class actions and/or the CCAA Proceedings and/or who cover health, legal, or public interest matters. This type of media attention can significantly expand the reach of the notice at no additional cost, making it an efficient complement to the broader Global Notice Plan.
45. In addition, an information circular has been prepared for each of the Compensation Plans (the “**PCC Information Circular**” and the “**QCAP Information Circular**”) to provide more detailed information to potential claimants and to answer common questions about the Compensation Plans. These documents will be accessible on the claims administration website and will be disseminated to individuals who have requested information updates, as detailed below.

(iii) *Phased Implementation and Evolution of the Global Notice Plan*

46. In my experience, when designing notice programs for large-scale, longer-term claims processes, it is advisable that advertising be staggered over time, rather than implemented all at once.
47. Accordingly, the dissemination of the First Notice, related materials and any subsequent notices will proceed in waves, or “flights,” throughout the duration of both Claims Processes.

48. This allows messaging to remain visible and relevant throughout the life of the Compensation Plans, rather than concentrating all communication at the outset or immediately prior to the deadlines. Repeated exposure over time helps to reinforce the message and ensures that potential claimants or their family members or heirs are reminded of the Claims Processes at multiple points via multiple sources.
49. For example, as set out in the Global Notice Plan, banner ads will run in several flights throughout the two-year Global Notice Plan including beginning shortly after the First Notice Date and also immediately prior to the Claims Deadlines, as well as at several points in between. This will provide repeated exposure at different times throughout the Claims Processes and will thus help maintain public awareness and ensure potential claimants are reminded of the opportunity to submit claims.
50. The content and timing of the notices is also expected to evolve over the course of the Claims Processes. During the initial 12 months, the notices will address both PCC and QCAP Claimants. Prior to the *Blais* Claim Deadline, the notices will include targeted calls to action encouraging QCAP Claimants to submit their claims. After the *Blais* Claims Deadline has passed, messaging will shift to focus exclusively on the PCC Compensation Plan. As the PCC Claims Submission Deadline approaches, notices will emphasize the time remaining for submitting a claim.
51. In my experience, timely and direct calls to action are desirable in order to prompt claimants to act before final claim deadlines.
52. As noted above, phased notice also allows Epiq to monitor response patterns, such as spikes in website traffic, calls to the Official Agents (as defined below), or claim submission data,

and adjust the Global Notice Plan as needed. This increases the effectiveness of the Global Notice Plan and ensures that resources are being used efficiently to reach the intended audiences.

53. This staggered timing and evolution of notice content reflects best practices in large-scale notice programs involving extended claims processes and deadlines.
54. The Global Notice Plan is comprehensive, flexible and consistent with best practices in legal notice. It is national in scope and diverse in the different avenues it employs. It is designed to reach the intended audience through both traditional and digital means. I believe it is likely to be effective in notifying prospective claimants of the Claims Processes under both Compensation Plans.

(iv) Direct Communication

55. In addition to the foregoing paid media notice campaign, for individuals who have reached out to the Claims Administrator and/or PCC Agent or QCAP Agent expressing interest in the Compensation Plans, the Claims Administrator will send direct communications by email, or by postal mail or courier, depending on the individual's preference.
56. The Claims Administrator will send direct communications to individuals who registered with the PCC Agent prior to the commencement of the PCC Claim submission period and who requested notifications about the PCC Claims Process. In this regard, I am informed by Brenda Weiss, Senior Director of Client Services at Epiq that, as of July 31, 2025, Epiq has recorded 27,746 registrations with the PCC Agent inclusive of requests to be provided with updates regarding the PCC Claims Process.

57. Similarly, individuals previously registered with the QCAP Agent will be provided with direct communications from the QCAP Agent and/or the Claims Administrator. In this regard, I am informed by Tina Silverstein of Fishman Flanz Meland Paquin LLP on behalf of Quebec Class Counsel that Proactio has approximately 68,378 registrations in its database as of June 26, 2025.
58. To the extent practical, direct notification will generally be provided via email initially. For individuals who request printed materials or for whom the email notification bounces as undeliverable, the Claims Administrator will provide printed information packages by postal mail or courier. These packages will include the First Notice, the applicable Information Circular, the applicable Claim Form, and a pre-addressed 9" x 12" return envelope to facilitate submission of the Claim Form and supporting documents.

E. The Combined First Notice

59. As part of its mandate to design the Global Notice Plan, Epiq was tasked with developing the First Notice pursuant to Section 20.2 and Appendix A of the PCC Compensation Plan and Section 19.2 and Appendix A of the Quebec Administration Plan. For the same reasons as it determined that the combined Global Notice Plan was preferable, Epiq designed a single combined First Notice (the "**First Notice**"), a copy of which is attached to the Global Notice Plan as Attachment "1".
60. In designing the First Notice, Epiq sought to provide a clear and concise communication that would capture the attention of prospective claimants and direct them to reliable sources of information and assistance.

61. The First Notice is written in plain language. It clearly outlines that there are two distinct but related Compensation Plans and includes key information about each Compensation Plan.
62. The First Notice also includes a Quick Response code (“**QR Code**”), a machine-readable barcode that, when scanned using the camera function on a smartphone or other mobile device, instantly directs the user to a designated website. In this case, it directs the user to the official Tobacco Claims Canada Claims Administration website: www.TobaccoClaimsCanada.ca. This technology facilitates fast and easy access to more detailed information, online tools such as the eligibility questionnaire, and contact information for the PCC Agent and the QCAP Agent, Proactio (the “**Official Agents**”).
63. The First Notice also clearly advises claimants that they “do not need a lawyer” to submit a claim. This messaging is particularly important, as the Official Agents are available to provide free assistance to claimants. The goal is to encourage claimants to seek support directly through these Official Agents.
64. The First Notice also features the official branding of the Tobacco Claims Canada Claims Administration. This maroon logo will be used consistently on communications from the Claims Administrator and is also featured throughout the Tobacco Claims Canada website. The purpose of this consistent branding is to signal the legitimacy of the communication, reduce confusion, and help recipients distinguish official notices from other potentially misleading or unofficial materials.

65. The length and format of the First Notice is tailored for print advertising. It is short enough to be legibly printed in as small as a 1/4-page newspaper ad while still conveying all essential information.
66. The First Notice, and any subsequent iterations of the notice, will be published and disseminated by the Claims Administrator in both English and French, and in any other languages being used by the media outlets selected for notice dissemination.
67. The form and content of the First Notice is clear and appropriately tailored to the intended audience. It provides the information claimants need regarding how to assess their eligibility for compensation and directs them to reliable sources of help.

F. Approval of Global Notice Plan Attachments and Amendments to Forms

68. The Global Notice Plan attaches a number of documents, including the combined First Notice, Claim Forms, the PCC Information Circular and the QCAP Information Circular, as well as sample notice materials.
69. The Claim Forms have been updated from the forms appended to the PCC Compensation Plan and Quebec Administration Plan. In particular:
 - (a) Epiq made certain changes in an effort to achieve greater harmonization between the PCC Claims Process and the *Blais* Claims Process and reduce confusion, as it was mandated to do pursuant to Section 41.1 of the PCC Compensation Plan and 42.1 of the Quebec Administration Plan. These included eliminating the PCC Legal Representative Claim Form in favour of a single PCC Claim Form, using the common term “Tobacco-Victims” across both the PCC and *Blais* Claims Processes,

and harmonizing the description of the medical records to be provided as proof of a Compensable Disease.

- (b) Certain other updates were made to reflect the mechanism through which medical files from the Ministry of Health and Social Services of Quebec (“**MSSS**”) and Régie de l’assurance maladie du Québec (“**RAMQ**”) will be obtained by the Claims Administrator. In the *Blais* Claim Forms, it was necessary to adjust the language of the authorization provided by claimants to reflect the fact that information may be transferred via the PCC Agent or QCAP Agent, in addition to or in place of the MSSS or RAMQ. In the PCC Claim Form, it was desirable to offer claimants from Quebec the option to authorize the Claims Administrator to obtain information from the MSSS and RAMQ databases rather than requiring claimants to provide separate documentation, in light of the granting of the recent order rendered by the Quebec Superior Court on July 21, 2025 (the “**Official Confirmation of Diagnoses Order**”), as more particularly described below. A copy of the Official Confirmation of Diagnoses Order is attached as **Exhibit “B”**.

70. Epiq has also prepared the PCC Information Circular and the QCAP Information Circular, which provide more detailed information about the two Compensation Plans. These documents incorporate the relevant information that is contained in the updated Claim Forms.

71. The Global Notice Plan also attaches other materials, such as a proposed 30-second video/audio script for broadcast television and radio advertisements, sample banner and

social media notices, and a draft news release to be issued nationwide via Canadian Newswire to general media (print, broadcast and digital) outlets.

72. In addition to the materials appended to the Global Notice Plan, Epiq has also made certain updates and modifications to other forms and processes referenced in the Compensation Plans.
73. First, as part of the effort to harmonize the PCC Claims Process and *Blais* Claims Process, Epiq intends to send a Notice of Incomplete PCC Claim to PCC Claimants who provide insufficient information. A Notice of Incomplete *Blais* Claim for QCAP Claimants is attached as Appendix “K” to the Quebec Administration Plan and the Notice of Incomplete PCC Claim will be in a substantially similar form. The Notice of Incomplete PCC Claim is attached as **Exhibit “C”** (the “**PCC Notice of Incomplete Claim**”).
74. Second, given the relief provided in the Official Confirmation of Diagnoses Order and again as part of the effort to harmonize the PCC Claims Process and *Blais* Claims Process, Epiq intends to send a Notice to Provide Alternative Proof to those PCC Claimants diagnosed in Quebec who choose to authorize Epiq to obtain information from MSSS and RAMQ, but whose information cannot be verified and are required to submit a different form of proof of a Compensable Disease in order to be eligible for compensation. The Notice to Provide Alternative Proof is attached as **Exhibit “D”** (the “**PCC Notice to Provide Alternative Proof**”).
75. Each of these documents, including any updates from the versions originally included within the Compensation Plans, is designed to better promote and achieve the objectives of the Compensation Plans and the Global Notice Plan.

76. Finally, with respect to the checklists appended to the Compensation Plans, these will be used as directory guides prepared for the convenience of and to assist Epiq in its capacity as Claims Administrator in the electronic claims review and administration system used by it as part of the administration of the Compensation Plans, subject to the amendments and additions described in this section.

III. GLOBAL CLAIMS ADMINISTRATION COSTS FRAMEWORK

77. In order to provide for a single, comprehensive overview of projected costs associated with all aspects of Epiq's mandate, including both in its work as Claims Administrator and as PCC Agent, Epiq has prepared the Global Claims Administration Costs Framework, a copy of which is attached hereto as **Exhibit "E"**.
78. The Global Claims Administration Costs Framework includes three Views of the same underlying figures: View 1: Projected Costs by Court Appointment, Category and Year; View 2: Projected Costs by Category, Contract Line Item and Year; and, View 3: Projected Costs by Category, Contract Line Item and Court Appointment. Because of the multiple dimensions of this retention (five Court appointments, four years, eight categories and 65 contract line items), these various Views provide different ways to understand the figures. The total of estimated Costs is the same in each View.
79. The Global Claims Administration Costs Framework is prepared as a reasonable projection of costs, but the actual costs incurred may vary from what is set out therein depending on various factors, the impact of which can only be estimated at this time. Flexibility is needed to allow Epiq to adjust both in the execution of the Global Notice Plan and in its administration of the Claims Processes, depending on how matters progress.

80. With respect to costs attributable to the PCC Notice Plan and *Blais* Notice Plan, the Global Claims Administration Costs Framework has been divided between the two Notice Plans by considering costs attributable to: (i) a Quebec-only print and digital media campaign for the first 12 months (the “**Quebec Program**”); and (ii) a Canada-wide campaign (including national television, radio and print publications) for the same 12-month period (the “**National Program**”) as well as a national campaign, including Quebec, covering months 12 to 24, which corresponds with the final 12 months of the PCC Claims Process (the “**Second Phase National Program**”).
81. In allocating costs between the PCC Notice Plan and *Blais* Notice Plan respectively, Epiq had regard to the fact the PCC Compensation Plan is applicable to all eligible Canadians including those residing in Quebec, and it has been estimated that approximately one in four persons eligible for compensation under the PCC Compensation Plan are or were residents of Quebec. The entirety of the *Blais* Notice Plan’s target demographic is therefore included in the broader PCC Notice Plan’s target demographic. Consequently, the costs allocated to the *Blais* Notice Plan consist of costs relating to: (a) French language notices placed in Quebec editions of print publications prior to the *Blais* Claims Application Deadline; (b) digital banner and search placements in French to appear in Quebec prior to the *Blais* Claims Application Deadline, (c) preparation of the QCAP Information Circular package including the associated *Blais* Claim Forms and sub-forms; and (d) dissemination of the QCAP Information Circular packages via postal mail and/or email. Otherwise, costs for all notice-related activities have been allocated to the PCC Notice Plan.

82. Since the *Blais* Claim Deadline is one year prior to the PCC Claims Deadline, the Second Phase National Program is attributed to the PCC Compensation Plan only for cost allocation purposes and will run from months 12 to 24, including in Quebec.
83. Utilizing the allocation methodology described in the two prior paragraphs, the Global Claims Administration Costs Framework allocates \$1,277,229 to the Quebec Program attributed to the *Blais* Notice Plan and \$6,948,180 to the National Program and Second Phase National Program attributed to the PCC Notice Plan.
84. The Global Claims Administration Costs Framework and Global Notice Plan allow for real-time adjustments over the course of the notice campaign. As discussed above, this flexibility is to allow Epiq to consider data and claimant behavior during the administration of the Claims Processes.
85. For example, if data during the Claims Processes indicates that claims volumes or web traffic are lagging in a particular geography or among a certain demographic, Epiq may modify media choices to increase outreach in those areas.
86. Similarly, should a new platform or effective communication channel emerge over the 24-month period, this flexibility allows Epiq to make use of that platform/channel.
87. In addition to costs attributable to the PCC Notice Plan and *Blais* Notice Plan, the Global Claims Administration Costs Framework also includes projected costs relating to the entire claims administration process. With respect to these aspects of the Global Claims Administration Costs Framework, they provide the structure for the future budgeting

processes set forth at paragraph 100 below, but Epiq does not seek approval of such amounts at this time.

88. The foundation for the Claims Processes is the website (www.TobaccoClaimsCanada.ca) where potential PCC and QCAP claimants can:
 - (a) access information regarding the Compensation Plans;
 - (b) submit claims;
 - (c) respond to Notices from the Claims Administrator; and
 - (d) track the status of a submitted claim.
89. The website will also direct claimants to the PCC Agent or QCAP Agent for assistance, provide answers to frequently asked questions, provide an eligibility questionnaire to help potential claimants assess whether they are eligible to participate in either Compensation Plan, and host instructional and informational videos to further assist claimants.
90. Epiq has developed a claims processing program, using Epiq's proprietary Facilitator platform, to ensure claims are adjudicated in a timely, consistent and accurate manner.
91. For claims that are submitted by mail, fax or email, each claim package will be scanned into a PDF record, following which Epiq's data entry staff will record the claim form responses in Facilitator.
92. All claims will then automatically move into an Initial Eligibility claims processing queue for review by Epiq staff. If the reviewer is uncertain as to how to answer a particular review question, the claim will be escalated to a supervisor for further review and resolution.

93. With respect to diagnostic documentation, the initial reviewers will confirm that the documentation provided is of an acceptable type for the claimed diagnosis. If the diagnosis is not clear from the documentation, or the reviewer is not sure whether the documentation is of an acceptable type, the reviewer will escalate the matter for further review by Epiq's Medical Record review team, which will be staffed by personnel with medical backgrounds (e.g., Nurse Reviewers) and who have received specialized training on what criteria must be present to validate the diagnosis in accordance with the Compensation Plans.
94. Claims with documentation of a legal representative and/or a deceased Tobacco-Victim will be reviewed by staff with specialized training. For the substantive assessment of legal documents, each claim will be routed to the Legal Document review team, whose personnel will have the appropriate legal experience and will include project lawyers. In addition, Epiq has retained counsel specializing in estate and succession issues to assist, including by providing a further layer of review through escalation protocols, as needed.
95. Once each type of eligibility review is completed for a particular claim, the claim will move to Quality Assurance review. Quality Assurance reviewers will validate all adjudication decisions made by the initial reviewers.
96. Assembling the projected costs for the entire claims administration process involved the consideration of all of these steps and dozens of variables spread out over a four-year period. By way of example, the variables include: the number of potentially eligible persons; the claim submission rate; the ratio between paper and electronic claim submission; the diseases claimed; the proportion of claims for which sufficient diagnostic documentation can be obtained from the MSSS and RAMQ databases; the types of medical

documentation submitted; the volume of medical documentation submitted per claim (e.g., the average number of pages of clinical records submitted); the proportion of claimants that are deceased; the proportion of estate claims; the proportion of claims by legal representatives, liquidators, estates and heirs; the number of calls and emails received requesting assistance; the average number of interactions with any given claimant; the average amount of time spent speaking with a caller or responding to a correspondent; the number of persons who request commissioning assistance from the PCC Agent; the proportion of claimants sent a Notice to Provide Alternative Proof; the proportion of claims that are incomplete; the proportion of claims approved; the proportion of claims rejected; and the proportion of the rejected claims that request a review by the Review Officer.

97. The timing and variability of claim interaction activity will also have an effect on costs. Ideally, claim interaction activity would occur on a consistent basis throughout the Compensation Plans' administration. This would allow Epiq to perform its work using a relatively small and tenured team. However, if volumes go up and down frequently and unpredictably, then Epiq will work to manage efficiency, including, where appropriate, by increasing staffing upward or downward in relation to spikes in activity.
98. The variable that has the greatest potential impact is the number of phone calls and emails received. While the eligible PCC Claimant population has been estimated at 186,003 and the eligible QCAP Claimant population at 99,957, the number of Canadians who smoked regularly through 1998 is many times larger. Statistics Canada indicates that there were 6,739,846 smokers in Canada in 1996/97.⁴ This suggests that, for each smoker,

⁴ Statistics Canada. [Table 13-10-0068-01 Smokers in 1996/97 and their smoking status in 1998/99, by age group and sex, household population aged 12 and over, Canada and provinces.](#)

approximately 1 in 24 (4.2%) would be eligible to submit a PCC or QCAP claim. The current Framework projection contemplates 145,842 phone calls and emails with relatively modest peaks and valleys related to the Global Notice Plan paid media effort over a four-year period. However, the actual volumes and arrival patterns could vary significantly. It is expected that many callers will be responding to a 30-second radio or television spot which will have provided only a high-level summary of eligibility requirements. The estimated costs to respond to such phone calls and emails, as set out in the Global Claims Administration Costs Framework, are the single largest cost category, totaling \$18,072,014. However, the actual figures could be substantially lower or higher depending on the interaction volumes, types and arrival patterns.

99. Epiq believes that the Global Claims Administration Costs Framework provides a considered and reasonable projection of estimated activity levels, interaction attributes and resulting costs of administering the Claims Processes.
100. In addition, after an initial three calendar month period following the Plan Implementation Date (the “**Weekly Reporting Period**”), the proposed Order provides that Epiq will deliver annual budgets as follows, which shall be submitted to the CCAA Court and the Quebec Superior Court for joint approval:
 - (a) within 15 days following the end of the Weekly Reporting Period, the Claims Administrator shall deliver the First Annual Global Claims Administration Costs Budget, which is an estimated forecast for the claims administration of the PCC Compensation Plan and the Quebec Administration Plan that (i) is consistent in structure with the Global Claims Administration Costs Framework; (ii) include

estimates in respect of (1) professional fees, costs and expenses of all legal or other advisors to Epiq, and (2) the applicable taxes, fees, duties or charges owed to a Governmental Authority, whether incurred by Epiq, its legal or other advisors, and/or its providers of associated services; (iii) is informed by the Weekly Reports and (iv) covers the next twelve calendar month period commencing on the end of the Weekly Reporting Period; and

- (b) for each subsequent twelve calendar month period until the claims administration is complete, a Subsequent Annual Global Claims Administration Cost Budget, which is a further estimated forecast for the claims administration of the PCC Compensation Plan and the Quebec Administration Plan for the next twelve calendar month period.

101. The proposed Order also provides that Epiq's Costs shall not exceed the total amount of the First Annual Global Claims Administration Costs Budget or any applicable Subsequent Annual Global Claims Administration Cost Budget (collectively, the "**Costs Budgets**") by more than 10% of the total amount up to and including such year, without prior approval of the CCAA Plan Administrators and the CCAA Court and Quebec Superior Court on motions brought by Epiq.
102. In my opinion, the costs detailed in the Global Claims Administration Costs Framework, including specifically the Costs set out with respect to the Global Notice Plan, are proportionate to the national scale, scope, and duration of the Claims Processes. The Global Claims Administration Costs Framework provides a reasonable projection of Epiq's

anticipated costs and the progress of administration of the Claims Processes, subject to factors and changes that cannot be predicted with certainty.

103. The proposed Order provides that Epiq shall provide to the CCAA Plan Administrators, with a copy to the Tobacco Companies, Court-Appointed Mediator, Administrative Coordinator, PCC Representative Counsel, and Quebec Class Counsel, on a regular basis, detailed reporting, to be delivered on a weekly basis during the first few months of the Claims Process and on a monthly basis thereafter. These weekly and monthly reports are for information purposes of the stakeholders and matters set forth therein can be updated in connection with the delivery of Epiq's accounts.
104. The CCAA Plan Administrators shall file copies of all weekly and monthly reports with the CCAA Court.
105. The reporting obligations set forth in the proposed Order are in addition to, and do not replace, any of the reporting obligations of the Claims Administrator set forth in the Compensation Plans.

IV. RELATED UPDATES AND MATTERS

A. Payment of Epiq's Costs

106. I am advised by Epiq's counsel, Goodmans LLP, that the Sanction Orders do not expressly set out the process and terms for payment of Epiq's costs.
107. Epiq requires certainty that its invoiced costs, including those of the legal and other advisors it retains, will be paid in the manner contemplated by the proposed Order. The

proposed Order provides for a 30-day period in which Epiq's submitted invoices will be reviewed and paid.

108. Epiq also requires certainty that it may, in its discretion, retain any legal or other advisors, to advise and assist it in carrying out its respective duties as Claims Administrator and PCC Agent in relation to the PCC Compensation Plan and the Quebec Administration Plan, as applicable, as long as they are contemplated by the Global Claims Administration Costs Framework.

B. Protections for Stakeholders

109. I am advised by Epiq's counsel, Goodmans LLP, that PCC Representative Counsel requires certain protections in respect of acts or omissions of Epiq in its capacity as PCC Agent.
110. I am further advised by Goodmans LLP that the Court-Appointed Mediator, the CCAA Plan Administrators, and the Administrative Coordinator require similar protections in respect of acts or omissions of Epiq in its capacities of either PCC Agent or Claims Administrator.
111. Epiq is independent and neutral of all such parties and acts on its own behalf, as is required pursuant to the Compensation Plans.
112. I am advised by Epiq's counsel, Goodmans LLP, that the CCAA Plan Administrators require the ability to seek Court approval to terminate the engagement of Epiq as Claims Administrator and/or PCC Agent, on notice to Epiq.
113. Epiq reserves its rights to oppose any such motion or relief in Court. In the event the CCAA Plan Administrators were to seek to terminate Epiq's engagement pursuant to this term of

the Proposed Order, Epiq would expect to seek appropriate terms for the termination to ensure its rights and interests are protected and outstanding Costs are paid.

C. Confidentiality and Information Management Obligations

114. In addition to the various matters set out above, I am advised by Epiq's counsel, Goodmans LLP, that the CCAA Plan Administrators have requested provisions in the proposed Order specifically confirming the obligations of the Claims Administrator and the Official Agents to comply with their respective duties and responsibilities relating to confidentiality and information management as set forth in the PCC Compensation Plan, the Quebec Administration Plan, and the Official Confirmation of Diagnoses Order.

V. CONCLUSION

115. Epiq seeks the relief in the proposed Order to facilitate the administration of the Claims Processes in an effective and cost-efficient manner consistent with the purpose and structure of the Compensation Plans.

AFFIRMED remotely by Michael O'Connor stated as being located in City of Washington, in the District of Columbia, before me at the City of Toronto, in the Province of Ontario on the 22 day of August, 2025.

Sarah Stothart

Signature of Authority



Michael O'Connor

A

This is Exhibit “A” referred to in the Affidavit of Michael O’Connor, sworn before me this 22nd day of August, 2025.

Sarah Stothart

A Commissioner for Taking Affidavits, etc.



EXHIBIT 1

Notice Plan

This Notice Plan describes the Claims Administrator’s plan for disseminating communication regarding the Compensation Plans to prospective Compensation Plan claimants starting on the date on which PCC and QCAP compensation claims may first be submitted to the Claims Administrator and ending on the respective claim application deadlines. The Notice Plan shall only commence following the CCAA Plans becoming effective.

Court Ordered Requirements

The PCC Compensation Plan and the Quebec Administration Plan, which were approved by the Sanction Orders issued by the CCAA Court on March 6, 2025, include the following provisions:

PCC COMPENSATION PLAN	QUEBEC ADMINISTRATION PLAN
19.1 The Claims Administrator will design the PCC Notice Plan which must effectively reach prospective PCC-Claimants and capture their attention with notices communicated in clear, concise, plain language so that they fully understand their rights and options (“PCC Notices”). The PCC Notice Plan may include communications in newspapers, other print media, television, radio, social media, other digital media and direct communications where appropriate in order to reach as many prospective PCC-Claimants across Canada as possible. The PCC Notice Plan shall be subject to CCAA Court approval. 19.2 The Claims Administrator shall implement and manage the PCC Notice Plan pursuant to which prospective PCC-Claimants will be informed about the PCC Compensation Plan and be provided with ongoing notice throughout the PCC Claims Submission Period.	18.1 The Claims Administrator will design the <i>Blais</i> Notice Plan which must effectively reach prospective Tobacco-Victim Claimants and Succession Claimants and capture their attention with notices communicated in clear, concise, plain language so that they fully understand their rights and options (“Blais Notices”). The <i>Blais</i> Notice Plan may include communications in newspapers, other print media, television, radio, social media, other digital media and direct communications where appropriate in order to reach as many prospective Tobacco-Victim Claimants and Succession Claimants in Quebec as possible. The <i>Blais</i> Notice Plan shall be subject to CCAA Court approval. 18.2 The Claims Administrator shall implement and manage the <i>Blais</i> Notice Plan pursuant to which prospective Tobacco-Victim Claimants and Succession Claimants will be informed about the Quebec Administration Plan and be provided with ongoing notice throughout the <i>Blais</i> Claims Submission Period.

The Claims Administrator has designed this Notice Plan in accordance with the foregoing provisions. Following consultation with each of the Tobacco Companies, the Administrative Coordinator, the PCC Representative Counsel (for amendments relating to the PCC Compensation Plan) and the Quebec Class Counsel (for amendments relating to the Quebec Administration Plan), the Claims Administrator shall have the discretion to amend or adjust the steps set out in this Notice Plan, or to adopt such other steps that, in its reasonable judgment, are expected to better

achieve the purpose of the Notice Plan, as described in the PCC Compensation Plan and the Quebec Administration Plan.

Notice Plan Objectives

The Notice Plan was designed by the Claims Administrator with the goal of providing effective notice to prospective PCC-Claimants and prospective Tobacco-Victim Claimants and Succession Claimants and capturing their attention. In designing the Notice Plan, the Claims Administrator has taken into account the demographics of the target audiences described below, and the manner in which the target audiences consume media.

The Notice Plan is intended to provide effective notice to potential claimants, whether they live in large urban centres, small towns, rural or remote areas, and it reflects the Claims Administrator's expert opinion regarding the best methods of achieving that goal.

The Notice Plan involves a mix of direct communication via email and postal mail, as well as advertisements in newspapers, magazines, television, radio, streaming audio/video services, Internet banners, social media placements, sponsored search listings and an informational release. The Notice Plan also incorporates a specific Indigenous focus via publications, television, radio and digital properties serving these communities.

It is estimated that implementation of the Notice Plan will involve at least 17,000 paid media spots and more than 880 million internet impressions over the course of a two-year campaign. These anticipated figures do not include additional notice appearances resulting from the Public Service Announcement (PSA) campaign; sponsored listings on *Google*, *Bing* and other search engines; and any potential news articles or postings of the Notice resulting from the issuance of the information release, as each described herein.

The Claims Administrator estimates that the Notice Plan will reach more than 90% of the target audience, with an average frequency of exposure of five+ times.

Notice Plan Timeline

The Notice Plan will be implemented in phases over a two-year period. This phased approach is expected to be more effective in that it:

- Allows messaging to be visible through the life of the Notice Plan, ensures consistent messaging over the course of the Plan, and minimizes the risk of overexposure which can lead potential claimants to ignore the messaging being conveyed;
- Builds frequency of views, with potential claimants being repeatedly exposed to the Notice over a period of weeks and months;
- Provides reminder messaging for those who may have seen the Notice but have subsequently forgotten it;
- Allows the Notice content to evolve as needed to account for approaching Claim deadlines and other key touchpoints; and
- Provides the opportunity to adjust the placement of advertisements or the type of communication being used depending on response rates.

The timeline below shows the phases of advertising proposed for the first and second year of the Notice Plan. The specific timing and the choice of media will be evaluated on a rolling basis and

will be adjusted if needed in the discretion of the Claims Administrator, e.g., to account for seasonal or societal events such as December holidays or election campaigns, or in reaction to the nature, number and timing of responses received from potential claimants across the country. The proposed advertising phases aim to have continual and even coverage over the course of the Notice Plan while also ensuring a final push leading up to the Claim deadlines for both the QCAP and PCC Compensation Plans.

The estimates provided for in the Notice Plan relating to the paid media program are premised on current expectations of the Claims Administrator for the entire Notice Plan program. The implementation of the Notice Plan will provide the opportunity to review actual future results on a month to month basis, including the analysis and review of claims received and whether certain geographic areas are underrepresented or overrepresented and need higher or lower levels of paid media coverage. In the event the projected claims response rate exceeds expectations as the Notice Plan progresses, less paid media may be appropriate. Specific media choices will also vary and be driven based on the data gathered from time to time. The Notice Plan may be modified from time to time to address such matters.

Notice Plan Timeline												
Year 1 (PCC & QCAP)												
Months 1-7 (Notice Launch)							Months 8-10 (PCC Continuation & QCAP Deadline)					
Month 1	Month 2	Month 3	Month 4	Month 5	Month 6	Month 7	Month 8	Month 9	Month 10	Month 11	Month 12	
Sponsored Search	Search Ads						Search Ads					
Digital Banners	Banner Ads				Banner Ads		Banner Ads					Banner Ads
Digital Audio/Video		Digital Audio/Video			Digital Audio/Video		Digital Audio/Video					Digital A/V
General Newspapers (PCC & QCAP)		Gen. Newspapers					Gen. Newspapers					
Indigenous Print		Indigenous Print										
National Magazines		National Magazines										
Broadcast/Cable Television					TV			TV				TV
Indigenous TV (APTN & CBC North)					TV			TV				TV
Broadcast/Major Metro Radio					Radio			Radio				Radio
Indigenous Radio					Radio			Radio				Radio

Year 2 (PCC)												
Months 13-17 (PCC Continuation Plan)						Months 19-22 (PCC Deadline Reminder)						
Month 13	Month 14	Month 15	Month 16	Month 17	Month 18	Month 19	Month 20	Month 21	Month 22	Month 23	Month 24	
Sponsored Search	Search Ads					Search Ads						
Digital Banners	Banner Ads				Banner Ads			Banner Ads				Banner Ads
Digital Audio/Video	Digital Audio/Video				Digital Audio/Video			Digital A/V				Digital A/V
General Newspapers (PCC Only)	Gen. Newspapers						Gen. News					
Indigenous Print	Indigenous Print											
National Magazines	National Magazines											
Broadcast/Cable Television		TV					TV					TV
Indigenous TV (APTN & CBC North)		TV					TV					TV
Broadcast/Major Metro Radio		Radio					Radio					Radio
Indigenous Radio		Radio					Radio					Radio

Paid Media Target Audiences

The Notice Plan was designed to reach all potential claimants, with a focus on two distinct target audiences: smokers who have been diagnosed with Lung Cancer, Throat Cancer, Emphysema, or COPD (GOLD Grade III or IV); and the estates of smokers who were alive on March 8, 2019, but have since died. The Notice Plan has also been designed to reflect the fact that, in some instances, children or other younger family members may be assisting with the care of a potential claimant and as such, notice should be targeted to these individuals as well.

The Claims Administrator has reviewed and analyzed applicable data from reliable sources regarding the media use of the target audiences. That analysis has informed the preparation of this Notice Plan and includes the following.

Primary Target Audience (Smokers): Potential claimants include individuals who smoked Twelve Pack-Years between 1950 and 1998. Given this range, such persons would now range approximately between ages 50 and 89.

The Claims Administrator considered the demographics and media habits of adults aged 50+. According to Vividata's Study of the Canadian Consumer¹ ("Vividata"), among this group:

- 47% are men;
- 53% are women;
- 19% speak French most often at home;
- 70% watched TV yesterday;
- 82% watched TV last week;
- 57% listen to conventional radio;
- 33% are medium to heavy readers of magazines;
- 70% are medium to heavy users of internet; and
- 51% read through any newspaper in the past week.

The Claims Administrator also considered the demographics and media habits of current smokers to understand the media habits of the primary target audience. While smokers as a group skew more heavily male than all adults age 50+, the data shows that their respective media use does not differ in any significant way.

According to Statista² data, 3.8 million Canadians currently smoke daily or occasionally. Additional data from Vividata indicates that of adults who smoke daily:

- 59% are men;
- 41% are women;
- 17% speak French most often at home;
- 68% watched TV yesterday;
- 84% watched TV last week;
- 46% listen to conventional radio;
- 38% are medium to heavy readers of magazines;
- 74% are medium to heavy users of internet; and
- 49% read through any newspaper in the past week.

The foregoing statistics support a conclusion that the primary target audience (i.e., smokers over the age of 50 who meet the requisite diagnostic criteria) have a strong affinity for TV viewing, listening to conventional radio, using the Internet, and reading newspapers.

Secondary Target Audience (Smokers' Estates): This target audience is anticipated to be demographically diverse. Spouses would likely fall into the older demographic of adults aged 50+ as mentioned above. Children or grandchildren could fall in any age group over the age of 18, although, based on the ages of smokers within the primary target audience, the Claims

¹ Vividata is the leader in Canadian media and consumer research. Vividata's Survey of the Canadian Consumer, the largest syndicated study in Canada, is a leading source for demographics, psychographics, lifestyle, life events, media, purchasing and brand preferences in Canada. As the provider of print and digital audience, Vividata offers trusted, world-class audience metrics. The not-for-profit company has been around for over 40 years and is relied on by leaders in the Canadian media industry.

² Statista, founded in 2007, is a leading provider of worldwide market and consumer data and is trusted by thousands of companies around the world for data. Statista.com consolidates statistical data on over 80,000 topics from more than 22,500 sources and makes it available in German, English, French and Spanish.

Administrator would expect the majority of individuals handling the estates of claimants to be aged 35+.

Combined First Notice Publication Design

Because a reader of the First Notice could be eligible under either the QCAP or PCC Compensation Plan or both, the Claims Administrator has designed a combined First Notice. The proposed combined First Notice is attached hereto as **Attachment A**, and has been prepared in accordance with the guidance set out in the version of the First Notice attached as Appendix “A” to the Quebec Administration Plan and the PCC Compensation Plan.

The combined First Notice features a bold headline to immediately alert even a casual reader who may be affected that they should read the notice. The headline speaks directly to the potential claimant.

The design of the combined First Notice alerts readers to its legal significance and credibility, including through the use of a Tobacco Claims Canada logo that is prominently placed at the top of the Notice. This design ensures that readers know the communication contains important information and is not commercial advertising. For publications that accept colour placements, the Tobacco Claims Canada logo will appear in the selected maroon shade to further garner reader attention.

Plain language makes communications easier to understand and is expressly mandated by the provisions of the PCC Compensation Plan and the Quebec Administration Plan. The combined First Notice concisely and clearly presents the information in plain, easily understandable language. All critical information about who could be eligible under the Compensation Plans and the potential benefits available is included.

The combined First Notice encourages engagement by providing simple and convenient mechanisms for the reader to obtain additional information. Toll-free numbers for the PCC Agent and QCAP Agent are provided, as is the website address www.TobaccoClaimsCanada.ca along with a Quick Response Code (QR Code) to allow the reader to easily access the website via a smartphone or tablet device.

PCC and QCAP Information Circulars

For those readers who want more information, the PCC Information Circular and QCAP Information Circular provide detailed information about the respective Compensation Plans approved by the Court. These documents will be available on the Claims Administration website and can be sent to interested persons by postal mail or courier upon request.

Each Information Circular provides substantial information to potential and actual claimants. In particular, the Information Circulars:

- (a) provide notification of the CCAA Court’s approval of the Compensation Plan;
- (b) advise of the commencement of the Claims Submission Period;
- (c) provide details about the Claims Process; and
- (d) advise of the Claims Application Deadline to submit a completed Claim Package to the Claims Administrator.

The content of the Information Circulars is organized into logical sections for easier comprehension by readers, and a question-and-answer format increases accessibility.

The majority of the Information Circular questions have short responses comprised of a single paragraph. This allows the reader easily to find information that is relevant to their particular circumstances. For example, the questions cover topics such as:

- what COPD diagnoses are eligible under the Compensation Plan;
- how to proceed if the Tobacco-Victim is deceased; and
- how to proceed if the Tobacco-Victim is incapacitated.

The Information Circulars also explain the type of assistance that is available from the PCC or QCAP Agent for claim preparation and submission.

The proposed PCC Information Circular is attached hereto as **Attachment B**, the PCC Claim Form as **Attachment C**, the QCAP Information Circular as **Attachment D**, the QCAP Tobacco-Victim Claim Form as **Attachment E**, and the QCAP Succession Claim Form and four (4) sub-forms as **Attachment F**.

Direct Communication

For those persons who previously registered for more information about the Compensation Plans with either the PCC Agent and/or QCAP Agent, direct communication will be provided digitally via email or in printed format via postal mail or courier, (a) at the commencement of the PCC and QCAP claims submission periods, and (b) in ongoing fashion until the respective PCC and QCAP claims deadlines transpire.

Email is the preferred medium for direct communication because it is delivered almost instantly and allows the recipient to click hyperlinks to directly access the Tobacco Claims Canada website. The email will be a short message that the claims period has commenced and will provide links to the Combined First Notice along with the PCC or QCAP Information Circular and PCC or QCAP Claims Form(s) as applicable in PDF format.

For registrations in the records of the PCC Agent, such direct email communications are to be sent by the Claims Administrator.

Specifically for registrations in the records of Quebec Class Counsel and/or Proactio as the QCAP Agent, due to privacy considerations and to prevent confusion and/or apprehension as stipulated by Quebec Class Counsel, such direct email communications are to be sent by Proactio as the QCAP Agent in lieu of the Claims Administrator.

For those who request a printed package or for whom the direct email communication bounces as undeliverable, the Claims Administrator will send the combined First Notice, and the applicable Information Circular and Claim Form by regular mail. In addition to the Claim Form, a pre-addressed return envelope will be provided.

During the course of the Claims Submission Periods, the Claims Administrator will confer with the Administrative Coordinator and potentially other stakeholders about whether providing the applicable Information Circular and Claim Form package via postal mail or courier can serve as a reminder for those who previously registered for more information and have not yet submitted a claim to the Claims Administrator. Such a printed reminder is valuable because emails can be: (a) blocked as spam by an internet service provider and/or email application; (b) overlooked because of the volume of email received; or (c) inadvertently deleted. A printed package provides a

substantial notification to a potential claimant of the opportunity to assert their rights under the Compensation Plans prior to the applicable Claim Submission Deadline.

There will be six versions of the printed notice packets: (i) PCC Information Package English; (ii) PCC Information Package French; (iii) QCAP Living Tobacco Victim Information Package French; (iv) QCAP Living Tobacco Victim Information Package English (v) QCAP Deceased Tobacco Victim Information Package French, and (vi) QCAP Deceased Tobacco Victim Information Package English. The Information Package will consist of the relevant Information Circular and Claim Form along with a pre-addressed return envelope.

Newspapers

Newspapers have a wide readership among older demographic groups. As noted above, 51% of adults aged 50+ read a newspaper in the prior week. That percentage increases slightly with older groups, with the relevant figures being 53% of adults aged 60+ and 57% of adults aged 70+. This makes newspaper advertisements a promising means to reach the target audience. In order to maximize the reach, advertisements will be placed not only in national newspapers, but also in local newspapers.

At the commencement of the Claims Submission Period, the initial phase of newspaper advertisements will aim to reach all communities across Canada in markets of all sizes. Based on Vividata research, total newspaper readership for adults aged 50+ in the past week is consistently high in all community sizes as detailed in the below chart, with even the smallest of communities still having a total newspaper readership over 40%.

Adults 50+ who have read any newspaper in the past week	
Community Size	Total Newspaper Readership
2+ million	53%
1-2 million	52%
500K - 999,999	51%
100K - 499,999	50%
30K - 99,999	56%
10K - 29,999	46%
1K - 9,999	45%
Under 1K	42%

Following an initial phase of advertisements in Year 1 as set out below, the second phase is expected to focus on major metropolitan markets, in newspapers with the highest circulation and readership. One to three newspapers are expected to be selected in each market to ensure coverage in the most highly populated areas, and where applicable, in both English and French.

Phases of advertisements in Year 2 of the Notice Plan are similarly expected to focus on major metropolitan markets and/or national newspapers, but may be adjusted based on an analysis of claims received, in the discretion of the Claims Administrator.

In total, 100 general circulation newspapers have been selected as part of the Notice Plan's first phase in Year 1 covering all of Canada including Quebec. The second phase in Year 1 is expected to encompass 16 general circulation newspapers. The tables below indicate the name of each publication, its estimated circulation, geography, number of insertions that the notice is expected to run in each paper, the frequency in which the publication is printed, and ad size, as well as whether the Combined First Notice is expected to appear in English or French. The timing of the publications for Year 1 is shown above under the heading "Notice Plan Timeline."

The Claims Administrator proposes to use large ad units (of at least a quarter page) which will permit the use of a larger font size, and the inclusion of the Tobacco Claims Canada logo and QR code.

Flight 1 (Year 1)

General Newspapers - Non Quebec	Estimated Circulation	Geography	Insertions	Frequency	Language	Ad Size B/W
Flight 1 (Year 1)						
<i>Toronto Star</i>	128,200	Ontario	1x Weekday	Daily (Mon-Sun)	English	5.3308" x 13"
<i>National Post</i>	106,933	National	1x Weekday	Daily (Tue-Sat)	English	6.144" x 10.214"
<i>Vancouver Sun</i>	105,847	British Columbia	1x Weekday	Daily (Tue-Sat)	English	6.144" x 10.214"
<i>Winnipeg Free Press</i>	95,482	Manitoba	1x Weekday	Daily (Tue-Sun)	English	5.708" x 13.714"
<i>Vancouver Province</i>	87,757	British Columbia	1x Weekday	Daily (Sun-Fri)	English	6.144" x 10.214"
<i>Calgary Herald</i>	80,138	Alberta	1x Weekday	Daily (Tue-Sat)	English	6.144" x 10.214"
<i>L'Etoile</i>	75,193	New Brunswick	1x Weekly	Weekly (Thu)	French	6.144" x 10.214"
<i>Edmonton Journal</i>	74,192	Alberta	1x Weekday	Daily (Tue-Sat)	English	6.144" x 10.214"
<i>Ottawa Citizen</i>	73,420	Ontario	1x Weekday	Daily (Tue-Sat)	English	6.144" x 10.214"
<i>Globe and Mail</i>	65,749	National	1x Weekday	Mon-Sun	English	5.33" x 13.36"
<i>Halifax Chronicle-Herald</i>	59,336	Nova Scotia	1x Weekday	Daily (Tue-Sat)	English	6.144" x 10.214"
<i>Chatham- Kent This Week</i>	45,928	Ontario	1x Weekly	Weekly (Thu)	English	6.144" x 10.214"
<i>Hamilton Spectator</i>	39,375	Ontario	1x Weekday	Daily (Mon-Sat)	English	5.3308" x 13"
<i>Victoria Times Colonist</i>	38,890	British Columbia	1x Weekday	Daily (Mon-Sun)	English	6.23" x 8.07"
<i>Windsor Star</i>	38,669	Ontario	1x Weekday	Daily (Tue-Sat)	English	6.144" x 10.214"
<i>London Free Press</i>	38,225	Ontario	1x Weekday	Daily (Tue-Sat)	English	6.144" x 10.214"
<i>Kelowna Capital News</i>	30,460	British Columbia	1x Weekday	Weekly (Thu)	English	6.417" x 10.5"
<i>Saskatoon Star Phoenix</i>	30,195	Saskatchewan	1x Weekday	Daily (Tue-Sat)	English	6.144" x 10.214"
<i>Woodstock Oxford Review</i>	29,919	Ontario	1x Weekly	Weekly (Thu)	English	6.144" x 10.214"
<i>Abbotsford News</i>	29,341	British Columbia	1x Weekly	Weekly (Thu)	English	6.417" x 10.5"
<i>Nanaimo Daily Bulletin</i>	29,136	British Columbia	1x Weekday	Weekly (Wed)	English	6.417" x 10.5"
<i>Regina Leader-Post</i>	28,344	Saskatchewan	1x Weekday	Daily (Tue-Sat)	English	6.144" x 10.214"
<i>The Charlottetown Guardian</i>	27,820	Prince Edward Island	1x Weekday	Daily (Tue-Sat)	English	6.144" x 10.214"
<i>Prince Albert Daily Herald</i>	27,525	Saskatchewan	1x Weekday	Daily (Tue-Sat)	English	7" x 10.5"
<i>Kitchener/Waterloo Region Record</i>	24,400	Ontario	1x Weekday	Daily (Mon-Sat)	English	5.3308" x 13"
<i>Chilliwack Progress</i>	24,350	British Columbia	1x Weekly	Weekly (Fri)	English	6.417" x 10.5"
<i>Pembroke Observer</i>	23,899	Ontario	1x Weekly	Weekly (Thu)	English	6.144" x 10.214"
<i>Prince George Citizen</i>	23,000	British Columbia	1x Weekly	Weekly (Thu)	English	6.52" x 10.25"
<i>Vernon Morning Star</i>	22,133	British Columbia	1x Weekly	Weekly (Fri)	English	6.417" x 10.5"
<i>Cape Breton Post</i>	22,012	Nova Scotia	1x Weekday	Daily (Tue-Sat)	English	6.144" x 10.214"
<i>Duncan - Cowichan Valley Citizen</i>	19,797	British Columbia	1x Weekly	Weekly (Wed)	English	6.417" x 10.5"
<i>Penticton Western News</i>	19,482	British Columbia	1x Weekly	Weekly (Wed)	English	6.417" x 10.5"

<i>St. John Telegram Weekly</i>	18,140	Newfoundland & Labrador	1x Weekly	Weekly (Fri)	English	6.144" x 10.214"
<i>Leduc Representative</i>	16,312	Alberta	1x Weekday	Weekly (Fri)	English	6.144" x 10.214"
<i>Timmins Times</i>	16,265	Ontario	1x Weekly	Weekly (Thu)	English	6.144" x 10.214"
<i>Miramichi Leader</i>	16,180	New Brunswick	1x Weekly	Weekly (Thu)	English	6.144" x 10.214"
<i>Parksville Qualicum News</i>	16,013	British Columbia	1x Weekly	Weekly (Wed)	English	6.417" x 10.5"
<i>Lethbridge Herald</i>	15,780	Alberta	1x Weekday	Daily (Tue-Sat)	English	4.95" x 10.5"
<i>Saint John Telegraph-Journal</i>	15,007	New Brunswick	1x Weekday	Daily (Tue-Sat)	English	6.144" x 10.214"
<i>Kingston Whig-Standard</i>	14,569	Ontario	1x Weekday	4x a week	English	6.144" x 10.214"
<i>Campbell River Mirror</i>	13,984	British Columbia	1x Weekly	Weekly (Wed)	English	6.417" x 10.5"
<i>Yorkton Marketplace</i>	13,295	Saskatchewan	1x Weekly	Weekly (Fri)	English	6.5" x 15.868"
<i>Medicine Hat News</i>	12,820	Alberta	1x Weekday	Daily (Tue-Sat)	English	4.95" x 10.5"
<i>Brandon Sun</i>	12,070	Manitoba	1x Weekday	Daily (Tue-Sat)	English	5.708" x 10.257"
<i>Thunder Bay Chronicle-Journal</i>	11,938	Ontario	1x Weekday	Daily (Tue-Sat)	English	4.958" x 10.71"
<i>Fredericton Daily Gleaner</i>	9,861	New Brunswick	1x Weekly	Weekly (Wed)	English	6.144" x 10.214"
<i>Swift Current Southwest Booster</i>	9,500	Saskatchewan	1x Weekly	Weekly (Thu)	English	6.823" x 16"
<i>Port Alberni Valey News</i>	8,942	British Columbia	1x Weekly	Weekly (Wed)	English	6.417" x 10.5"
<i>Le Métropolitain</i>	8,700	Ontario	1x Weekly	Weekly (Thu)	French	8" x 8.75"
<i>Salmon Arm Observer</i>	8,696	British Columbia	1x Weekly	Weekly (Thu)	English	6.417" x 10.5"
<i>Wetaskewin Times</i>	8,530	Alberta	1x Weekly	Weekly (Wed)	English	6.144" x 10.214"
<i>Fort Saskatchewan Record</i>	8,344	Alberta	1x Weekday	Weekly (Thur)	English	6.144" x 10.214"
<i>Portage La Prairie Graphic Leader</i>	8,102	Manitoba	1x Weekly	Weekly (Thu)	English	6.144" x 10.214"
<i>Sudbury Star</i>	7,536	Ontario	1x Weekly	Weekly (Wed)	English	6.144" x 10.214"
<i>Nelson Star</i>	7,415	British Columbia	1x Weekly	Weekly (Thu)	English	6.417" x 10.5"
<i>St. Catherine's Standard</i>	6,600	Ontario	1x Weekday	Daily (Mon-Sat)	English	8.97" x 6.571"
<i>North Bay Nugget</i>	6,311	Ontario	1x Weekly	Weekly (Thu)	English	6.144" x 10.214"
<i>La Liberté</i>	6,000	Manitoba	1x Weekly	Weekly (Wed)	French	6.2249" x 11.0427"
<i>Weyburn This Week</i>	6,000	Saskatchewan	1x Weekly	Weekly (Thu)	English	6.5" x 15.75"
<i>Kenora Miner & News</i>	5,994	Ontario	1x Weekly	Weekly (Thu)	English	6.144" x 10.214"
<i>Peterborough Examiner</i>	5,200	Ontario	1x Weekday	Daily (Mon-Sat)	English	5.3308" x 13"
<i>High River Times</i>	5,194	Alberta	1x Weekly	Weekly (Fri)	English	6.144" x 10.214"
<i>Owen Sound Sun Times</i>	5,179	Ontario	1x Weekly	Weekly (Thu)	English	6.144" x 10.214"
<i>Sylvan Lake News</i>	5,130	Alberta	1x Weekly	Weekly (Thu)	English	6.833" x 10.5"
<i>Red Deer Advocate</i>	4,907	Alberta	1x Weekday	Weekly (Wed)	English	6.833" x 10.5"
<i>Lacombe Express</i>	4,708	Alberta	1x Weekly	Weekly (Thu)	English	6.833" x 10.5"
<i>Niagara Falls Review</i>	4,250	Ontario	1x Weekday	Daily (Mon-Sat)	English	8.97" x 6.571"
<i>Yukon News</i>	4,038	Yukon	1x Weekly	Weekly (Fri)	English	6.833" x 10.5"
<i>Steinbach Carillon</i>	3,896	Manitoba	1x Weekly	Weekly (Thu)	English	5.62" x 14.29"
<i>Prince Rupert Northern View</i>	3,839	British Columbia	1x Weekly	Weekly (Thu)	English	6.417" x 10.5"
<i>Sarnia Observer</i>	3,542	Ontario	1x Weekly	Tues, Thurs, Sat	English	6.144" x 10.214"
<i>Brantford Expositor</i>	3,452	Ontario	1x Weekly	Tues, Thurs, Sat	English	6.144" x 10.214"
<i>Le Voyageur</i>	3,050	Ontario	1x Weekly	Weekly (Wed)	French	6" x 11.625"
<i>Brockville Recorder & Times</i>	3,019	Ontario	1x Weekly	Tues, Thurs, Sat	English	6.144" x 10.214"
<i>Belleville Intelligencer</i>	2,974	Ontario	1x Weekly	Tues, Thurs, Sat	English	6.144" x 10.214"
<i>Cornwall Standard-Freeholder</i>	2,969	Ontario	1x Weekly	Tues, Thurs, Sat	English	6.144" x 10.214"
<i>Sault Ste. Marie Star</i>	2,662	Ontario	1x Weekly	Tues, Thurs, Sat	English	6.144" x 10.214"
<i>Stratford Beacon Herald</i>	1,963	Ontario	1x Weekly	Tues, Thurs, Sat	English	6.144" x 10.214"

<i>Trail Times</i>	1,807	British Columbia	1x Weekly	Weekly (Thu)	English	6.417" x 10.5"
<i>L'Eau Vive</i>	1,337	Saskatchewan	1x Weekly	Bi-Weekly (Thu)	French	5.818" x 10.5"
<i>Cranbrook Townsman</i>	1,254	British Columbia	1x Weekly	Weekly (Tue)	English	6.417" x 10.5"
<i>Elliot Lake Standard</i>	1,131	Ontario	1x Weekly	Weekly (Thu)	English	6.144" x 10.214"
<i>Flin Flon Reminder</i>	1,111	Manitoba	1x Weekly	Weekly (Wed)	English	6.5" x 15.5"
<i>Le Franco</i>	1,047	Alberta	1x Weekly	2nd Thu of Each Month	French	9.71" X 7.75"
General Newspapers - Quebec	Estimated Circulation	Geography	Insertions	Frequency	Language	Ad Size B/W
Flight 1 (Year 1)						
<i>La Presse (digital)</i>	220,000	Quebec	1x Weekday	Mon-Sat	French	Full Screen
<i>Le Journal de Montreal</i>	110,000	Quebec	1x Weekday	Mon-Sun	French	5.04" x 12.57"
<i>Montreal Gazette</i>	74,520	Quebec	1x Weekday	Daily (Tue-Sat)	English	6.144" x 10.214"
<i>Le Journal de Quebec</i>	63,600	Quebec	1x Weekday	Mon-Sun	French	5.04" x 12.57"
<i>Infos Laurentides (St-Jérôme)</i>	53,136	Quebec	1x Weekly	Weekly (Wed)	French	10" x 10.5"
<i>Le Courier Laval</i>	50,000	Quebec	1x Weekly	Weekly (Mon)	French	7.347" x 10.515"
<i>Le Nord Info (Ste-Thérèse)</i>	45,723	Quebec	1x Weekly	Weekly (Wed)	French	10" x 10.5"
<i>L'Éveil</i>	41,472	Quebec	1x Weekly	Weekly (Wed)	French	10" x 10.5"
<i>Journal La Revue</i>	41,387	Quebec	1x Weekly	Weekly (Wed)	French	6.51" x 12.15"
<i>Le Clairon (St-Hyacinthe)</i>	41,319	Quebec	1x Weekly	Weekly (Tue)	French	7.33" x 12.5"
<i>L'Action du Mercredi (Joliette)</i>	35,902	Quebec	1x Weekly	Weekly (Wed)	French	6.51" x 12.15"
<i>Le Courier Du Sud</i>	35,630	Quebec	1x Weekly	Weekly (Tue)	French	7.444" x 10.25"
<i>L'Express de Drummondville</i>	32,500	Quebec	1x Weekly	Weekly (Thu)	French	9.833" x 12.5"
<i>Acadie Nouvelle</i>	21,600	Quebec	1x Weekly	Mon-Sun	French	6.75" x 10.5"
<i>Quebec Chronicle Telegraph</i>	6,500	Quebec	1x Weekly	Weekly (Wed)	English	6.86" x 10.5"
<i>La Sentinelle</i>	2,500	Quebec	1x Weekly	Weekly (Tues)	French	7.347" x 12.5"

Flight 2 (Year 1)

General Newspapers - Non Quebec	Estimated Circulation	Geography	Insertions	Frequency	Language	Ad Size B/W
Flight 2 (Year 1)						
<i>Toronto Star</i>	128,200	Ontario	1x Weekday	Daily (Mon-Sun)	English	5.3308" x 13"
<i>National Post</i>	106,933	National	1x Weekday	Daily (Tue-Sat)	English	6.144" x 10.214"
<i>Vancouver Sun</i>	105,847	British Columbia	1x Weekday	Daily (Tue-Sat)	English	6.144" x 10.214"
<i>Winnipeg Free Press</i>	95,482	Manitoba	1x Weekday	Daily (Tue-Sun)	English	5.708" x 13.714"
<i>Calgary Herald</i>	80,138	Alberta	1x Weekday	Daily (Tue-Sat)	English	6.144" x 10.214"
<i>L'Etoile</i>	75,193	New Brunswick	1x Weekly	Weekly (Thu)	French	6.144" x 10.214"
<i>Edmonton Journal</i>	74,192	Alberta	1x Weekday	Daily (Tue-Sat)	English	6.144" x 10.214"
<i>Ottawa Citizen</i>	73,420	Ontario	1x Weekday	Daily (Tue-Sat)	English	6.144" x 10.214"
<i>Globe and Mail</i>	65,749	National	1x Weekday	Mon-Sun	English	5.33" x 13.36"
<i>Halifax Chronicle-Herald</i>	59,336	Nova Scotia	1x Weekday	Daily (Tue-Sat)	English	6.144" x 10.214"
<i>Saskatoon Star Phoenix</i>	30,195	Saskatchewan	1x Weekday	Daily (Tue-Sat)	English	6.144" x 10.214"
<i>The Charlottetown Guardian</i>	27,820	Prince Edward Island	1x Weekday	Daily (Tue-Sat)	English	6.144" x 10.214"
<i>St. John Telegram Weekly</i>	18,140	Newfoundland & Labrador	1x Weekly	Weekly (Fri)	English	6.144" x 10.214"
General Newspapers - Quebec	Estimated Circulation	Geography	Insertions	Frequency	Language	Ad Size B/W
Flight 2 (Year 1)						
<i>La Presse (digital)</i>	220,000	Quebec	1x Weekday	Mon-Sat	French	Full Screen

<i>Le Journal de Montreal</i>	110,000	Quebec	1x Weekday	Mon-Sun	French	5.04" x 12.57"
<i>Montreal Gazette</i>	74,520	Quebec	1x Weekday	Daily (Tue-Sat)	English	6.144" x 10.214"

In total, the newspapers selected have a circulation over 2.8 million through paid subscriptions and newsstand sales, while the readership (which refers to the number of people who read the newspaper) is expanded by multi-adult households due to multiple readers sharing a single copy, generating an expected total readership of more than 6.2 million. Notices placed in print editions would also run in the newspapers' digital editions (where available). (According to Vividata, 40% of adults aged 50+ have looked at digital newspaper content in the last week.)

Indigenous Newspapers. To reach Indigenous communities, 24 Indigenous newspapers have been selected. Reaching Indigenous populations is particularly important, as Vividata research shows that those who identify as Indigenous or Aboriginal are 28% more likely to smoke cigarettes than the average Canadian.

The following chart shows the name of each Indigenous newspaper, its estimated circulation, geography, number of insertions that the notice is expected to run over the course of the Notice Plan, frequency in which the publication is printed, language, and ad size, as it will appear in Year 1. Where multiple insertions are noted, each insertion would run in a different language.

Indigenous Print - Non Quebec	Estimated Circulation	Geography	Insertions	Frequency	Language	Ad Size B/W
<i>First Nations Voice</i>	47,000	National	1x	6x a Year	English	10.371" x 11.429"
<i>Rural Roots</i>	28,025	Saskatchewan	1x	Weekly (Th)	English	9.45" x 12.543"
<i>Grassroots News</i>	20,000	Manitoba	1x	Bi-Weekly (Wed)	English	10.38" x 10.95"
<i>Turtle Island News</i>	20,000	Ontario	1x	Weekly (Wed)	English	10.25" x 12"
<i>Northern Advocate</i>	14,208	Saskatchewan / Manitoba	1x	Monthly	English	9.45" x 12.543"
<i>Alberta Native News</i>	12,000	Alberta	1x	Monthly	English	9.45" x 14.9"
<i>Pique News</i>	10,000	British Columbia	1x	Weekly (Fr)	English	10" x 12.5"
<i>Two Row Times</i>	10,000	Ontario	1x	Weekly (Wed)	English	10.25" x 13.5"
<i>Le Metropolitain</i>	8,000	Ontario	1x	Weekly (Th)	French	10.5" x 14"
<i>Squamish Chief</i>	6,000	British Columbia	1x	Weekly (Th)	English	9.875" x 10.25"
<i>Nunatsiak News</i>	6,000	NW Territories	2x	Weekly (Fr)	English & Inuktitut	10.333" x 15.357"
<i>Wawatay News</i>	6,000	Ontario	2x	Monthly	English & Oji-Cree	10.25" x 15.5"
<i>Le Regional</i>	5,500	Ontario	1x	Bi-Weekly (Th)	French	10.5" x 14"
<i>NWT News/North</i>	3,300	NW Territories	3x	Weekly (Mon)	English, Inuktitut, and Inuinnaqtun	10.3333" x 15.3571"
<i>Ha-Shilth-Sa</i>	3,200	British Columbia	1x	Bi-Weekly (Th)	English	10.25" x 15.5"
<i>Mi'kmaq-Maliseet Nations News</i>	3,000	Nova Scotia	1x	Monthly	English	10.25" x 12.65"
<i>L'Action</i>	3,000	Ontario	1x	Bi-Weekly (Th)	French	10.5" x 14"
<i>Le Rempart</i>	3,000	Ontario	1x	Bi-Weekly (Th)	French	10.5" x 14"
<i>Yellowknifer</i>	2,877	NW Territories	1x	2x per Week (Wed & Fri)	English	10.3333" x 15.3571"
<i>Nunavut News/North</i>	2,302	Nunavut	3x	Weekly (Mon)	English, Inuktitut, and Inuinnaqtun	10.3333" X 15.3571"

<i>Kivalliq News</i>	1,116	Nunavut	2x	Weekly (Wed)	English & Inuktitut	10.3333" x 15.3571"
<i>Tusaayaksat</i>	n/a	NW Territories	2x	4x a year	English & Siglit	7.75" x 10.25"
Indigenous Print - Quebec	Estimated Circulation	Geography	Insertions	Frequency	Language	Ad Size B/W
<i>The Nation</i>	7,000	Quebec	2x	Bi-Weekly (Fr)	French & Inuktitut	7.5" x 9.75"
<i>Eastern Door</i>	2,025	Quebec	1x	Weekly (Fr)	French	10" x 15.75"

In total, the Indigenous newspapers have a circulation over 220,000. Where indicated above, the combined First Notice will be translated into the primary language(s) used by those publications, increasing the accessibility of the Notice to potential claimants in northern and Indigenous communities. The Indigenous language translations will be carried out in consultation with experienced local translators, who are often employed by the publications themselves.

The Claims Administrator currently expects that an additional phase of advertisements in Year 2 of the Notice Plan will use the same list of Indigenous publications as a starting point to determine where a second notice should run based on the best data-driven information on hand and focusing on prospective PCC-Claimants.

National Magazines

Over one-third of the target audience are medium-to-heavy magazine readers. The six magazines listed below have an estimated combined circulation of 632,000. This traditional media component allows for a color image and QR code to more easily stand out to the reader. It also ensures another method for reaching individuals who may not be online. The following chart shows the name, estimated circulation, number of insertions, frequency, language, and ad size of each publication as it will appear in Year 1. The Notice will appear in Chatelaine in both English and French.

Magazines	Estimated Circulation	Insertions	Frequency	Language	Ad Size	% of A50+ who read this magazine
<i>Canadian Living</i>	217,000	1x	Monthly	English	Full Page	14.3%
<i>Canadian Geographic</i>	104,000	1x	6x per year	English	Full Page	10.7%
<i>Chatelaine (English)</i>	78,704	1x	4x per year	English	Full Page	9.8%
<i>Maclean's</i>	74,845	1x	Monthly	English	Full Page	12.0%
<i>L'Actualité</i>	54,231	1x	Monthly	French	Full Page	4.2%
<i>Toronto Life</i>	52,499	1x	Monthly	English	Full Page	7.2%
<i>Chatelaine (French)</i>	51,280	1x	4x per year	French	Full Page	2.1%

The Claims Administrator expects that a second round of advertisements will appear in Year 2 with specific publications to be determined at that time, in the discretion of the Claims Administrator.

Broadcast Television and Radio

To provide the greatest practicable reach of the video and audio ads, traditional broadcast programming will be purchased using 30-second television and radio spots, as follows:

- broadcast and cable television nationwide in both English and French;
- radio programming in major metropolitan markets in both English and French;

- radio programming in small and medium markets in both English and French via Bell and Stringray Media which together own and operate over 200 local radio stations ;
- placements on APTN and CBC North to ensure reach within the Indigenous and northern communities;
- placements on a variety of Indigenous radio stations; and
- radio public service announcements that would be sent to all radio stations nationwide, along with a letter asking the stations to air the radio spots during open time slots.

According to Vividata, the average Canadian adult watches 21 hours of television a week. Certain categories of television programming perform particularly well with older audiences, including news, game shows, and daytime television. According to Vividata, adults 50+ are 35% more likely to watch news programming on TV than the average Canadian adult and 26% more likely to watch soap operas. While specific shows will depend on the available inventory at the time of purchase, networks may include Global, CityTV, CBC, Sportsnet, HGTV, Dtour, Flavour Network, History Channel, and others. A mix of primetime programming will also be included to provide high-impact moments. Placements on APTN and CBC North will provide reach to Indigenous and northern communities. In total, the Claims Administrator anticipates that over 1,750 spots will air during the period of this Notice Plan, resulting in an estimated 45 million impressions.

The radio campaign will cover major metropolitan markets including Toronto, Ottawa, Montreal, Vancouver, Edmonton, Calgary, Winnipeg, Saskatoon, Regina, Halifax, and others. Each market will include radio spots on 2-4 stations to ensure a mix of genres and music listening preferences. Radio spots will air across timeslots and programming that performs best against older audiences but will also ensure a mix of “drive-time” programming to reach those commuting to and from work/school. “Drive-time” programming is particularly useful as it reaches a potential claimant in a time when they are not distracted by other devices.

The radio campaign will also cover smaller to medium-sized markets through Bell and Stringray Media. Combined, both networks own and operate over 200 radio stations nationwide.

Furthermore, placements on a variety of Indigenous radio stations will also air over the course of the Notice Plan to ensure adequate coverage to Indigenous and northern communities. Example stations may include Taqramiut Nipingat Inc. (TNI), Société de communication Atikamekw-Montagnais (SOCAM), Windspeaker Radio, James Bay Cree Communications Society, Native Communications Inc. (NCI), Wawatay Radio, Drumbeat Radio, Missinipi Broadcasting Corporation (MBC), and others.

Over the course of the entire radio campaign, the Claims Administrator anticipates that over 16,000 radio spots would air, generating over 95 million impressions.

This widespread television and radio campaign is crucial to the overall Notice Plan effort. Among the smoker target audience, five out of every six people have consumed television in the prior week. Broadcast media builds frequency in a way that print media typically does not. Response rates are a byproduct of reach and frequency. It may take multiple impressions before a given viewer or listener decides to visit the Tobacco Claims Canada website to seek more information.

Beyond the specific target audiences, the Notice Plan’s objective is to create broad, national awareness about these Compensation Plans. This is expected to generate earned media content in

trusted outlets to further extend the reach of the notice effort. The objective of such broad and national awareness is to maximize the opportunity for eligible people to become aware that the Compensation Plans exist, learn about the Plans and participate if they so choose.

A proposed 30-second Video/Audio script is attached hereto as **Attachment G**.

Digital and Social Media Video/Audio

Mixing video/audio digital placements alongside traditional media and standard banner ads (described below) provides another format to reach the Claims Administrator's target audiences and enables the message to be conveyed to potential claimants without having to read any text.

Often considered a medium for a younger audience, these video/audio digital placements reach a significant source of the target audiences as well. Specifically, according to Vividata, a substantial portion of adults aged 50+ consumed media online:

Media Consumption	% of Adults 50+
Watched a short form video online (under 20 min)	53%
Watch streaming subscription services (e.g., Netflix)	47%
Streamed Music online	35%
State that they usually watch TV online or streaming	32%
Watched a long form video online (over 20 min)	30%
Listened to online Radio	19%
Listened to Podcasts	19%

Similar to the banner notices described below, these digital placements allow for very specific targeting to reach both the smokers and heirs target audience. Specifically, the Claims Administrator will notify potential claimants through the following media:

- 30-second YouTube ads reaching the same target as described above via the Google Display Network (both properties are owned by Alphabet) focusing on adults 50+ but also "Affinity" and "Intent" audience targets including Cigarettes, Smoking, Cancer Support, COPD, and Emphysema;
- Streaming podcasts and radio via Google and Spotify; and
- Streaming television on platforms that accept advertising such as Disney+, ESPN+, Fubo, and others.

The video and audio ads would be produced in both English and French. Similar to the banners, they would include a call to action and link potential claimants to the Tobacco Claims Canada website for more information. Over the course of Year 1, the Digital and Social Video and Audio ads will display over 93 million impressions. Impressions allocated for Year 2 of the Notice Plan will be assigned to the platforms based on data received from the Year 1 campaign as well as the overall claim response rate from prospective claimants.

Digital and Social Media Banners

Digital and social media ads will complement the more traditional media approaches and are a key element in ensuring adequate coverage of the target audience across all platforms. According to Vividata, of adults aged 50+, approximately 70% spend at least 2 hours each day on the Internet, with 18% of adults 50+ spending more than 6 hours each day on the Internet.

Additionally, according to Statista, the number of social media users in Canada has continued to grow each year, with an estimated 31.3 million social media users across the country in 2023. That number is estimated to grow to nearly 37 million by 2029.

Furthermore, digital and social media ads result in very specific targeting, allowing a banner to be placed in front of someone with specific interest, search history, geography, and browsing preferences. The digital and social media ads include the following targeting methods aimed at reaching both the primary smokers target audience as well as the broader secondary estate target audience, including spouses, children or other family members who may be helping with the care of the smokers themselves:

- Banners via the Google Display Network to all adults aged 50+ as well as banner ads using both Intent and Affinity targeting a variety of topics such as:
 - Affinity Audience targets including: Cigarettes, Smoking, Cancer Support, COPD, and Emphysema. Affinity Audience targeting is contextual, in that the banners would be placed alongside content about these topics.
 - Intent Audience targets including: Cigarettes, Smoking, Cancer Support, COPD, and Emphysema. Intent Audience targeting is behavioural, and banners would be placed on websites (no matter the content) in front of specific individuals who had previously searched information on these topics. This type of targeting is especially important in that it reaches individuals who were actively searching out more information on these topics and already have a built-in interest of knowing more.
 - Intent Audience targeting including keywords and phrases such as: How to help someone quit smoking; Support for family members of smokers; Best ways to quit smoking; Smoking cessation tips; Helping a loved one quit smoking; Quit smoking support; Smoking cessation programs; Nicotine addiction help; Ways to quit smoking for good; How to encourage someone to stop smoking; Quit smoking aids; Secondhand smoke health risks; Tips to stop smoking; Smoking cessation resources; Quit smoking products; Family support for quitting smoking; Effective methods to quit smoking; Nicotine replacement therapy; Stop smoking counseling; and/or Health benefits of quitting smoking.
 - This target audience both reaches current smokers looking to quit, but those potential family members supporting their loved ones who are smokers.
 - Additional Intent Audience targeting including keywords and phrases such as: Smoking compensation, lung cancer payment, throat cancer payment, emphysema payment, COPD payment, legal claim for tobacco-related death, tobacco compensation Canada, tobacco settlement for family, tobacco class action, tobacco litigation, tobacco claims, tobacco lawsuit, cigarette class action, cigarette litigation, cigarette lawsuit,

cigarette class action, tobacco payment, tobacco payment for family member, how to claim for a family member, and others.

- Banner ads on newspaper websites.
 - In addition to the physical and digital replica newspapers ads mentioned above, banner ads would be placed on local newspaper websites to reach those who read their local news websites, but do not subscribe to the newspaper.
 - Placing banner ads in addition to the physical print ads would also increase frequency for those who consume media both ways.
 - According to Statista data, 59% of all Canadian use the Internet to get news at least once daily, and according to Vividata, more than 50% of adults aged 50+ value their local news media.
- Banner ads on Facebook and Instagram – According to Statista, Facebook is the social media market leader in Canada, accounting for 59% of all social media visits, while Instagram accounts for approximately 7% of all social media visits.
 - Banners would target adults aged 50+, as well as individuals who have shown interest in content including discussions on and/or topics including COPD, Emphysema, Smoking, and/or Cancer Support.
- Post engagement targeting on X (Twitter) – According to Statista data, X accounts for nearly 10% of all social media visits in Canada.
 - Post engagement targeting topics such as Smoking, Emphysema, COPD, and/or Cancer Support. Post Engagement targeting allows an ad to be placed in front of X users who had tweeted or re-tweeted specific content or phrases.
 - Post engagement targeting towards phrases such as Tobacco, Nicotine, Smoke break, Menthol cigarettes, Light cigarettes, Filter cigarettes, Nicotine patches, Nicotine gum, Smokeless tobacco, Quit smoking, Nicotine addiction, Lung health, Cancer prevention, Health risks of smoking, Smoking habits, Smoking preferences, Heavy smokers, Occasional smokers, Chain smokers, Smoking community, Smoking forums, Smoking support groups, Smoking in public places, Smoking laws, Tobacco taxes, and/or Smoking accessories.
 - Post engagement targeting to tobacco cessation keywords and phrases such as: How to help someone quit smoking; Support for family members of smokers; Best ways to quit smoking; Smoking cessation tips; Helping a loved one quit smoking; Quit smoking support; Smoking cessation programs; Nicotine addiction help; Ways to quit smoking for good; How to encourage someone to stop smoking; Quit smoking aids; Secondhand smoke health risks; Tips to stop smoking; Smoking cessation resources; Quit smoking products; Family support for quitting smoking; Effective methods to quit smoking; Nicotine replacement therapy; Stop smoking counseling; and/or Health benefits of quitting smoking.
 - Post engagement targeting to keywords and phrases such as: Smoking compensation, lung cancer payment, throat cancer payment, emphysema payment, COPD payment,

legal claim for tobacco-related death, tobacco compensation Canada, tobacco settlement for family, tobacco class action, tobacco litigation, tobacco claims, tobacco lawsuit, cigarette class action, cigarette litigation, cigarette lawsuit, cigarette class action, tobacco payment, tobacco payment for family member, how to claim for a family member, and others.

Banners will appear in both English and French and appear in a variety of ad sizes based on the platform where they appear. Banners will include an image and headline calling attention to the matter and urging individuals to visit the Tobacco Claims Canada website for more information where they can find out the requirements of filling out a Claim Form.

Banners would appear on desktop, mobile, and tablet devices. The banner ads will run over a variety of flights during Year 1 as detailed in the example Notice Plan timeline above. Year 2 flighting for prospective PCC-Claimants is expected to follow a similar pattern as detailed in the example Notice Plan timeline, but exact flighting and media choices are expected to be updated based on the overall claim response from claimants and other banner specific stats such as click-thru-rates.

Over the course of the Year 1 Notice Plan timeline, the digital and social media banners will display over 510 million impressions. A similar level of impressions is expected to be allocated for Year 2 of the Notice Plan, but is expected to be assigned to the various digital platforms at that time based on the criteria mentioned in the paragraph above. Sample banner and social media notices are attached hereto as **Attachment H**.

Sponsored Search Listings

To facilitate locating the Tobacco Claims Canada website, sponsored search listings will be acquired on the three most highly visited internet search engines: *Google*, *Yahoo!*, and *Bing*. When search engine visitors search on selected common keyword combinations, the sponsored search listing will be displayed. Generally, the sponsored search listing will appear at the top of the visitor's website page prior to the search results or in the upper right-hand column of the web-browser screen. All sponsored search listings will link directly to the Tobacco Claims Canada website and appear in English and French.

Informational Release

A bilingual Informational Release (in English and French) will be issued nationwide via Canadian Newswire to general media (print and broadcast) outlets, including local and national newspapers, magazines, national wire services, television, and radio broadcast media across Canada. The Informational Release will include key information for potential claimants including the Tobacco Claims Canada website and the toll-free telephone number. Although there is no guarantee that any news stories will result, the Informational Release will serve a valuable role by providing additional notice exposures beyond that which was provided by the paid media. The draft Informational Release in English is attached hereto as **Attachment I**.

Notice Reporting

The objective and expectation of the Claims Administrator, upon the execution of this Notice Plan, is to ensure that eligible persons have been effectively notified in a clear, concise manner that allows them to fully understand their rights and options, and that such persons are given every reasonable opportunity to participate.

The Claims Administrator will prepare and submit reports to the CCAA Plan Administrators as the Court directs describing the progress of the Notice Plan.

Attachment List

Attachment A – Combined First Notice

Attachment B – PCC Information Circular

Attachment C – PCC Claim Form

Attachment D – QCAP Information Circular

Attachment E – QCAP Tobacco-Victim Claim Form

Attachment F – QCAP Succession Claim Form & sub-forms

Attachment G – Video/Audio Script

Attachment H – Banner and Social Media Notices

Attachment I – Informational Release

Attachment A



If you smoked regularly before Nov. 20, 1998 and were diagnosed with a tobacco-related disease, you may qualify for \$14,400-\$100,000 from a landmark settlement.

As part of a landmark settlement with Canadian tobacco companies, the Ontario Superior Court of Justice (Commercial List) has approved two compensation plans to provide payments to eligible smokers and ex-smokers diagnosed with certain tobacco-related diseases:

- The Pan-Canadian Claimants' Compensation Plan (PCC); and
- The Quebec Class Action Administration Plan (QCAP)

For those who have died that qualify, payments may be available for their estates.

WHAT ARE THE ELIGIBLE DISEASES AND DOLLAR AMOUNTS?

This table shows the diseases covered by the plans and the maximum payment amounts:

Disease	You started smoking before January 1, 1976	You started smoking on or after January 1, 1976
Primary Lung Cancer or Primary Throat Cancer	\$60,000 PCC \$100,000 QCAP	\$48,000 PCC \$80,000 QCAP
Emphysema or COPD (GOLD Grade III or IV)	\$18,000 PCC \$30,000 QCAP	\$14,400 PCC \$24,000 QCAP

Important: Payments may be reduced depending on the number of eligible claims in each plan. A person will only be entitled to one payment, under one plan, and for one disease.

WHAT ARE THE CLAIM DEADLINES?

The Claims Submission Periods commenced on Month DD, 2025 and the plans have different claim deadlines:

- PCC claim deadline is Month DD, 2027
- QCAP claim deadline is Month DD, 2026

Important: QCAP deadline is one year earlier than PCC deadline.

HOW MANY CIGARETTES AND WHICH BRANDS?

Both plans require the smoker or ex-smoker to have smoked at least 87,600 cigarettes (for example, 20 cigarettes a day for 12 years) between January 1, 1950 and November 20, 1998. The cigarettes must be from brands sold by the tobacco companies. The website has a list of the eligible brands, which include most legal cigarettes sold in Canada.

WHAT ARE OTHER PCC REQUIREMENTS?

In addition to the disease and smoking requirements, the smoker or ex-smoker under PCC must:

- reside in Canada (or if deceased, must have resided in Canada at the time of death);
- have been diagnosed **between March 8, 2015 and March 8, 2019**, inclusive of those dates;
- have resided in Canada at the time of diagnosis; and
- have been alive on March 8, 2019.

WHAT ARE OTHER QCAP REQUIREMENTS?

In addition to the disease and smoking requirements, the smoker or ex-smoker under QCAP must:

- reside in Quebec (or if deceased, must have resided in Quebec at the time of death);
- have been diagnosed **before March 12, 2012**;
- have resided in Quebec at the time of diagnosis; and
- have been alive on November 20, 1998.

HOW CAN I GET FREE HELP?

Agents are available **free of charge** to assist claimants under these plans. Agents will help you (a) complete your claim form; (b) commission your signature on the claim form; and (c) provide guidance on how to obtain the necessary information and documents for your claim.

PCC Agent 1-888-482-5852
is Epiq PCCAgent@TobaccoClaimsCanada.ca

QCAP Agent 1-888-880-1844
is Proactio tabac@proactio.ca

If you do not submit a claim by the applicable deadline, you cannot be eligible to get a payment.

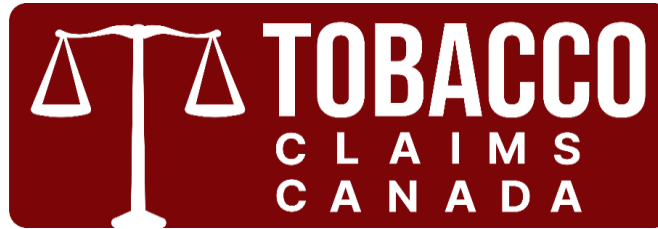
If you are not sure whether you qualify, the website has a simple questionnaire to help you. The plans have been designed so that you **do not need a lawyer** to prepare and submit your claim. If you have already registered, you will be notified by an Agent about how to complete your claim.

Full information is available at the official website www.TobaccoClaimsCanada.ca and via the QR Code.

www.TobaccoClaimsCanada.ca



Attachment B



If you smoked regularly before Nov. 20, 1998 and were diagnosed with a tobacco-related disease between March 8, 2015 and March 8, 2019, you may qualify for \$14,400-\$60,000 from a landmark settlement.

PCC Compensation Plan – Detailed Information

Why is there a settlement? In March 2019, Imperial Tobacco Canada Limited, Rothmans, Benson & Hedges Inc. and JTI-Macdonald Corp (the “Tobacco Companies”) began insolvency proceedings in Canada under the *Companies’ Creditors Arrangement Act*, R.S.C. 1985, c. C-36 (“CCAA”), following a class-action judgment in Quebec ordering them to pay over \$13.5 billion. As part of the CCAA proceedings, the Tobacco Companies participated in court-supervised mediation to reach a Global Settlement with their creditors, including the Provinces and Territories, the Plaintiffs from the Quebec class action, and PCC Representative Counsel, who was appointed by the Court to represent Canadian tobacco-victims, other than those covered by the Quebec Class Action. On March 6, 2025, Chief Justice Geoffrey B. Morawetz of the Ontario Superior Court of Justice (Commercial List) (“CCAA Court”) approved the Settlement.

What are “PCC” and “QCAP”? As part of the Settlement, two compensation plans were created to compensate eligible smokers and ex-smokers diagnosed with Lung Cancer, Throat Cancer or Emphysema or COPD (GOLD Grade III or IV):

1. The Pan-Canadian Claimants’ Compensation Plan (“PCC Compensation Plan”) – for people diagnosed in Canada between March 8, 2015 and March 8, 2019, inclusive of those dates, and in some cases their estates; and
2. The Quebec Class Action Administration Plan (“QCAP Plan”) – for *Blais* Class Members diagnosed in Quebec before March 12, 2012, and their heirs.

This document is specifically related to the PCC Compensation Plan. Information about the QCAP Plan is available at www.TobaccoClaimsCanada.ca.

Who is a “Tobacco-Victim”? A “Tobacco-Victim” is a person who suffers from a Tobacco-Related Disease. Tobacco-Victims who meet the PCC Eligibility Criteria are eligible for compensation under the PCC Compensation Plan. If the Tobacco-Victim is deceased, but was alive on March 8, 2019, their estate is also eligible for compensation.

What does “PCC Eligibility Criteria” mean? In a legal context, “criteria” means standards on which a judgment or decision may be based. To be eligible to receive PCC compensation, a Tobacco-Victim must satisfy four criteria types: (1) smoking history; (2) disease diagnosis between March 8, 2015 and March 8, 2019 (inclusive); (3) resident of Canada; and (4) alive on March 8, 2019.

PCC COMPENSATION AMOUNTS AND PAYMENTS

How much compensation could I be approved for? The following table shows the *maximum* amounts available to claimants that meet the Eligibility Criteria for each disease covered by the PCC and QCAP Compensation Plans. Eligible claimants will receive compensation for the one disease that results in the highest payment.

Disease	You started smoking before January 1, 1976	You started smoking on or after January 1, 1976
Primary Lung Cancer or Primary Throat Cancer	\$60,000 PCC \$100,000 QCAP	\$48,000 PCC \$80,000 QCAP
Emphysema or COPD (GOLD Grade III or IV)	\$18,000 PCC \$30,000 QCAP	\$14,400 PCC \$24,000 QCAP

If my Claim is approved, will I receive the amount in the table? The table shows the *maximum* amounts. Final payments may be reduced on a *pro rata* (proportionate) basis if the amount available for the PCC Compensation Plan (\$2.521 billion) is not enough to pay all eligible claims. Final amounts will only be determined after the PCC Claims Deadline has passed and all claims have been processed.

When could I receive a payment? If your claim is approved, payment will be issued after the PCC Claim Deadline of **Month DD, 20YY**, once all claims have been reviewed and decisions finalized. Once a payment date has been determined, it will be posted at www.TobaccoClaimsCanada.ca.

PCC ELIGIBILITY CRITERIA AND REQUIRED PROOF

To qualify for compensation under the PCC Plan, the Tobacco-Victim must meet all of the following PCC Eligibility Criteria.

Smoking History

Which cigarettes brands are covered? The Tobacco-Victim must have smoked cigarettes sold by the Tobacco Companies in Canada. A complete list of eligible brands is provided in **Attachment A - Cigarettes Sold by The Tobacco Companies**.

How many cigarettes must have been smoked to qualify? The Tobacco-Victim must have smoked at least 87,600 cigarettes sold by the Tobacco Companies in Canada between January 1, 1950 and November 20, 1998. This is also called "Twelve Pack-Years", which means any combination of cigarettes sold by the Canadian Tobacco Companies that adds up to 87,600. For example:

- 10 cigarettes smoked per day for 24 years ($10 \times 365 \times 24$) = 87,600 cigarettes sold by the Canadian Tobacco Companies;
- 20 cigarettes smoked per day for 12 years ($20 \times 365 \times 12$) = 87,600 cigarettes sold by the Canadian Tobacco Companies.

The smoking can be over multiple time periods, even with breaks in between. To help determine the number of cigarettes smoked, a calculator is available at www.TobaccoClaimsCanada.ca.

How to prove Smoking History? You will be asked to provide the Tobacco-Victim's smoking history on the PCC Claim Form, which must be signed and sworn before a Commissioner of Oaths or Notary Public.

Compensable Disease Diagnosis Between March 8, 2015 & March 8, 2019

What diseases qualify for compensation? The Tobacco-Victim must have been diagnosed with at least one of the following diseases (the "**Compensable Diseases**") between March 8, 2015 and March 8, 2019 (inclusive of those dates) to qualify for compensation:

1. Primary lung cancer; or
2. Primary cancer (squamous cell carcinoma) of the larynx, oropharynx, or the hypopharynx (throat cancer); or
3. Emphysema or COPD (GOLD Grade III or IV).

If you resided in Quebec at the time of diagnosis and you were diagnosed with one of the above diseases before March 12, 2012, you may be eligible for compensation under the QCAP Plan. If that is the case, contact the QCAP Agent (Proactio).

What does "primary cancer" mean? "Primary cancer" refers to the original site where the cancer first develops. Sometimes cancer cells spread to other parts of the body - this is called a secondary or metastatic cancer.

What does "COPD (GOLD Grade III or IV)" mean? The Global Initiative for Chronic Obstructive Lung Disease ("GOLD") developed a four-grade COPD classification system based upon severity of airflow limitation and other diagnostic parameters. GOLD Grade III (severe) and IV (very severe) classifications represent the two most severe categories of disease.

How do I prove diagnosis and date of diagnosis if am a resident of Canada other than Quebec? A Tobacco-Victim's diagnosis between March 8, 2015 and March 8, 2019 (inclusive) can be proven by the following:

- For Lung or Throat Cancer - a copy of a pathology report confirming the diagnosis;
- For Emphysema or COPD (GOLD Grade III or IV) - a copy of a report of a spirometry test (performed between March 8, 2015 and March 8, 2019) that first demonstrated a FEV1 (non-reversible) of less than 50% of the predicted value to first establish a diagnosis of Emphysema or COPD (GOLD Grade III or IV).

If you are unable to provide one of the above documents, you may instead submit one of the following alternatives:

- a copy of an extract from the Tobacco-Victim's medical file, confirming the diagnosis;
- a completed Physician Form (available on www.TobaccoClaimsCanada.ca);
- a written statement from a Physician (of the Tobacco-Victim, or another physician having access to the medical record), along with at least one of the following records:
 - For Lung or Throat Cancer: pathology report, operative report, biopsy report, MRI report, CT scan report, PET scan report, X-ray report, sputum cytology report.
 - For Emphysema or COPD (GOLD Grade III or IV): Spirometry report; or CT scan report.

Medical records can take time to obtain. Start requesting your records early to avoid missing the PCC Claim Deadline.

How do I prove diagnosis and date of diagnosis if I am a resident of Quebec? The Régie de L'assurance Maladie du Québec (RAMQ) and the Ministère de la Santé et des Services sociaux (MSSS) may hold, in the Registre québécois du cancer and in the MED-ÉCHO database respectively, the information necessary to establish that a Tobacco-Victim was diagnosed with a Compensable Disease between March 8, 2015 and March 8, 2019 inclusive of those dates (referred to as an **"Official Confirmation"**). In the Claim Form, the Tobacco-Victim that is a Quebec resident or their representative can authorize the Claims Administrator to request an Official Confirmation from these sources. If an Official Confirmation is obtained, this constitutes proof of diagnosis, and the Quebec claimant will not need to submit supplemental diagnosis information.

What if a Quebec Official Confirmation cannot be obtained? If an Official Confirmation for a Quebec resident cannot be obtained from RAMQ or MSSS, you will be notified by the PCC Agent or the Claims Administrator. In such case, you will need to provide alternative proof as described in the above section regarding proof of diagnosis for a Tobacco-Victim who does not reside in Quebec. Please note that as a Quebec resident, you do not need to submit alternative proof unless it has been specifically requested of you.

What if I was diagnosed with another smoking-related disease? Only Lung Cancer, Throat Cancer, Emphysema and COPD (GOLD Grade III or IV) are covered by the PCC Compensation Plan. However, a \$1 billion charitable foundation has been created as part of the CCAA Plans to fund research, programs and initiatives aimed at improving outcomes in Tobacco-related Diseases, which will indirectly benefit those who do not qualify for direct compensation. To learn more about the charitable foundation go to: [\[insert URL for website\]](#).

Residency Questions on the PCC Claim Form

Under the PCC Compensation Plan, a person's place of residence is the province or territory that issued their health insurance card and/or their driver's licence. A Tobacco-Victim must answer "Yes" to the applicable residency questions on the PCC Claim Form in order to be eligible for compensation:

1. **Residency at time of diagnosis:** The PCC Claim Form asks, "Did the Tobacco-Victim reside in Canada on the date of diagnosis?" Residence on the date of diagnosis may be established based on the province or territory which issued the Tobacco-Victim's health insurance card number that appears on the medical documents proving a PCC Compensable Disease.
2. **Residency at time of submitting a claim (or at time of death):** If the Tobacco-Victim is living, the PCC Claim Form asks: "Does the Tobacco-Victim currently reside in Canada?" If the Tobacco-Victim is deceased, the PCC Claim Form asks: "Did the Tobacco-Victim reside in Canada on the date of their death?" Residence at death is proven by submitting one of the acceptable documents listed in Attachment A of the PCC Claim Form with the Claim Form.

Alive on March 8, 2019

What if the Tobacco-Victim died before March 8, 2019? To qualify, the Tobacco-Victim must have been alive on March 8, 2019, and meet all other PCC Eligibility Criteria. If the Tobacco-Victim is now deceased but was alive on that date, the Representative of the Estate must submit the required documents listed in Attachment A of the Claim Form to: (i) prove the Tobacco-Victim's death and date of death; and (ii) verify their legal authority to submit the claim on behalf of the Estate.

If the Tobacco-Victim was a resident of Quebec and was diagnosed before March 12, 2012, their heirs may have a claim under the QCAP Plan. If this is the case, please contact the QCAP Agent (Proactio) for assistance.

What if the Tobacco-Victim dies after submitting a PCC Claim Form? If the Tobacco-Victim dies after submitting their complete Claim Package but before receiving payment, the Claims Administrator will still review the claim. If the claim is approved, the compensation will be payable to the Estate of the Tobacco-Victim. In that circumstance, the duly authorized Legal Representative of the Estate will need to submit additional information to receive the payment. Please contact the PCC Agent for assistance.

WHAT IF THE TOBACCO-VICTIM IS INCAPACITATED OR DECEASED?

A Legal Representative can submit a claim: (a) on behalf of a **living** Tobacco-Victim, or (b) on behalf of the **Estate of a deceased** Tobacco-Victim who was alive on March 8, 2019. The PCC Claim Form includes a table at Attachment A detailing acceptable documents for each province and territory. **Note:** Surviving Family Members in their own capacity are not eligible to receive direct PCC compensation.

If the Tobacco-Victim died without an estate or the estate is now closed, you should speak with a probate lawyer about options to set-up or reactivate an estate at your own cost. The Claims Administrator cannot confirm whether the Tobacco-Victim meets the PCC Eligibility Criteria unless the Claim includes proper legal documentation showing that you are authorized to represent the Estate.

HOW TO SUBMIT YOUR CLAIM AND COMMISSIONING

When is the deadline to submit a PCC Claim? The PCC Claim Deadline is **Month DD, 20YY**. You may submit a PCC Claim with supporting documents any time during a 24-month submission period from [start date] to **Month DD, 20YY**. For your claim to be considered, it must be postmarked or received by **Month DD, 20YY**. Records can take time to obtain. **Start early to avoid missing the PCC Claim Deadline.**

NOTE: The QCAP Plan has a different Claim Submission Period and Claim Deadline. The QCAP Claim Submission Period is twelve (12) months (rather than twenty-four (24) months) and the QCAP Claim Deadline is Month DD, 20YY.

Where can I get the PCC Claim Form? If you received this document by postal mail, a copy of the PCC Claim Form should have been included in the envelope. A PDF version is also available at www.TobaccoClaimsCanada.ca. The Claims Administrator encourages you to use its online Claimant Portal instead of a paper Claim Form. On the Claimant Portal, you can create an account with a Username and Password, start a claim and return to it any time before the Claim Deadline. You can submit your Claim Form and securely upload supporting documents. If you provide permission, the PCC Agent can access the information you entered on the Claimant Portal and assist you for free with preparing your Claim.

How can I submit my PCC Claim Form? The PCC Claim Form explains the multiple ways you can submit your Claim, which includes online, postal mail, email, or fax. The preferred submission method is the online Claimant Portal.

Can I submit more than one Claim Form? No. You are only permitted to make one Claim for compensation under either the PCC or QCAP Plan. You cannot make a claim to both Claims Processes at the same time. If you think you have a claim under the QCAP Plan, apply to the QCAP Plan, through the QCAP Agent (Proactio). The QCAP Agent (Proactio) will be able to verify if you also have a claim under the PCC Compensation Plan that could result in higher compensation for you, and if appropriate, will assist you to transfer your claim to the PCC Agent. If you need any assistance in determining where to file, please contact the Claims Administrator.

What is needed for a complete PCC Claim submission? A Claim is complete when (a) the PCC Claim Form has been answered completely with no information missing, (b) all required supporting documents are attached or uploaded, (c) the PCC Claim Form's Statutory Declaration is signed in front of a Commissioner of Oaths or Notary Public (see below), and (d) the Claim Form and supporting documents have been submitted to the Claims Administrator by the PCC Claim Deadline. The PCC Agent can assist you in reviewing your claim before it is submitted and identify potentially incomplete information and/or documentation.

What is commissioning? To complete your Claim Form, you must sign the Statutory Declaration in front of a Commissioner of Oaths or Notary Public. A Commissioner of Oaths will confirm your identity and that you swear or affirm your information is true. Every lawyer, some paralegals and all notaries in your province or territory are Commissioners of Oaths.

The PCC Agent can commission the Statutory Declaration free of charge, using a secure online signing system called DocuSign. You will need a computer, smartphone or tablet for a video-call with the PCC Agent, who will watch you sign the declaration. If you want help commissioning from the PCC Agent, make sure your Claim Form is otherwise complete and ready to submit several weeks before the Claim Deadline of **Month DD, 20YY** so there is enough time to schedule the remote signing. The PCC Agent can also help you find an alternative way to meet the commissioning requirement.

WHAT HAPPENS AFTER I SUBMIT MY CLAIM?

How long may the review of my claim take? The Claims Administrator will send you an **Acknowledgement of Receipt of Claim** when your claim is received. Review times will vary depending on how many claims are received, when your Claim is submitted, whether documents are missing or complex, and whether your Claim raises unique questions. Review of your Claim may not be complete until after the PCC Claim Deadline.

If Your Claim is Accepted, the Claims Administrator will send you a **Notice of Acceptance of PCC Claim**.

If Your Claim is Incomplete, the Claims Administrator will send you a **Notice of Incomplete Claim** to explain what is missing and how to fix it. The deadline to resubmit your revised claim will be the later of: (a) the PCC Claims Deadline; or (b) sixty (60) days from the date of the Notice of Incomplete Claim. If you do not respond by that deadline, your Claim will be rejected.

If Your Claim is Rejected, you will be sent a **Notice of Rejection** explaining the reason(s) for the rejection. The Notice will include a **Request for Review Form**. If you believe your Claim was improperly rejected, you may request a review within sixty (60) days of the date of the Notice of Rejection, clearly identifying the error you believe the Claims Administrator made during the initial assessment of your claim. The Claims Administrator will assign an independent Review Officer, who may confirm, reverse, or vary the original decision.

PCC AGENT SUPPORT

The PCC Agent can help you, **free of charge**, with: (a) answering questions and filling out the PCC Claim Form based on information you provide; (b) commissioning your signature on the PCC Claim Form; and (c) providing guidance on how to obtain the necessary information and documents for your claim.

Can the PCC Agent tell me if I qualify? No. Only the Claims Administrator can decide if a claim qualifies under the PCC Compensation Plan. However, the PCC Agent can identify gaps in your Claim Package.

Do I need to hire a lawyer to submit my Claim? No. The PCC Compensation Plan was designed so that you can complete a claim without hiring a lawyer or paying for third-party services. Also, the CCAA Court has issued an order prohibiting lawyers or other persons from soliciting you in the preparation or submission of your Claim. If you receive any such solicitation, report it to the PCC Agent right away by phone or email.

Exception—Estate-Related Legal Help: In some cases, Legal Representatives acting on behalf of a Tobacco-Victim may need to consult an estate lawyer at their own cost to obtain legal documents such as a Grant of Probate, Grant of Administration, Power of Attorney, or Proof of Guardianship depending on the province or territory.

How do I get more information? Call the PCC Agent: **1-888-482-5852**, or email: **PCCAgent@TobaccoClaimsCanada.ca**. Visit **www.TobaccoClaimsCanada.ca** for FAQs, tools, and the full PCC Compensation Plan.

ATTACHMENT A: CIGARETTES SOLD BY THE TOBACCO COMPANIES

Accord

Accord KF

Avanti/Light

B&H

B&H 100 Del.UL.LT/MEN

B&H 100 F

B&H 100 F Menthol

B&H Light Menthol

B&H Lights

B&H Special KF

B&H Special Lights KF

B&H Light Menthol

Belmont

Belmont KF

Belvedere

Belvedere Extra Mild

Camel

Cameo

Cameo Extra Mild

Craven "A"

Craven "A" Special

Craven "A" Light

Craven "A" Ultra Light/Mild

Craven "M"

Craven "M" KF

Craven "M" Special

du Maurier

du Maurier Light

du Maurier Special

du Maurier Ultra Light

Dunhill

Dunhill KF

Export

Export "A"

Export "A" Lights

Export "A" Medium

Export "A" Extra Light

Export "A" Special Edition

Export "A" Ultra Light

Export Mild

Export Plain

LD

Macdonald

Macdonald Menthol

Mark Ten

Mark Ten Filter

Matinee

Matinee Extra Mild

Matinee Slims/Menthol

Matinee Special/Menthol

Medallion

More

North American Spirit Number 7

Number 7 Lights

Peter Jackson

Peter Jackson Extra Light KF

Player's

John Player's Special

Player's Extra Light

Player's Filter

Player's Light

Player's Medium

Player's Plain

Rothmans

Rothmans Extra Light

Rothmans KF

Rothmans Light

Rothmans Special

Rothmans UL LT KF

Spirit

Select Special/Ultra Mild/Menthol

Vantage

Vantage KF

Vantage Light/Menthol

Viscount

Viscount #1 KF

Viscount Extra Mild/Menthol

Winston

Attachment C



Submission Deadline:
[Month DD], 20XX

Tobacco Claims Canada
Claims Administrator
P.O. Box 2958 STN B
Ottawa ON K1P 5W9

<<Barcode>>

<<Name>>

<<Address1>>

<<Address2>>

<<Address3>>

<<City>> <<Province>> <<Zip>> OR <<Country>>

Pan-Canadian Claimants' (PCC) Compensation Plan CLAIM FORM

GENERAL INSTRUCTIONS

Submit Your Claim Online:



You can scan the QR code or visit

www.TobaccoClaimsCanada.ca

to file your claim. If you file your
claim online, it must be submitted by

5:00 p.m., Pacific Time, on Month DD, 20XX.



This Claim Form must be completed and submitted with the Claims Administrator, along with the necessary accompanying documents, by **no later than the deadline of [Month Day, Year] by 5:00 p.m., Pacific Time**, in order to receive financial compensation from the PCC Compensation Plan.

You do **not need a lawyer** to file a claim under the PCC Compensation Plan. Epiq, the official PCC Agent, can help you file your claim, at no additional cost to you. If you need any assistance, please reach out to Epiq at the following contact information:

① **Phone: 1-888-482-5852**

✉ **Email: PCCAgent@TobaccoClaimsCanada.ca**



Website: www.TobaccoClaimsCanada.ca/en/HomePCC

The PCC Compensation Plan and Eligibility Criteria

The PCC Compensation Plan will provide compensation to individuals who meet the PCC Eligibility Criteria, described below, and who submit a complete claim with supporting documents by the deadline. Such individuals are referred in this PCC Claim Form as “Tobacco-Victim(s)”.

The PCC Compensation Plan will also provide compensation to the estates of Tobacco-Victims who were alive on March 8, 2019, and meet all other eligibility criteria. The Legal Representative of the Estate of a deceased Tobacco-Victim may make a claim on behalf of the Estate.

This PCC Claim Form should be used by:

- A Tobacco-Victim making a claim on their own behalf;
- A Representative of a living Tobacco-Victim with a mandate or power of attorney to represent the Tobacco-Victim; or
- A Representative of a deceased Tobacco-Victim with a mandate or legal authority to represent the Estate of the Tobacco-Victim (such as an Executor, or Estate Administrator).

To be eligible to receive financial compensation, the Tobacco-Victim must meet **all** of the following **PCC Eligibility Criteria**. They must:

1. reside in any Province or Territory in Canada (or if deceased, have resided in Canada at the time of their death);
2. have smoked a minimum of twelve pack-years (i.e. 87,600 cigarettes) sold by the Canadian Tobacco Companies **between January 1, 1950 and November 20, 1998**;
Note: You may use the calculator available at www.TobaccoClaimsCanada.ca/en/HomePCC/Calculator to help determine the number of cigarettes the Tobacco-Victim smoked.
3. have been diagnosed **between March 8, 2015 and March 8, 2019** (inclusive) with:
 - (a) Primary lung cancer; or
 - (b) Primary cancer (squamous cell carcinoma) of the larynx, oropharynx, or the hypopharynx (throat cancer); or
 - (c) Emphysema or COPD (GOLD Grade III or IV).
4. have resided in any Province or Territory in Canada on the date of diagnosis with lung cancer, throat cancer, or emphysema or COPD (GOLD Grade III or IV);
AND
5. have been alive on **March 8, 2019**.

Claims Deadline

The PCC Claim Form together with the required supporting documents must be submitted to the Claims Administrator by **no later than 5:00 p.m., Pacific Time, on [Month Day, Year]**.

Some documents can take time to obtain. Please take immediate steps to obtain all of the required documents to ensure you meet the deadline.

How to ~~File~~ a Claim

You can file your Claim Form with supporting documents in any of the following ways:

-  **Online**, through the Claims Administrator's website at www.TobaccoClaimsCanada.ca
-  **Email** to info@TobaccoClaimsCanada.ca
-  **Fax** to 1-866-262-0816
-  **Registered Mail**, sent to the following address, postmarked by [Month Day, 20XX]:

Tobacco Claims Canada
Claims Administrator
P.O. Box 2958 STN B
Ottawa ON K1P 5W9

Your claim will be deemed to be received **only when the Claim Form and all supporting documents are received by the Claims Administrator**. Claimants will be sent an Acknowledgement of Receipt of Claim by email or mail once their Claim Form with supporting documents has been received by the Claims Administrator. You must keep the record of transmission of your Claim Form until you receive the Acknowledgement of Receipt of Claim.

PLEASE DO NOT SUBMIT YOUR CLAIM MORE THAN ONCE OR THROUGH MULTIPLE METHODS.

The Quebec Administration ("QCAP Plan") and Eligibility Criteria

If the Tobacco-Victim does **not meet** the above PCC Eligibility Criteria, and **resides or resided in Quebec**, they may still be eligible to receive compensation under a separate compensation plan called the Quebec Class Action Administration Plan ("**QCAP Plan**"). To qualify under the QCAP Plan, the Tobacco-Victim must meet all of the following criteria. They must:

1. reside in Quebec (or if deceased, have resided in Quebec at the time of their death);
2. have smoked a minimum of twelve pack-years (i.e. 87,600 cigarettes) sold by the Canadian Tobacco Companies between **January 1, 1950 and November 20, 1998**;
3. have been diagnosed **before March 12, 2012** with:
 - (a) Primary lung cancer; or
 - (b) Primary cancer (squamous cell carcinoma) of the larynx, the oropharynx or the hypopharynx (throat cancer); or
 - (c) Emphysema or COPD (GOLD Grade III or IV).
4. have resided in Quebec on the date of diagnosis with lung cancer, throat cancer, emphysema or COPD (GOLD Grade III or IV);
AND
5. have been alive on **November 20, 1998**.

Compensation may also be available to the estates or heirs of Tobacco-Victims who died after November 20, 1998, as well as to the estates or heirs of the heirs of Tobacco-Victims who died after November 20, 1998.

A Tobacco-Victim will only be eligible for compensation under one plan and will be paid for the disease and under the plan which provides the highest amount of compensation. You cannot make a claim under both plans.

If you think you have a claim under the QCAP Plan, please apply to the QCAP Plan, through the QCAP Agent (Proactio). The QCAP Agent (Proactio) will verify if you have a claim under the PCC Compensation Plan that could result in higher compensation for you, and if appropriate, will transfer your claim to the PCC Agent. The QCAP Agent (Proactio) can be reached at:

Phone: 1-888-880-1844

Email: tabac@proactio.ca

Website: www.RecoursTabac.com

If you need any assistance determining under which plan to file, please contact the Claims Administrator.

Privacy and Confidentiality Declaration by the Claims Administrator

By submitting this Claim Form, the Tobacco-Victim or Representative of the Tobacco-Victim, as applicable, confirms that they have reviewed and agree to the collection, use, and disclosure of personal information as described below.

All personal information collected by the Claims Administrator through the Claims Process will be kept confidential in accordance with the *Personal Information Protection and Electronic Documents Act*, S.C. 2000, c. 5 and the Privacy Policy found on the Claims Administrator's website at www.TobaccoClaimsCanada.ca/en/Home/Privacy. This information is collected only for the purpose of administering the PCC Compensation Plan and to assess the PCC-Claimant's eligibility to receive compensation.

The personal information of the Tobacco-Victim, including personal health information, may be collected, used, and disclosed by the Claims Administrator and the PCC Agent to provide Agent and Claims Administration services. It will not be disclosed without the express written consent of the Tobacco-Victim or the Representative of the Tobacco-Victim, except as provided for in the PCC Compensation Plan, as required by law or Court Order, or if it is necessary to share with a future Court-appointed Claims Administrator in connection with the PCC Claims Process. This information may not be used or disclosed for any other purpose.

PART 1: INFORMATION ABOUT THE TOBACCO-VICTIM

IMPORTANT: If you have questions or require any assistance, contact the PCC Agent free of charge. For additional information, please visit the Claim Administrator's website at www.TobaccoClaimsCanada.ca.

If you are the Representative of a Tobacco-Victim, living or deceased, please read **Attachment A** before completing this Claim Form.

The Tobacco-Victim

1) Tobacco-Victim's full legal name?

Last Name:

First Name:

Middle Name (if applicable):

2) Tobacco-Victim's date of birth (DD/MM/YYYY):

3) Tobacco-Victim's Health Insurance Card Number:

4) Province/Territory that issued the Tobacco-Victim's Health Insurance Card:

5) Did the Tobacco-Victim reside in Canada on the date of diagnosis with primary lung cancer, primary squamous cell carcinoma of the larynx, oropharynx, hypopharynx (throat cancer), emphysema or COPD (GOLD Grade III or IV)?

- ☐ Yes - in a Province or Territory outside of Quebec ☐ Yes - in Quebec ☐ No

Province/Territory:

6) Does the Tobacco-Victim currently reside in Canada?

- ☐ Yes ☐ No ☐ Not Applicable — the Tobacco-Victim is deceased

Note: To be entitled to compensation, the Tobacco-Victim must have been a resident of Canada at the time of diagnosis as well as a resident of Canada at the time of submitting the Claim Form to the Claims Administrator, if living, or on the date of death, if deceased.

Representative of Tobacco-Victim

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If you are the Tobacco-Victim, you **do not need** to fill out Questions 7 through 9. Please proceed to Question 10.

Representative of Living Tobacco-Victim

Please only fill out Question 7 and 8 if you are the Representative of a **living** Tobacco-Victim.

7) Full legal name of the Representative of the living Tobacco-Victim:

Last Name:

First Name:

Note: The Representative must attach documents to verify their authority to make a claim on behalf of the living Tobacco-Victim. See **Attachment A, Section 2** for the list of acceptable documents required to prove the Representative's legal authority to submit a claim on behalf of a living Tobacco-Victim.

8) Pursuant to what document listed in **Attachment A, Section 2** is the Representative acting?

- ☐ I acknowledge that I must attach a copy of the document listed in **Attachment A, Section 2** with the PCC Claim Form and submit it with my completed Claim Form to the Claims Administrator by the deadline.

Representative of Deceased Tobacco-Victim

Please only fill out Questions 9a to 9e if you are the Representative of a **deceased** Tobacco-Victim.

9a) Was the Tobacco-Victim alive on March 8, 2019?

- ☐ Yes ☐ No

9b) Did the Tobacco-Victim reside in Canada on the date of their death?

- ☐ Yes ☐ No

9c) What is the Tobacco-Victim's date of death? (DD/MM/YYYY)

9d) Full legal name of the Representative of the estate of the deceased Tobacco-Victim:

Last Name:

First Name:

Note: The Representative must attach documents to prove the Tobacco-Victim's death and date of death and verify their authority to make a claim on behalf of the estate of the deceased Tobacco-Victim. See **Attachment A, Section 1** for the list of acceptable documents required to prove the Tobacco-Victim's death and date of death and the Representative's legal authority to submit a claim on behalf of the estate of the deceased Tobacco-Victim.

9e) Pursuant to what document listed in **Attachment A, Section 1B** is the Representative acting?

- ☐ I acknowledge that I must attach a copy of the documents listed in **Attachment A, Sections 1A and 1B** with the PCC Claim Form and submit them with my completed Claim Form to the Claims Administrator by the deadline.

Contact Information

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Note: If you are the Tobacco-Victim, insert your mailing address and contact information. If you are the Representative of a living Tobacco-Victim or the Representative of the Estate of a deceased Tobacco-Victim, provide your own mailing address and contact information.

10) Provide your mailing address:

Number:	Street Name:	Apartment/Suite/PO Box No.:	
City/Town:	Province:	Postal Code:	Country:

11) Provide your contact information:

Phone:	Email:

12) Which language should be used for communication?

- ☐ French ☐ English

13) What is your preferred method of contact?

- ☐ Telephone ☐ Email ☐ Mail

PART 2: PROOF OF DIAGNOSIS

Diagnosis Between March 8, 2015 and March 8, 2019 (inclusive)

14) Was the Tobacco-Victim diagnosed with any of the following diseases **between March 8, 2015 and March 8, 2019 (inclusive)? For all that apply, indicate the date of diagnosis and the place where the Tobacco-Victim resided on the date of diagnosis. If you do not recall the exact date of the Tobacco-Victim's diagnosis, please provide the most accurate estimate possible, as this information will be verified by the Claims Administrator.**

Note: The place of residence is the Province or Territory that issued the Tobacco-Victim's health insurance card and/or driver's license.

☐ **Primary Lung Cancer**

Date of diagnosis:	Place of residence on date of diagnosis
(DD/MM/YYYY)	

☐ **Primary squamous cell carcinoma of the larynx, oropharynx, or hypopharynx (Throat Cancer)**

Date of diagnosis:	Place of residence on date of diagnosis
(DD/MM/YYYY)	

☐ **Emphysema or COPD (GOLD Grade III or IV)**

Date of diagnosis:	Place of residence on date of diagnosis
(DD/MM/YYYY)	

Note: In the case of recurrence or relapse, please indicate the date of the first diagnosis only

Proof of the Tobacco-Victim's Diagnosis

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15) Medical documentation is required to confirm the Tobacco-Victim's diagnosis. For Quebec PCC-Claimants only, you may authorize and the Claims Administrator may thereafter request confirmation of your diagnosis from Quebec health registries. For all other Claimants, you are responsible for obtaining and submitting this documentation. Obtaining medical records can take time. We encourage you to begin the process as early as possible to avoid delays.

[For Quebec PCC-Claimants only]

☐ **I hereby authorize the Claims Administrator to obtain a copy of the Tobacco-Victim's medical information relating to the diseases/diagnoses referenced in Question 14 above, and authorize the PCC Agent or QCAP Agent, MSSS and/or the RAMQ, as applicable, to provide the Claims Administrator with copies of any of the following documents:**

- **A confirmation of the Tobacco-Victim's diagnosis from the Quebec Cancer Registry;**
- **An extract from RAMQ files confirming the Tobacco-Victim's diagnosis;**
- **An extract from the MED-ÉCHO database confirming the Tobacco-Victim's diagnosis; and**
- **All other medical files relating to the Tobacco-Victim.**

If an official confirmation of disease/diagnosis cannot be made through these means, the Claims Administrator will contact you to request the submission of an alternative method of proof. Do not submit any alternative evidence unless it has been explicitly requested by way of a Notice from the Claims Administrator titled "Notice to Provide Alternative Proof."

[For Tobacco-Victims resident in all other Provinces and Territories, or Quebec PCC-Claimants who do not provide the authorization above]

☐ **I acknowledge that I must attach a copy of at least one of the documents listed in Question 16 with the PCC Claim Form and submit it with my completed Claim Form to the Claims Administrator by the deadline.**

16) Unless you are a Quebec PCC-Claimant who has provided the authorization noted in Question 15, you **must attach at least one** of the following documents to verify the diagnosis and date of diagnosis between March 8, 2015 and March 8, 2019 (inclusive). Please check which document is attached as part of your Claim.

Primary Documents:

- ☐ **For Lung Cancer or Throat Cancer - A copy of a pathology report confirming the diagnosis.**
- ☐ **For Emphysema or COPD (GOLD Grade III or IV) - A copy of a report of a spirometry test (performed between March 8, 2015 and March 8, 2019) that first demonstrated a FEV1 (non-reversible) of less than 50% of the predicted value to first establish a diagnosis of Emphysema or COPD (GOLD Grade III or IV).**

If you are unable to provide one of the above documents, you may instead submit one of the following alternatives:

- ☐ **A copy of an extract from the Tobacco-Victim's medical file; or**
- ☐ **A completed Physician Form (available on www.TobaccoClaimsCanada.ca); or**
- ☐ **A written statement from a Physician (of the Tobacco-Victim, or another physician having access to the medical record), along with at least one of the following records:**
 - **For Lung Cancer or Throat Cancer: pathology report; operative report; biopsy report; MRI report; CT scan report; PET scan report; x-ray report; and/or sputum cytology report; or**
 - **For Emphysema or COPD (GOLD Grade III or IV): spirometry report or CT scan.**

Note: The PCC Agent can provide guidance on how to obtain the necessary documents for your Claim. However, the PCC Agent cannot guarantee that records will be located or that the records obtained will meet the PCC Compensation Plan's evidentiary requirements. The PCC Agent accepts no responsibility if records cannot be obtained or if the records are incomplete, inaccurate, or insufficient to support your Claim. You are responsible for obtaining and submitting the documentation in support of your Claim.

Questions? Need Help? Call 1-888-482-5852 or email PCCAgent@TobaccoClaimsCanada.ca

PART 3: AUTHORIZATION TO REQUEST, DISCLOSE AND RELEASE RECORDS

17) I understand that in order to process this Claim, it will be necessary for personal medical information relating to the Tobacco-Victim to be disclosed to the Claims Administrator and the PCC Agent. This may include personal health information held by physicians, health care professionals, hospitals, clinics, public health registries, databases, or other third parties involved in the diagnosis or treatment of the Tobacco-Victim. For Quebec Tobacco-Victims, this may include the MSSS and/or RAMQ information as noted above.

By signing and submitting this Claim Form, I authorize the Claims Administrator and the PCC Agent to request and obtain copies of the Tobacco-Victim's medical information, including extracts from any public health registries or databases, for the purpose of confirming the diseases and diagnoses referenced in Question 14 of this Form. I further authorize any medical professional, public health registry, hospital or agency to provide the Claims Administrator and the PCC Agent with copies of any such medical information.

I understand that this information will be used and disclosed solely as necessary to administer the Claim in accordance with the PCC Compensation Plan and the court-approved CCAA Plans.

☐ **By checking this box, I understand and agree to the above authorization.**

PART 4: PROOF OF SMOKING HISTORY

18) The Tobacco-Victim started smoking cigarettes:

☐ Before January 1, 1976; ☐ On or after January 1, 1976.

19a) Between January 1, 1950 and November 20, 1998, the Tobacco-Victim smoked approximately _____ cigarettes per day for approximately _____ years.

OR

19b) If the number of cigarettes the Tobacco-Victim smoked varied between January 1, 1950 and November 20, 1998, provide a summary below of the number of cigarettes the Tobacco-Victim smoked during that period of time:

- a) Smoked approximately _____ cigarettes per day between (YYYY) _____ and (YYYY) _____;
- b) Smoked approximately _____ cigarettes per day between (YYYY) _____ and (YYYY) _____;
- c) Smoked approximately _____ cigarettes per day between (YYYY) _____ and (YYYY) _____;
- d) Smoked approximately _____ cigarettes per day between (YYYY) _____ and (YYYY) _____;
- e) Smoked approximately _____ cigarettes per day between (YYYY) _____ and (YYYY) _____.

If more space is needed, attach additional sheet(s) to this Claim Form

Note: You may use the calculator available at www.TobaccoClaimsCanada.ca/en/HomePCC/Calculator to help determine the number of cigarettes the Tobacco-Victim smoked.

20) The Tobacco Victim regularly smoked the following brands of cigarettes (select all that apply):

☐ **Accord**

- Accord KF

☐ **Avanti/Light**

☐ **B&H**

- B&H 100 Del.UL.LT/MEN
- B&H 100 F
- B&H 100 F Menthol
- B&H Light Menthol
- B&H Lights
- B&H Special KF
- B&H Special Lights KF

☐ **Belmont**

- Belmont KF

☐ **Belvedere**

- Belvedere Extra Mild

☐ **Camel**

☐ **Cameo**

- Cameo Extra Mild

☐ **Craven "A"**

- Craven "A" Special
- Craven "A" Light
- Craven "A" Ultra Light/Mild

☐ **Craven "M"**

- Craven "M" KF
- Craven "M" Special

☐ **du Maurier**

- du Maurier Light
- du Maurier Special
- du Maurier Ultra Light

☐ **Dunhill**

- Dunhill KF

☐ **Export**

- Export "A"
- Export "A" Lights
- Export "A" Medium
- Export "A" Extra Light
- Export "A" Special Edition
- Export "A" Ultra Light
- Export Mild
- Export Plain

☐ **LD**

☐ **Macdonald**

- Macdonald Menthol

☐ **Mark Ten**

- Mark Ten Filter

☐ **Matinee**

- Matinee Extra Mild
- Matinee Slims/Menthol
- Matinee Special/Menthol

☐ **Medallion**

☐ **More**

☐ **North American Spirit**

☐ **Number 7**

- Number 7 Lights

☐ **Peter Jackson**

- Peter Jackson Extra Light KF

☐ **Player's**

- John Player's Special
- Player's Extra Light
- Player's Filter
- Player's Light
- Player's Medium
- Player's Plain

☐ **Rothmans**

- Rothmans Extra Light
- Rothmans KF
- Rothmans Light
- Rothmans Special
- Rothmans UL LT KF

☐ **Select Special/Ultra Mild/Menthol**

☐ **Spirit**

☐ **Vantage**

- Vantage KF
- Vantage Light/Menthol

☐ **Viscount**

- Viscount #1 KF
- Viscount Extra Mild/Menthol

☐ **Winston**

PART 5: STATUTORY DECLARATION AND SIGNATURE

INSTRUCTIONS TO COMPLETE STATUTORY DECLARATION

The Tobacco-Victim or Tobacco-Victim's Representative must sign the Statutory Declaration below in the presence of a Commissioner of Oaths, sometimes referred to as a Commissioner for taking Affidavits. Signing can be done remotely.

A Commissioner of Oaths is a person who is authorized to take affidavits or declarations by asking you to swear or affirm that the statements in a document are true. Every lawyer and some paralegals are Commissioners of Oaths.

If you need assistance, you may contact the PCC Agent, Epiq, by phone Toll-Free (in Canada) at 1-888-482-5852, by email at PCCAgent@TobaccoClaimsCanada.ca, or online at www.TobaccoClaimsCanada.ca/en/HomePCC who can arrange for a Commissioner of Oaths to commission the signing of your Statutory Declaration before you submit your Claim Form to the Claims Administrator, free of cost.

The Commissioner of Oaths must complete Part 5 and, if an interpreter was used, Part 5A.

If an interpreter was used to complete this Claim Form, the interpreter must complete Parts 5B and 5C.

I, _____, solemnly declare that the information I have provided on this Claim Form is true and correct and that the documents submitted in support of my claim are genuine and have not been modified in any way whatsoever.

I make this solemn declaration conscientiously believing it to be true and knowing that it is of the same force and effect as if made under oath.

Where someone has helped me with this Claim Form, or where an interpreter was used, that person has read to me everything they wrote and included with this Claim Form, if necessary to allow me to understand the content of this completed Claim Form and any attachments to it, and I confirm that this information is true and correct.

I am not making any false or exaggerated Claims to obtain compensation that I am not entitled to receive.

Declared before me

at _____ in _____

(Town/City/Municipality)

(Province/Territory)

this _____ day of _____, 20____.

Signature of Tobacco-Victim or the Representative
of Tobacco-Victim

Signature of Commissioner of Oaths/Notary Public

Full Name of Commissioner of
Oaths/Notary Public

Please place Commissioner
of Oath's stamp/Notarial
Seal here, if applicable.

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Part 5A: Certification by Commissioner of Oaths/Notary Public when an Interpreter is used (only complete this Section if it is applicable).

I certify that this Declaration Form was read or interpreted in my presence to the declarant, the declarant appeared to understand it, and the declarant signed the Declaration or placed their mark on it in my presence.

Signature of Commissioner of
Oaths/Notary Public

Print Name of Commissioner of
Oaths/Notary Public

Part 5B: Interpreter Information (only complete this Section if it is applicable).

Full Name (First Name, Middle
Name, and Last Name):

Address:

Business Phone:

Email Address:

Part 5C: Certification by Interpreter if used (only complete this Section if it is applicable).

I certify that I correctly interpreted this Claim Form in _____
(specify language) to the declarant, and the declarant appeared to understand it.

Signature of Interpreter

Print Name of Interpreter

Date

Signed

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ATTACHMENT A:
ACCEPTABLE PROOF OF LEGAL AUTHORITY DOCUMENTS

SECTION 1 - Documentation Required if the Tobacco-Victim is deceased.

*If the Tobacco-Victim is still alive, please see **SECTION 2 - Documentation Required if the Tobacco-Victim is alive at the time of filing the Claim** (below).*

If the Tobacco-Victim is deceased, but was alive **on March 8, 2019**, their estate may still be eligible for compensation under the PCC Compensation Plan.

Section 1A) The Representative **must attach at least one** of the following documents (a certified copy, photocopy, or certified electronic extract of the document will be accepted by the Claims Administrator) to this Claim Form and submit it to the Claims Administrator by the deadline:

- Death Certificate or Certificate of Death;
- Short Form Death Certificate;
- Long Form Death Certificate;
- Registration of Death or Death Registration;
- Registration of Death or Death Registration with Cause of Death Information;
- Medical Certificate of Death issued by an attending doctor or a coroner;
- Interim Medical Certificate of Death issued by an attending doctor or a coroner;
- Statement of Death issued by a funeral service provider;
- Memorandum of Notification of Death issued by the Chief of National Defense Staff; or
- Statement of Verification of Death from the Department of Veterans Affairs.

Section 1B) Additionally, you **must attach** documentation of your legal authority based on the province or territory where the deceased Tobacco-Victim resided at the time of their death.

**Province where the
deceased Tobacco-Victim
lived at time of death**

**Acceptable Documents
(Choose one of the following)**

The Tobacco-Victim has Indian Status and resided on a reserve or on Crown lands

- Notice of Appointment as Estate Administrator or Notice of Appointment as Estate Executor
- Document showing Indigenous Services Canada or Crown-Indigenous Relations and Northern Affairs Canada is acting as the Estate Administrator

British Columbia	➤ Grant of Probate ➤ Grant of Administration with a Will ➤ Grant of Administration without a Will ➤ Order under s. 103 WESA — Administrator Pending Litigation ➤ Order under s. 132 WESA — Conditional or Limited Administration ➤ Grant under s. 103/132 WESA — Pendente Lite / Ad Colligenda ➤ Grant under s. 134 WESA — Guardian of Minor ➤ Grant under s. 138 WESA — Resealed or Ancillary ➤ Grant under s. 139 WESA — To Attorney ➤ Court Order under s. 159 WESA — Substitute Representative ➤ Grant under s. 159 WESA — de Bonis Non
Alberta	➤ Grant of Probate ➤ Grant of Double Probate ➤ Grant of Administration without a Will ➤ Letters of Administration without a Will ➤ Grant of Administration with Will ➤ Letters of Administration with Will ➤ Document indicating the appointment of Public Trustee
Saskatchewan	➤ Grant/Letters Probate with a Will ➤ Grant/Letters of Probate (small estate application) ➤ Grant/Letters of Administration without a Will ➤ Letters of Administration with Will Annexed
Manitoba	➤ Grant of Probate ➤ Letters of Administration (estates over \$10,000) ➤ Letters of Administration with Will Annexed ➤ Administration Order (estates under \$10,000)

Ontario	➤ Certificate of Appointment of Estate Trustee without a Will ➤ Certificate of Appointment of Estate Trustee with a Will ➤ Certificate of Appointment of Estate Trustee with a Will (Limited Assets) ➤ Small Estate Certificate ➤ Certificate of Appointment of Succeeding Estate Trustee with Will ➤ Certificate of Appointment of Succeeding Estate Trustee with Will (limited assets) ➤ Certificate of Appointment of Succeeding Estate Trustee without a Will ➤ Certificate of Appointment of Estate Trustee (during litigation) ➤ Resealed Estate Trustee Appointment ➤ Foreign Estate Trustee Appointment without a Will ➤ Court Status Certificate
New Brunswick	➤ Letters of Administration without a Will ➤ Letters Probate with a Will ➤ Letter of Administration with a Will Annexed ➤ Ancillary Letters of Administration/Probate
Nova Scotia	➤ Grant of Administration without a Will ➤ Grant of Probate ➤ Grant of Administration with Will Annexed ➤ Ancillary Grant of Probate ➤ Ancillary Grant of Administration ➤ Appointment of a Public Trustee to Administer an Estate Valued at \$25,000 or less
Prince Edward Island	➤ Letters of Administration without a Will ➤ Grant/Letters of Probate ➤ Letters of Administration with the Will Annexed ➤ Ancillary Letters of Administration/Probate ➤ Will with supporting affidavit (where estate property is valued at not more than \$5,000)

Newfoundland and Labrador	➤ Grant/Letters of Probate ➤ Letters of Administration without a Will ➤ Letters of Administration CTA with a Will Annexed (<i>cum testamento annexo</i>) ➤ Letters of Administration DBN (De Bonis Non) ➤ Letters of Administration CTA DBN ➤ Ancillary Letters Probate ➤ Ancillary Letters of Administration ➤ Satisfactory evidence under s. 13 of the Public Trustee Act (for estates valued at \$10,000 or less)
Yukon	➤ Grant/Letters of Probate ➤ Grant/Letters of Administration without a Will ➤ Grant/Letters of Administration with Will Annexed
Northwest Territories	➤ Grant of Probate ➤ Grant of Administration ➤ Grant of Administration with Will Annexed ➤ Grant of Double Probate ➤ Declaration of Small Estate (estate net value is less than \$35,000)
Nunavut	➤ Grant of Probate ➤ Certificate of Appointment of Estate Trustee with a Will ➤ Letters of Administration without a Will ➤ Letters of Administration with Will Annexed
<u>Province where the deceased Tobacco-Victim lived at time of death</u> <u>Acceptable Documents</u>	
Quebec	Provide Both of the following: ➤ Will Search Certificate from the Chambres des notaires du Quebec AND ➤ Will Search Certificate from the Bar of Quebec AND If the Deceased Tobacco-Victim died with a Will, choose one of the following: ➤ Copy of the notarial Will

- Copy of the judgment probating the Will
- Certified copy of the Will and notarial minutes of probate
- Certified copy of notarial appointment of liquidator including a certified copy of the Will
- Copy of appointment of liquidator signed by heirs including a certified copy of the Will
- Certified copy of a court order appointing the liquidator including a certified copy of the Will

If the deceased Tobacco-Victim died without a Will, choose one of the following:

- Copy of the appointment of liquidator signed by heirs entitled to name liquidator
- Certified copy of the court order appointing the liquidator

If you need any assistance, please reach out to the PCC Agent, Epiq, at the following contact information:

Email: PCCAgent@TobaccoClaimsCanada.ca

Phone: 1-888-482-5852

Website: www.TobaccoClaimsCanada.ca

SECTION 2 - Documentation required if the Tobacco-Victim is alive at the time of filing the Claim

If the Tobacco-Victim is alive, the Representative **must attach at least one** of the following documents to this Claim Form and submit it to the Claims Administrator by the claims deadline to verify that they have the right and are authorized to make a claim on behalf of the living Tobacco-Victim (a certified copy, photocopy or certified electronic extract of the document will be accepted by the Claims Administrator):

<u>Province the Tobacco-Victim Resides in at the time of filing</u>	<u>Acceptable Documents</u>
If the Tobacco-Victim has Indian Status and resides on a reserve or on Crown lands	➤ Document showing the Representative has been appointed as the Tobacco-Victim's Administrator of Property.
British Columbia	➤ Power of Attorney ➤ Limited Power of Attorney ➤ Enduring Power of Attorney ➤ Enduring Limited Power of Attorney ➤ Springing Power of Attorney ➤ Representation Agreement for legal affairs (under the <i>Representation Agreement Act</i>)

	297 ➤ Certificate of Incapability (under the <i>Adult Guardianship Act</i>) ➤ Court order appointing Representative (under <i>Patients Property Act</i>)
Alberta	➤ Power of Attorney/Enduring Power of Attorney ➤ Document showing that the Representative has been appointed as the trustee for the Tobacco-Victim ➤ Supporting Decision Making Authorization ➤ Document confirming the Public Guardian and Trustee's appointment as trustee ➤ Conditional Enduring Power of Attorney appointing an attorney and has either: • come into force on the lack of capacity of the Tobacco-Victim; or • come into force on another contingent event and Tobacco-Victim still has capacity
Saskatchewan	➤ Continuing Power of Attorney for Property ➤ Property Power of Attorney/Enduring Power of Attorney for Property ➤ Contingent Power of Attorney for Property that has either: • come into force on the lack of capacity of the Tobacco-Victim; or • come into force on another contingent event (Tobacco-Victim has capacity) ➤ Court Appointment — co-decision maker for property ➤ Court Appointment — temporary property guardian ➤ Court Appointment — property guardian
Manitoba	➤ Power of Attorney ➤ Enduring Power of Attorney ➤ Springing Power of Attorney that has either: • come into force on the mental incompetence of the Tobacco-Victim; or • come into force on another contingent event (Tobacco-Victim is competent) ➤ Order of Committeeship — for Committee of Property ➤ Order of Committeeship — for Committee of Property and Personal Care

	➤ Document confirming the Public Guardian and Trustee is appointed as Committee of Property and Personal Care ➤ Document confirming the Representative's appointment as substitute decision-maker for property matters
Ontario	➤ Power of Attorney for Property ➤ Continuing Power of Attorney for Property ➤ Proof of Representative's appointment as Guardian of Property from the Office of the Public Guardian and Trustee ➤ Proof of Representative's appointment as Guardian of Property by the Court
New Brunswick	➤ Power of Attorney for Property ➤ Enduring Power of Attorney for Property ➤ Enduring Power of Attorney for Property and Personal Care ➤ Document showing that the Representative has been appointed as the Committee of the Estate of the Tobacco-Victim ➤ Proof of appointment as decision-making supporter for financial matters
Nova Scotia	➤ Power of Attorney ➤ Enduring Power of Attorney ➤ Court Appointed Guardian Document ➤ Court-appointed Representative - financial matters per Representation Order
Prince Edward Island	➤ General Power of Attorney ➤ Court appointment as the Committee of the Estate
Newfoundland and Labrador	➤ Enduring Power of Attorney ➤ Power of Attorney ➤ Court-issued Letters of Guardianship
Yukon	➤ Enduring Power of Attorney ➤ Document confirming the Representative's appointment as Temporary Guardian with financial authority ➤ Guardianship Order

Northwest Territories	299 ➤ Power of Attorney that has: ▪ come into force on the mental incapacity of the Tobacco-Victim; or ▪ come into force on another contingent event (Tobacco-Victim has capacity); or ▪ remains valid despite any later mental incapacity of the Tobacco-Victim ➤ Enduring Power of Attorney ➤ Springing Power of Attorney that has either: ▪ come into force on the incapacity of the Tobacco-Victim; or ▪ come into force on another contingent event (Tobacco-Victim has capacity) ➤ Order Appointing the Representative as the Trustee ➤ Order Appointing the Public Trustee as Trustee
Nunavut	➤ Power of Attorney that has: ▪ come into force on the mental incapacity of the Tobacco-Victim; or ▪ come into force on another contingent event (Tobacco-Victim still has capacity); or ▪ remains valid despite any later mental incapacity of the Tobacco-Victim ➤ Enduring Power of Attorney ➤ Springing Power of Attorney that has either: ▪ come into force on the mental incapacity of the Tobacco-Victim; or ▪ come into force on another contingent event (Tobacco-Victim still has capacity) ➤ Order appointing the Representative as Trustee for the Tobacco-Victim ➤ Order Appointing the Representative as the Trustee ➤ Order Appointing the Public Trustee as Trustee

Quebec	300 ➤ Power of Attorney with court-filed proceedings for mandate homologation or adult tutorship ➤ Protection mandate with certified judgment of homologation ➤ Certified copy of the judgment ordering the tutorship ➤ Certified copy of minutes and conclusions of the notary opening tutorship ➤ Certified copy of the judgment ordering Curatorship, dated prior to November 1, 2022 ➤ Certified copy of minutes and conclusions of the notary ordering curatorship, dated prior to November 1, 2022 ➤ Detailed mandate with court-filed proceedings (incl. file #) for mandate homologation or adult tutorship ➤ Certified court order appointing a provisional property administrator for the claimant

If you need any assistance, please reach out to the PCC Agent, Epiq, at the following contact information:

Email: PCCAgent@TobaccoClaimsCanada.ca
Phone: 1-888-482-5852
Website: www.TobaccoClaimsCanada.ca

Attachment D

Official Court Notice

If you smoked regularly before Nov. 20, 1998, and were diagnosed with a tobacco-related disease before March 12, 2012, you may qualify for \$24,000-\$100,000 from a landmark settlement for Quebec residents.

QCAP Plan—Detailed Information

Why is there a settlement? In March 2019, Imperial Tobacco Canada Limited, Rothmans, Benson & Hedges Inc. and JTI-Macdonald Corp (the “Tobacco Companies”) began insolvency proceedings in Canada under the *Companies’ Creditors Arrangement Act*, R.S.C. 1985, c. C-36 (“CCAA”), following a class-action judgment in Quebec ordering them to pay over \$13.5 billion. As part of the CCAA proceedings, the Tobacco Companies participated in court-supervised mediation to reach a Global Settlement with their creditors, including all Provinces and Territories, the Plaintiffs from the Quebec class action, their representative counsel, and PCC Representative Counsel appointed by the Court to represent Canadian tobacco-victims, other than those covered by the Quebec class action. On March 6, 2025, Chief Justice Geoffrey B. Morawetz of the Ontario Superior Court of Justice (Commercial List) (“CCAA Court”) approved the Settlement.

What are “QCAP” and “PCC”? As part of the Settlement, two compensation plans were created to compensate eligible smokers and ex-smokers diagnosed with Lung Cancer, Throat Cancer or Emphysema or COPD (GOLD Grade III or IV):

1. The Pan-Canadian Claimants’ Compensation Plan (“PCC Compensation Plan”) – for people diagnosed in Canada between March 8, 2015 and March 8, 2019, inclusive of those dates, and in some cases their estates; and
2. The Quebec Class Action Administration Plan (“QCAP Plan”) – for *Blais* Class Members diagnosed in Quebec before March 12, 2012, and their heirs.

This document is specifically related to the QCAP Plan. Information about the PCC Compensation Plan is available at www.TobaccoClaimsCanada.ca.

Who is a “Tobacco-Victim”? A “Tobacco-Victim” is a person who suffers from a Tobacco-Related Disease. Tobacco-Victims who meet the QCAP Eligibility Criteria are eligible for compensation under the QCAP Plan. If the Tobacco-Victim is deceased, but was alive on November 20, 1998, their estate or heirs (referred to as a “Succession Claimant”) are eligible for compensation.

Who is a “Succession Claimant”? A “Succession Claimant” is either (i) the liquidator of the estate of a deceased Tobacco-Victim, (ii) an Heir of a deceased Tobacco-Victim or (iii) an heir of an Heir of a deceased Tobacco-Victim. There is a specific claim form, the QCAP Succession Claim Form, to be used by Succession Claimants. The QCAP Succession Claim Form outlines the documentation required by a Succession Claimant to prove that they are entitled to file the claim.

Who is an “Heir” of a Tobacco-Victim? An “Heir” for purposes of the QCAP Plan, is a person (i) who is named in the deceased Tobacco-Victim’s will or in a registered marriage contract, or (ii) who is entitled by operation of law per the Civil Code of Quebec to share in the deceased Tobacco-Victim’s estate. If the Heir is deceased, the estate or heirs of the Heir are entitled to the Heir’s share of the compensation payment.

What does “QCAP Eligibility Criteria” mean? In a legal context, “criteria” means standards on which a judgment or decision may be based. To be eligible to receive compensation under the QCAP Plan, a Tobacco-Victim must satisfy four criteria types: (1) smoking history; (2) disease diagnosis before March 12, 2012; (3) resident of Quebec; and (4) alive on November 20, 1998.

QCAP COMPENSATION AMOUNTS AND PAYMENTS

How much compensation could I be approved for? The following table shows the *maximum* amounts available to claimants that meet the Eligibility Criteria for each disease covered by the QCAP and PCC Compensation Plans. Eligible claimants will receive compensation for the one disease that results in the highest payment.

Disease	You started smoking before January 1, 1976	You started smoking on or after January 1, 1976
Primary Lung Cancer or Primary Throat Cancer	\$100,000 QCAP \$60,000 PCC	\$80,000 QCAP \$48,000 PCC
Emphysema or COPD (GOLD Grade III or IV)	\$30,000 QCAP \$18,000 PCC	\$24,000 QCAP \$14,400 PCC

If my Claim is approved, will I receive the amount in the table? The table shows the *maximum* payment amount. Final payments may be reduced on a *pro rata* (proportionate) basis if the amount available to the QCAP Plan is not enough to pay all eligible claims. Final payment amounts will only be determined after the QCAP Claims Deadline has passed and all claims have been processed.

When could I receive a payment? If your claim is approved, payment will be issued after the QCAP Claim Deadline of **[Day Month] 20YY**, once all claims have been reviewed and decisions finalized. Once a payment date has been determined, it will be posted at www.TobaccoClaimsCanada.ca.

QCAP ELIGIBILITY CRITERIA AND REQUIRED PROOF

To qualify for compensation under the QCAP Plan, the Tobacco-Victim must meet all of the following QCAP Eligibility Criteria.

Smoking History

Which cigarettes brands are covered? The Tobacco-Victim must have smoked cigarettes sold by the Tobacco Companies in Canada. A complete list of eligible brands is provided in **Attachment A - Cigarettes Sold by The Tobacco Companies**.

How many cigarettes must have been smoked to qualify? The Tobacco-Victim must have smoked at least 87,600 cigarettes sold by the Tobacco Companies in Canada between January 1, 1950 and November 20, 1998. This is also called “Twelve Pack-Years”, which means any combination of cigarettes sold by the Canadian Tobacco Companies that adds up to 87,600. For example:

- 10 cigarettes smoked per day for 24 years ($10 \times 365 \times 24$) = 87,600 cigarettes sold by the Canadian Tobacco Companies;
- 20 cigarettes smoked per day for 12 years ($20 \times 365 \times 12$) = 87,600 cigarettes sold by the Canadian Tobacco Companies.

The smoking can be over multiple time periods, even with breaks in between. To help determine the number of cigarettes smoked, a calculator is available at www.TobaccoClaimsCanada.ca.

How to prove Smoking History? You will be asked to provide the Tobacco-Victim’s smoking history on the QCAP Claim Form, which must be signed and sworn before a Commissioner of Oaths or Notary Public.

Compensable Disease Diagnosis Before March 12, 2012

What diseases qualify for compensation? The Tobacco-Victim must have been diagnosed with at least one of the following diseases (the “**Compensable Diseases**”) before March 12, 2012 to qualify for compensation:

1. Primary lung cancer; or
2. Primary cancer (squamous cell carcinoma) of the larynx, oropharynx, or the hypopharynx (throat cancer); or
3. Emphysema or COPD (GOLD Grade III or IV).

If the Tobacco-Victim’s diagnosis date of at least one of the above diseases was between March 8, 2015 and March 8, 2019 (inclusive of those dates) you may be eligible for compensation as part of the PCC Plan provided the Tobacco-Victim was alive on March 8, 2019. If this is the case, please contact the PCC Agent (Epiq) for more information.

What does “primary cancer” mean? “Primary cancer” refers to the original site where the cancer first develops. Sometimes cancer cells spread to other parts of the body - this is called a secondary or metastatic cancer.

What does “COPD (GOLD Grade III or IV)” mean? The Global Initiative for Chronic Obstructive Lung Disease (“GOLD”) developed a four-grade COPD classification system based upon severity of airflow limitation and other diagnostic parameters. GOLD Grade III (severe) and IV (very severe) classifications represent the two most severe categories of disease.

How do I show proof of diagnosis? The Régie de L'assurance Maladie du Québec (RAMQ) and the Ministère de la Santé et des Services sociaux (MSSS) may hold, in the Registre québécois du cancer and in the MED-ÉCHO database respectively, the information necessary to establish that a Tobacco-Victim was diagnosed with a Compensable Disease before March 12, 2012 (referred to as an “**Official Confirmation**”). In the Claim Form, the Tobacco-Victim or the Succession Claimant, as the case may be, will authorize the Claims Administrator to request an Official Confirmation from these sources. If an Official Confirmation is obtained, this constitutes proof of diagnosis, and the claimant will not need to submit any supplemental information.

What if an Official Confirmation cannot be obtained? If an Official Confirmation cannot be obtained from RAMQ or MSSS, you will be notified by the QCAP Agent or the Claims Administration. In such case, you will need to provide alternative proof. This consists of:

- For Lung Cancer and Throat Cancer - a copy of a pathology report confirming the diagnosis;
- For Emphysema and COPD - a copy of a report of a spirometry test (performed before March 12, 2012) that demonstrates a FEV1 (non-reversible) of less than 50% of the predicted value.

If you are unable to provide one of the above documents, you may submit one of the following alternatives confirming the diagnosis:

- a copy of an extract from a medical file, confirming the diagnosis;
- a completed Physician's Form (available on www.TobaccoClaimsCanada.ca);
- a written statement from a Physician (of the Tobacco-Victim or another physician having access to the Tobacco-Victim's medical records) along with at least one of the following records:
 - For Lung or Throat Cancer: pathology report, operative report, biopsy report, MRI report, CT scan report, PET scan report, X-ray report, sputum cytology report.
 - For Emphysema or COPD (GOLD Grade III or IV): Spirometry report; or CT scan report.

Please note that you do not need to submit alternative proof unless it has been specifically requested of you.

What if I was diagnosed with another smoking-related disease? Only Lung Cancer, Throat Cancer, Emphysema and COPD (GOLD Grade III or IV) are covered by the QCAP Plan. However, a \$1 billion charitable foundation has been created as part of the CCAA Plans to fund research, programs and initiatives aimed at improving outcomes in Tobacco-related Diseases, which will indirectly benefit those who do not qualify for direct compensation. To learn more about the charitable foundation go to: **[insert URL for website]**.

Residency Questions on the QCAP Claim Form

Under the QCAP Plan, a person's place of residence is the province or territory that issued their health insurance card and/or their driver's licence. A Tobacco-Victim must answer “Yes” to the applicable residency questions on the QCAP Claim Form in order to be eligible for compensation:

1. Residency at time of Diagnosis. The QCAP Claim Form asks, “Did the Tobacco-Victim reside in Quebec on the date of diagnosis?” The residence on the date of diagnosis may generally be established based on a Tobacco-Victim's health insurance card number issued by Quebec that appears on the medical documents showing a QCAP Compensable Disease.
2. Residency at time of submitting a claim (or at time of death). If the Tobacco-Victim is living, the QCAP Claim Form asks: “Does the Tobacco-Victim currently reside in Quebec?” If the Tobacco-Victim is deceased, the QCAP Claim Form asks: “Did the Tobacco-Victim reside in Quebec on the date of their death?” Residence at death is proven by submitting one of the acceptable documents listed in the QCAP Succession Claim Form.

Alive on November 20, 1998

What if the Tobacco-Victim died before November 20, 1998? To qualify, the Tobacco-Victim must have been alive on November 20, 1998, and meet all other QCAP Eligibility Criteria. If the Tobacco-Victim is now deceased but was alive on that date, the Succession Claimant must submit a Succession Claim Form and, depending on the status of the Succession Claimant, submit the appropriate Sub-Form to: (i) prove the Tobacco-Victim's death and date of death; and (ii) verify their legal authority to submit the claim on behalf of the Estate or a deceased Tobacco-Victim, as liquidator, Heir, or heir of an Heir.

What if the Tobacco-Victim dies after submitting a QCAP Claim Form? If the Tobacco-Victim dies after submitting their complete Claim Package but before receiving payment, the Claims Administrator will still review the claim. If the claim is approved, the compensation will be payable to the Estate of the Tobacco-Victim. In that circumstance, the duly authorized Legal Representative of the Estate will need to submit additional information to receive the payment. Please contact the QCAP Agent for assistance.

CAN A CLAIMANT BE REPRESENTED BY ANOTHER PERSON?

The QCAP Plan allows claims to be submitted by a representative in cases where appropriate legal documents are provided. If the claimant has capacity, a power of attorney or detailed mandate is required for a representative to file a claim on the claimant's behalf. If the claimant is incapacitated, the representative will need to provide: (a) a Protection Mandate or Mandate in case of Incapacity, homologated by a judgment (b) a judgment ordering tutorship to the claimant, (c) a judgment ordering curatorship to the claimant (prior to November 1, 2022) or (d) an order naming the representative a provisional administrator to the property of the claimant. However, payments will only be made in the name of the claimant, not in the name of the representative.

HOW TO SUBMIT YOUR CLAIM AND COMMISSIONING

When is the deadline to submit a QCAP Claim? The QCAP Claim Deadline is **[Day Month] 20YY**. You may submit a QCAP Claim any time during a 12-month submission period from [start date] to **[Day Month] 20YY**. For your Claim to be considered, it must be postmarked or received by **[Day Month] 20YY**.

NOTE: The PCC Plan has a different Claim Submission Period and Claim Deadline. The PCC Plan Claim Submission Period is twenty-four (24) months (rather than twelve (12) months) and the PCC Claim Deadline is Month DD, 20YY.

Which claim form version should I use? Use the QCAP Tobacco-Victim Claim Form if the Tobacco-Victim is living and the QCAP Succession Claim Form if the Tobacco-Victim is deceased.

Where can I get the QCAP Claim Form? If you received this document by postal mail, a copy of the QCAP Claim Form should have been included in the envelope. A PDF version is also available at www.TobaccoClaimsCanada.ca. However, the Claims Administrator encourages you to seek assistance from the QCAP Agent (Proactio) or use the Claims Administrator's online Claimant Portal instead of submitting a paper Claim Form. On the Claimant Portal, you can create an account with a Username and Password, start a claim and return to it any time before the Claim Deadline. You can submit your Claim Form and securely upload supporting documents, as required. If you provide permission, the QCAP Agent can access the information you have entered on the Claimant Portal and assist you for free with preparing your Claim.

How can I submit my QCAP Claim Form? The QCAP Claim Form explains the multiple ways you can submit your Claim, which includes online, postal mail, email, or fax. The preferred claims submission methods are via the QCAP Agent (Proactio) or the online Claimant Portal.

Can I submit more than one Claim Form? No. You are only permitted to make one Claim for compensation under either the QCAP or PCC Plan. You cannot make a claim to both Claims Processes at the same time. If you think you have a claim under the QCAP Plan, apply to the QCAP Plan, through the QCAP Agent (Proactio). The QCAP Agent (Proactio) will be able to verify if you also have a claim under the PCC Compensation Plan that could result in higher compensation for you, and if appropriate, will assist you to transfer your claim to the PCC Agent. If you need any assistance in determining where to file, please contact the Claims Administrator.

What is needed for a complete QCAP Claim submission? A Claim is complete when (a) the QCAP Claim Form has been answered completely with no information missing, and consent has been given to request an Official Confirmation, (b) all required supporting documents are attached or uploaded, (c) the QCAP Claim Form's Statutory Declaration is signed in front of a Commissioner of Oaths of Notary Public (see below), and (d) the Claim Form and supporting documents have been submitted to the Claims Administrator by the QCAP Claim Deadline. The QCAP Agent can assist you in evaluating your Claim before it is submitted and identify potentially incomplete information and/or documentation.

What is commissioning? To complete your Claim Form, you must sign the Statutory Declaration in front of a Commissioner of Oaths or Notary Public. A Commissioner of Oaths will confirm your identity and that you swear or affirm your information is true. Every lawyer, some paralegals and all notaries are Commissioners of Oaths.

The QCAP Agent can commission the Statutory Declaration free of charge, using a secure online signing system called DocuSign. You will need a computer, smartphone or tablet for a video-call with the QCAP Agent, who will watch you sign the declaration. If you want help commissioning from the QCAP Agent, make sure your Claim Form is otherwise complete and ready to submit several weeks before the Claim Deadline of **[Day Month] 20YY** so there is enough time to schedule the remote signing. The QCAP Agent can also help you find an alternative way to meet the commissioning requirement.

WHAT HAPPENS AFTER I SUBMIT MY CLAIM?

How long may the review of my claim take? The Claims Administrator will send you an **Acknowledgement of Receipt of Claim** when your claim is received. Review times will vary depending on how many claims are received, when your Claim is submitted, whether documents are missing or complex and whether your Claim raises unique questions. Review of your Claim may not be complete until after the Claim Deadline.

If Your Claim is Accepted, the Claims Administrator will send you a **Notice of Acceptance of QCAP Claim**.

If Your Claim is Incomplete, the Claims Administrator will send you a **Notice of Incomplete Claim** to explain what is missing and how to fix it. The deadline to resubmit your revised claim will be the later of: (a) the QCAP Claims Deadline; or (b) sixty (60) days from the date of the Notice of Incomplete Claim. If you do not respond by that deadline, your Claim will be rejected.

If Your Claim is Rejected, you will be sent a **Notice of Rejection** explaining the reason(s) for the rejection. The Notice will include a **Request for Review Form**. If you believe your Claim was improperly rejected, you may request a review within sixty (60) days of the date of the Notice of Rejection clearly identifying the error you believe the Claims Administrator made during the initial assessment of your claim. The Claims Administrator will assign an independent Review Officer, who may confirm, reverse, or vary the original decision.

QCAP AGENT SUPPORT

The QCAP Agent can help you, **free of charge**, with: (a) answering questions and filling out the QCAP Claim Form based on information you provide; (b) commissioning your signature on the QCAP Claim Form; and (c) providing guidance on how to obtain the necessary information and documents for your claim.

Can the QCAP Agent tell me if I qualify? No. Only the Claims Administrator can decide if a claim qualifies under the QCAP Plan. However, the QCAP Agent can identify gaps in your Claim Package.

Do I need to hire a lawyer to submit my Claim? No. The QCAP Plan was designed so that you can complete a Claim without hiring a lawyer or paying for third-party services. Also, the CCAA Court has issued an order prohibiting lawyers or other persons from soliciting you in the preparation or submission of your Claim. If you receive any such solicitation, report it to the QCAP Agent (Proactio) right away by phone or email.

Exception - Estate-Related Legal Help: In some cases, Succession Claimants may need to consult a lawyer or a notary at their own cost, for example if they previously renounced the Tobacco-Victim's succession and wish to retract the renunciation, or if there is a dispute amongst the Heirs or heirs of Heirs.

How do I get more information? Call the QCAP Agent: **1-888-880-1844**, or email: **tabac@proactio.ca**. Visit **www.TobaccoClaimsCanada.ca** for FAQs, tools, and the full Quebec Administration Plan.

ATTACHMENT A: CIGARETTES SOLD BY THE TOBACCO COMPANIES

Accord	du Maurier	North American Spirit
Accord KF	du Maurier Light	Number 7
Avanti/Light	du Maurier Special	Number 7 Lights
B&H	du Maurier Ultra Light	Peter Jackson
B&H 100 Del.UL.LT/MEN	Dunhill	Peter Jackson Extra Light KF
B&H 100 F	Dunhill KF	Player's
B&H 100 F Menthol	Export	John Player's Special
B&H Light Menthol	Export "A"	Player's Extra Light
B&H Lights	Export "A" Lights	Player's Filter
B&H Special KF	Export "A" Medium	Player's Light
B&H Special Lights KF	Export "A" Extra Light	Player's Medium
B&H Light Menthol	Export "A" Special Edition	Player's Plain
Belmont	Export "A" Ultra Light	Rothmans
Belmont KF	Export Mild	Rothmans Extra Light
Belvedere	Export Plain	Rothmans KF
Belvedere Extra Mild	LD	Rothmans Light
Camel	Macdonald	Rothmans Special
Cameo	Macdonald Menthol	Rothmans UL LT KF
Cameo Extra Mild	Mark Ten	Spirit
Craven "A"	Mark Ten Filter	Select Special/Ultra Mild/Menthol
Craven "A" Special	Matinee	Vantage
Craven "A" Light	Matinee Extra Mild	Vantage KF
Craven "A" Ultra Light/Mild	Matinee Slims/Menthol	Vantage Light/Menthol
Craven "M"	Matinee Special/Menthol	Viscount
Craven "M" KF	Medallion	Viscount #1 KF
Craven "M" Special	More	Viscount Extra Mild/Menthol
		Winston

Attachment E



Submission Deadline:
[Day Month], 20XX

Tobacco Claims Canada
Claims Administrator
P.O. Box 2958 STN B
Ottawa ON K1P 5W9

<<Barcode>>

<<Name>>

<<Address1>>

<<Address2>>

<<Address3>>

<<City>> <<Province>> <<Zip>> OR <<Country>>

Quebec Class Action Administration Plan (QCAP) TOBACCO-VICTIM CLAIM FORM

GENERAL INSTRUCTIONS

Submit Your Claim Online:



You can scan the QR code or visit
www.TobaccoClaimsCanada.ca
to file your claim. If you file your
claim online, it must be submitted by
11:59 p.m., Eastern, on Day Month, 20XX.



A completed Claim Form, along with any required accompanying documents, must be submitted to the Claims Administrator by **no later than the deadline of [day month, year] by 11:59 p.m., Eastern**, to receive financial compensation from the Quebec Class Action Administration Plan (the “**QCAP Plan**”).

You do not need a lawyer to submit a claim in the QCAP Plan. Proactio, the QCAP Agent, has been mandated to help you submit your claim, at no additional cost to you. If you need any assistance, please reach out to Proactio at the following contact information:

① **Phone: 1-888-880-1844**

✉ **Email: tabac@proactio.ca**

💻 **Website: www.RecoursTabac.com**

The QCAP Plan will provide compensation to individuals who meet the QCAP Eligibility Criteria, described below, and who submit a complete Claim Form, along with any required supporting documents, by the deadline. Such individuals are referred in the QCAP Claim Forms as **“Tobacco-Victims”** collectively, and a **“Tobacco-Victim”** individually.

The QCAP Plan will also provide compensation to the estates or heirs of Tobacco-Victims who **died after November 20, 1998**, as well as to the estates or heirs of the heirs of Tobacco-Victims who died after November 20, 1998. These groups are referred to in the QCAP Claim Forms as **“Successions”** collectively, and each individually, as a **“Succession.”**

To be eligible to receive financial compensation, the Tobacco-Victim must meet **all** of the following QCAP Eligibility Criteria. They must:

1. reside in Quebec (or if deceased, have resided in Quebec at the time of their death);
2. have smoked a minimum of twelve pack-years of cigarettes sold by the Canadian Tobacco Companies **between January 1, 1950 and November 20, 1998**;

Note: You may use the calculator available at www.TobaccoClaimsCanada.ca/en/HomePCC/Calculator to help determine the number of cigarettes the Tobacco-Victim smoked.

3. have been diagnosed **before March 12, 2012** with:
 - (a) Primary lung cancer; or
 - (b) Primary cancer (squamous cell carcinoma) of the larynx, the oropharynx or the hypopharynx (throat cancer); or
 - (c) Emphysema or COPD (GOLD Grade III or IV).
4. have resided in Quebec on the date of diagnosis with lung cancer, throat cancer, emphysema, or COPD (GOLD Grade III or IV). **AND**
5. have been alive on **November 20, 1998**.

QCAP Claim Forms

A QCAP Claim Form must be completed and submitted to the Claims Administrator in order to receive financial compensation from the QCAP Plan.

There are two QCAP Plan Claim Forms:

The **Tobacco-Victim Claim Form** should be used if:

- You are a Tobacco-Victim, making a claim on your own behalf; or
- You are a Representative of living a Tobacco-Victim with a mandate or power of attorney to represent such individual.

The **Succession Claim Form** should be used if:

- You are the liquidator of the estate of a Tobacco-Victim;
- You are an heir of a Tobacco-Victim and the estate is closed;
- You have a mandate or power of attorney to represent the heir of a Tobacco-Victim;
- You are the heir of an heir of a Tobacco-Victim that would have been entitled to make a claim.

Claims Deadline

Your QCAP Claim Form, together with any required supporting documents, must be submitted to the Claims Administrator no later than 11:59 p.m., Eastern, on [Day Month, 20XX].

How to File a Claim

You can file your Claim Form with supporting documents in any of the following ways:

-  **Online**, through the Claims Administrator's website at www.TobaccoClaimsCanada.ca
-  **Email** to info@TobaccoClaimsCanada.ca
-  **Fax** to 1-866-262-0816
-  **Registered Mail**, sent to the following address postmarked by [Day Month, Year]:

Tobacco Claims Canada
Claims Administrator
P.O. Box 2958 STN B
Ottawa ON K1P 5W9

Your claim will be deemed to be received **only when the Claim Form and any required supporting documents are received by the Claims Administrator**. Claimants will be sent an Acknowledgement of Receipt of Claim by email or mail once their Claim Form has been received by the Claims Administrator. You must keep the record of transmission of your Claim Form until you receive the Acknowledgement of Receipt of Claim.

PLEASE DO NOT SUBMIT YOUR CLAIM MORE THAN ONCE OR THROUGH MULTIPLE METHODS.

The PCC Compensation Plan and Eligibility Criteria

If the Tobacco-Victim **does not meet** the above QCAP Eligibility Criteria, they may still be eligible to receive compensation under a separate compensation plan called the Pan-Canadian Claimant Compensation Plan ("**PCC Compensation Plan**"). To qualify under the PCC Compensation Plan, the Tobacco-Victim must meet all of the following criteria. They must:

1. reside in any Province or any Territory of Canada (or if deceased, have resided in Canada at the time of their death);
2. have been alive on **March 8, 2019**;
3. have smoked a minimum of twelve pack-years of cigarettes sold by the Canadian Tobacco Companies **between January 1, 1950 and November 20, 1998**;

Note: You may use the calculator available at www.TobaccoClaimsCanada.ca/en/HomePCC/Calculator to help determine the number of cigarettes the Tobacco-Victim smoked.

4. have been diagnosed **between March 31, 2015 and March 8, 2019** (inclusive of those dates) with:
- (a) Primary lung cancer; or
 - (b) Primary cancer (squamous cell carcinoma) of the larynx, the oropharynx or the hypopharynx (throat cancer); or
 - (c) Emphysema or COPD (GOLD Grade III or IV).

AND

5. have resided in any Province or any Territory of Canada on the date of diagnosis with lung cancer, throat cancer, emphysema or COPD (GOLD Grade III or IV).

A Tobacco-Victim will only be eligible for compensation under one plan and will be paid for the disease under the Plan which provides the highest amount of compensation to them. You cannot apply to both plans at the same time.

If you think you have a claim under the QCAP Plan, apply to the QCAP Plan, through the QCAP Agent (Proactio). The QCAP Agent (Proactio) will be able to verify if you also have a claim under the PCC Compensation Plan that could result in higher compensation for you, and if appropriate, will assist you to transfer your claim to the PCC Agent.

If you need any assistance in determining where to file, please contact the Claims Administrator.

Privacy and Confidentiality Declaration by the Claims Administrator

By submitting this Claim Form, the Tobacco-Victim or Representative of the Tobacco-Victim, as applicable, confirms that they have reviewed and agree to the collection, use, and disclosure of personal information as described below.

All personal information collected by the Claims Administrator through the Claims Process will be kept confidential in accordance with the Personal Information Protection and Electronic Documents Act, S.C. 2000, c. 5 and the Privacy Policy found on the Claims Administrator's website at www.TobaccoClaimsCanada.ca/en/Home/Privacy. This information is collected only for the purpose of administering the QCAP Plan and to assess the Claimant's eligibility to receive compensation.

The personal information of the Tobacco-Victim, including personal health information, may be collected, used, and disclosed by the Claims Administrator and the QCAP Agent (Proactio) to provide Agent and Claims Administration services. It will not be disclosed without the express written consent of Tobacco-Victim or Succession Claimant, except as provided for in the QCAP Plan, as required by law or Court Order, or if it is necessary to share with a future Court-appointed Claims Administrator in connection with the QCAP Claims Process. This information may not be used or disclosed for any other purpose.

For additional information, please visit the Claim Administrator's website at
www.TobaccoClaimsCanada.ca.

PART 1: INFORMATION ABOUT THE TOBACCO-VICTIM

Important: Before completing this Claim Form, we strongly recommend that you read the instructions in Attachment A to avoid delays or rejection.

We also suggest that you reach out to the QCAP Agent (Proactio) for assistance with your claim.

The Tobacco-Victim

1) Tobacco-Victim's full legal name:

Last Name:

First Name:

Middle Name (if applicable):

2) Tobacco-Victim's date of birth (YYYY-MM-DD):

3) Tobacco-Victim's Health Insurance Card Number (e.g., ABCD 1234 5678):

4) Did the Tobacco-Victim reside in Quebec on the date of diagnosis with primary lung cancer, primary squamous cell carcinoma of the larynx, oropharynx, hypopharynx (throat cancer), emphysema or COPD (GOLD Grade III or IV)?

☐ Yes ☐ No

5) Does the Tobacco-Victim currently reside in Quebec?

☐ Yes ☐ No

Representative of Tobacco-Victim

Please only fill out Question 6 and 7 if you are the Representative of a Tobacco-Victim. If you are the Tobacco-Victim, proceed to Question 8.

6) Full legal name of the Tobacco-Victim's Representative:

Last Name:

First Name:

7) Mandate, Judgment, and/or Order pursuant to which the Representative is acting?

☐ Power of Attorney or Detailed Mandate (for represented Tobacco-Victims with capacity only)

☐ Protection Mandate or Mandate in case of Incapacity, homologated by a judgment

☐ Judgment ordering tutorship to the Tobacco-Victim

☐ Judgment ordering curatorship to the Tobacco-Victim (prior to November 1, 2022)

☐ Order naming a provisional administrator to the property of the Tobacco-Victim

A copy of the mandate, judgment, and/or order pursuant to which the Tobacco-Victim's Representative is acting must be attached and marked with the Tobacco-Victim's Health Insurance Card Number and the words "Representative's Mandate". If submitting your Proof of Claim electronically, please save the all documents in one PDF file and name the document "[Health insurance card number of the Tobacco-Victim]-Representative's Mandate.pdf".

Contact Information

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Note: If you are the Tobacco-Victim, insert your mailing address and contact information. If you are the Representative of a Tobacco-Victim provide your own mailing address and contact information.

8) Provide your mailing address:

Number:	Street:	Apartment:

City/Town:	Province:	Postal Code:	Country:

9) Provide your contact information:

Phone:	Fax:

Email:

10) Which language should be used for communication?

- ☐ English ☐ French

PART 2: PROOF OF DIAGNOSIS

Diagnosis before March 12, 2012

1) Was the Tobacco-Victim diagnosed before March 12, 2012 with any of the following diseases? For all that apply, indicate the date of diagnosis and the place where the Tobacco-Victim was resident on the date of diagnosis.

☐ **Primary Lung Cancer**

Date of diagnosis (YYYY-MM-DD):	
Place of residence on date of diagnosis:	

☐ **Primary squamous cell carcinoma of the larynx, oropharynx, or hypopharynx (Throat Cancer)**

Date of diagnosis (YYYY-MM-DD):	
Place of residence on date of diagnosis:	

☐ **Emphysema or COPD (GOLD Grade III or IV)**

Date of diagnosis (YYYY-MM-DD):	
Place of residence on date of diagnosis:	

Please note, in the case of recurrence or relapse, please indicate the initial date of diagnosis only.

2) Authorization to obtain Official Confirmation of Diagnosis:

I hereby authorize the Claims Administrator to obtain a copy of the Tobacco-Victim's medical information relating to the diseases/diagnoses referenced in Question 1 above, and authorize the PCC Agent, the QCAP Agent, MSSS and/or the RAMQ, as applicable, to provide the Claims Administrator with copies of any of the following:

- A confirmation of the Tobacco-Victim's diagnosis from the Quebec Cancer Registry;
- An extract from RAMQ files confirming the Tobacco-Victim's diagnosis;
- An extract from the MED-ÉCHO database confirming the Tobacco-Victim's diagnosis; and
- All other medical files relating to the Tobacco-Victim.

☐ **By checking this box, I authorize Tobacco-Victim's above-referenced medical information to be released to the Claims Administrator.**

General Questions? Contact the Claims Administrator at 1-888-482-5852 or email info@TobaccoClaimsCanada.ca.
Need Claim Form help? Contact the QCAP Agent (Proactio) at 1-888-880-1844 or email tabac@proactio.ca.

If an official confirmation of disease/diagnosis ~~cannot~~ ^{can} be made through these means, the Claims Administrator will contact you to request the submission of an alternative method of proof.

Do not submit any alternative evidence unless it has been explicitly requested by way of a Notice from the Claims Administrator titled "Notice to Provide Alternative Proof."

PART 3: PROOF OF SMOKING HISTORY

1) The Tobacco-Victim started smoking cigarettes:

- ☐ Before January 1, 1976;
- ☐ On or after January 1, 1976.

2) Between January 1, 1950 and November 20, 1998 the Tobacco-Victim smoked approximately _____ cigarettes per day for approximately _____ years.

OR

3) If the number of cigarettes the Tobacco-Victim smoked varied between January 1, 1950 and November 20, 1998, provide a summary below of the number of cigarettes the Tobacco-Victim smoked during that period of time:

- a) Smoked approximately _____ cigarettes per day between (YYYY) _____ and (YYYY) _____;
- b) Smoked approximately _____ cigarettes per day between (YYYY) _____ and (YYYY) _____;
- c) Smoked approximately _____ cigarettes per day between (YYYY) _____ and (YYYY) _____;
- d) Smoked approximately _____ cigarettes per day between (YYYY) _____ and (YYYY) _____;
- e) Smoked approximately _____ cigarettes per day between (YYYY) _____ and (YYYY) _____.

If more space is needed, attach additional sheet(s) to this Claim Form.

4) That I believe that the Tobacco-Victim regularly smoked the following brands of cigarettes. Check **all** that apply:

☐ Accord • Accord KF	☐ du Maurier • du Maurier Light • du Maurier Special • du Maurier Ultra Light	☐ North American Spirit
☐ Avanti/Light		☐ Number 7 • Number 7 Lights
☐ B&H • B&H 100 Del.UL.LT/MEN • B&H 100 F • B&H 100 F Menthol • B&H Light Menthol • B&H Lights • B&H Special KF • B&H Special Lights KF	☐ Dunhill • Dunhill KF	☐ Peter Jackson • Peter Jackson Extra Light KF
☐ Belmont • Belmont KF	☐ Export • Export "A" • Export "A" Lights • Export "A" Medium • Export "A" Extra Light • Export "A" Special Edition • Export "A" Ultra Light • Export Mild • Export Plain	☐ Player's • John Player's Special • Player's Extra Light • Player's Filter • Player's Light • Player's Medium • Player's Plain
☐ Belvedere • Belvedere Extra Mild	☐ LD	☐ Rothmans • Rothmans Extra Light • Rothmans KF • Rothmans Light • Rothmans Special • Rothmans UL LT KF
☐ Camel	☐ Macdonald • Macdonald Menthol	☐ Select Special/Ultra Mild/Menthol
☐ Cameo • Cameo Extra Mild	☐ Mark Ten • Mark Ten Filter	☐ Spirit
☐ Craven "A" • Craven "A" Special • Craven "A" Light • Craven "A" Ultra Light/Mild	☐ Matinee • Matinee Extra Mild • Matinee Slims/Menthol • Matinee Special/Menthol	☐ Vantage • Vantage KF • Vantage Light/Menthol
☐ Craven "M" • Craven "M" KF • Craven "M" Special	☐ Medallion	☐ Viscount • Viscount #1 KF • Viscount Extra Mild/Menthol
	☐ More	☐ Winston

PART 4: STATUTORY DECLARATION AND SIGNATURE

INSTRUCTIONS TO COMPLETE STATUTORY DECLARATION

You must sign the Statutory Declaration below in the presence of a Commissioner of Oaths, sometimes referred to as a Commissioner for taking Affidavits. Signing can be done remotely.

A Commissioner of Oaths is a person who is authorized to take affidavits or declarations by asking you to swear or affirm that the statements in a document are true. Every lawyer and some paralegals are Commissioners of Oaths.

If you need assistance, you may contact the QCAP Agent (Proactio) by phone toll-free (in Canada) at 1-888-880-1844, by email at tabac@proactio.ca, or online at www.RecoursTabac.com who can arrange for a Commissioner of Oaths to commission the signing of your Statutory Declaration before you submit your Claim Form to the Claims Administrator.

I, _____, solemnly declare that the information that I have provided on this Claim Form is true and correct and the documents submitted in support of my claim are genuine and have not been modified in any way whatsoever.

I make this solemn declaration conscientiously believing it to be true and knowing that it is of the same force and effect as if made under oath.

Where someone has helped me with this Claim Form, that person has read to me everything they wrote and included with this Claim Form, if necessary to allow me to understand the content of this completed Claim Form and any attachments to it, and I confirm that this information is true and correct.

this _____ day of _____, 20____.

Signature of Tobacco-Victim (or Representative)

SOLEMNLY AFFIRMED BEFORE ME, remotely

The Tobacco-Victim at _____.
(Town/City/Municipality)

The Commissioner of Oaths at _____.
(Town/City/Municipality)

Commissioner for Oaths Quebec Number

TOBACCO-VICTIM CLAIM FORM INSTRUCTIONS

As a person who has suffered from lung cancer, throat cancer, emphysema or COPD (GOLD Grade III or IV), you are considered a “Tobacco-Victim” under the terms of the QCAP Plan.

This document is intended to assist you in completing the Tobacco-Victim Claim Form and assembling the supporting documentation required to prove your claim.

If you require any assistance completing your Claim Form, please call the QCAP Agent (Proactio) toll-free at 1-888-880-1844 or send an email to tabac@proactio.ca or visit the QCAP Agent (Proactio) website at www.RecoursTabac.com.

PART 1: INFORMATION ABOUT THE TOBACCO VICTIM

In **Question 1**, provide the Tobacco-Victim’s full name.

In **Question 2**, provide the Tobacco-Victim’s birth date.

In **Question 3**, provide the Tobacco-Victim’s health insurance card number. This information is required to enable the Claims Administrator to make requests to the Ministry of Health and Social Services of Quebec (“MSSS”) and Régie de l’assurance maladie du Québec (“RAMQ”) for documents that will assist the Tobacco Victim Claimant proving the diagnosis and the date of diagnosis of the Tobacco-Victim’s tobacco-related disease(s).

In **Question 4**, confirm whether the Tobacco Victim resided in Quebec on the date of diagnosis with primary lung cancer, primary squamous cell carcinoma of the larynx, oropharynx, hypopharynx (throat cancer), emphysema or COPD (GOLD Grade III or IV).

In **Question 5**, indicate whether the Tobacco-Victim currently resides in Quebec.

In **Question 6**, if you are the Representative of a Tobacco-Victim, provide your full legal name.

In **Question 7**, provide the type of mandate pursuant to which you are acting as the Representative of the Tobacco-Victim. You must attach a copy of the mandate, power of attorney or judgment with the Claim Form, marked with the words “Representative’s Mandate”, followed by the Tobacco-Victim’s name on the front page of the document, and in the file name, if submitted electronically.

In **Questions 8 and 9**, provide your own mailing address and other contact information so that the Claims Administrator can communicate with you in respect of your claim. Note that the Claims Administrator will communicate with you by email, if an email address is provided. Please add the Claims Administrator’s email address info@TobaccoClaimsCanada.ca to your list of contacts to ensure that correspondence in connection with your claim reaches your Inbox.

In **Question 10**, indicate your language of preference for communications from the Claims Administrator.

To be eligible for compensation, the Tobacco-Victim must have been diagnosed **before March 12, 2012** with primary lung cancer, primary cancer (squamous cell carcinoma) of the larynx, oropharynx, hypopharynx, emphysema or COPD (GOLD Grade III or IV). These are the only diseases covered by the QCAP Plan.

In response to **Question 1**, indicate the disease(s) the Tobacco-Victim was diagnosed with, and for each, indicate the initial date of diagnosis. A recurrence or a relapse is not considered a primary cancer. In the case of a recurrence or relapse, only the initial diagnosis date should be indicated. Please note that the Tobacco-Victim Claimant will only receive compensation relating to the proven claim that entitles the Tobacco-Victim to the highest compensation.

If you do not recall the exact date of the Tobacco-Victim's diagnosis, please provide the most accurate estimate possible, as this information will be verified by the Claims Administrator.

If you need assistance, please contact the QCAP Agent (Proactio) at 1-888-880-1844 or send an email to tabac@proactio.ca or visit the QCAP Agent (Proactio) website at www.RecoursTabac.com.

In **Question 2**, you must provide your authorization for the QCAP Agent (Proactio) and the Claims Administrator to obtain medical information concerning the Tobacco-Victim from the sources listed therein for the purpose of confirming the diagnosis and the date of diagnosis of the disease(s) indicated in response to **Question 1**.

To facilitate the process of proving Tobacco-Victims' diagnoses for claimants, Class Counsel will request the official records, including from RAMQ, the MSSS, the Quebec Cancer Registry, and the MED-ÉCHO database. Both the QCAP Agent (Proactio) and the Claims Administrator will have access to this information.

If an official confirmation of disease/diagnosis cannot be made from these sources, the Claims Administrator will contact you to request that you submit an alternative method of proof. By way of example only, such proof may include:

- a copy of a pathology report which confirms that the Tobacco-Victim was diagnosed with Lung Cancer or Throat Cancer, as applicable, before March 12, 2012;
- a copy of a report of a spirometry test performed on the Tobacco-Victim before March 12, 2012, demonstrating a FEV1 (non-reversible) of less than 50% of the predicted value to establish a diagnosis of Emphysema or COPD (GOLD Grade III or IV);
- an extract from the Tobacco-Victim's medical records or a written statement of the Tobacco-Victim's Physician.

Do not submit any alternative evidence unless it has been explicitly requested from you by way of a Notice from the Claims Administrator entitled "Notice to Provide Alternative Proof."

If requested, when submitting your Alternative Proof electronically, please name the PDF document "[insert health insurance card number]-Alternative Medical Proof.pdf" as applicable.

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PART 3: PROOF OF SMOKING HISTORY

In **Question 1**, you must confirm the Tobacco-Victim's smoking habits. You must indicate whether the Tobacco-Victim started smoking either: (a) before January 1, 1976; or (b) on or after January 1, 1976. The Quebec Courts reduced the tobacco companies' liability by 20% for Tobacco-Victims who started smoking after January 1, 1976 because the Courts determined that, by January 1, 1980, the dangers of contracting a disease from smoking were known to the public, and that it would have taken 4 years for an individual to become addicted to smoking. Thus, people who started smoking after January 1, 1976 are deemed to have been aware of the dangers of contracting a disease from smoking (the Courts also determined that the public was deemed to have knowledge as of March 1, 1996 that cigarettes were addictive). Consequently, Tobacco-Victims who started smoking after January 1, 1976 are entitled to compensation of 80%. These determinations by the Courts are final and cannot be appealed.

Please note that in order to be entitled to compensation, the Tobacco-Victim must have smoked 12 pack-years, or 87,600 cigarettes between January 1, 1950 and November 20, 1998.

A pack-year is 7,300 cigarettes, expressed in terms of daily smoking. For example, 12 pack-years equals:

- 20 cigarettes a day for 12 years ($20 \times 365 \times 12 = 87,600$); or
- 30 cigarettes a day for 8 years ($30 \times 365 \times 8 = 87,600$); or
- 10 cigarettes a day for 24 years ($10 \times 365 \times 24 = 87,600$).

It is not necessary for you to calculate the number of pack-years smoked by the Tobacco-Victim, as this calculation will be done by the Claims Administrator when reviewing the Claim Form.

If the Tobacco-Victim's smoking history can be easily expressed in terms of number of cigarettes smoked per day per year, then please fill out the requisite information in **Question 2**. If the Tobacco Victim's smoking history cannot be easily expressed in such terms, please provide a summary in **Question 3** describing the Tobacco-Victim's smoking habits between January 1, 1950 and November 20, 1998.

In **Question 4**, please check the boxes for all brands of cigarettes that the Tobacco-Victim smoked on a regular basis between January 1, 1950 and November 20, 1998. The brand choices listed include the "family" of those brands. For example, Player's includes Player's Light and Player's Filter, etc. The purpose of providing this information is to confirm that the Tobacco-Victim smoked cigarettes manufactured by the defendant tobacco companies.

PART 4: STATUTORY DECLARATION AND SIGNATURE

Please provide the Tobacco-Victim's name, the date and add your signature. By signing the Claim Form, the Tobacco-Victim or the Tobacco-Victim's Representative acknowledges that the information submitted is true and that all supporting documents are authentic and have not been altered.

The Claim Form must be signed before a Commissioner for Oaths. Signing can be done remotely.

If the QCAP Agent (Proactio) is assisting you with your Claim Form, they can arrange for a Commissioner for Oaths to commission your Claim Form prior to submitting it to the Claims Administrator.

If you are not using the assistance of the QCAP Agent (Proactio), you may locate a Commissioner for Oaths by visiting the following link: <https://www.assermentation.justice.gouv.qc.ca/ServicesPublicsConsultation/Commissaires/Proximate/Criteres.aspx>

Attachment F



Submission Deadline:
[Day Month], 20XX

Tobacco Claims Canada
Claims Administrator
P.O. Box 2958 STN B
Ottawa ON K1P 5W9

<<Barcode>>

<<Name>>

<<Address1>>

<<Address2>>

<<Address3>>

<<City>> <<Province>> <<Zip>> OR <<Country>>

Quebec Class Action Administration Plan (QCAP) SUCCESSION CLAIM FORM

GENERAL INSTRUCTIONS

Submit Your Claim Online:

You can scan the QR code or visit
www.TobaccoClaimsCanada.ca

to file your claim. If you file your
claim online, it must be submitted by

11:59 p.m., Eastern, on Day Month, 20XX.



A completed Claim Form, along with any required accompanying documents, must be submitted to the Claims Administrator by **no later than the deadline of [day month, year] by 11:59 p.m., Eastern**, to receive financial compensation from the Quebec Class Action Administration Plan (the “QCAP Plan”).

You do not need a lawyer to submit a claim in the QCAP Plan. Proactio, the QCAP Agent, has been mandated to help you submit your claim, at no additional cost to you. If you need any assistance, please reach out to Proactio at the following contact information:

① **Phone: 1-888-880-1844**

✉ **Email: tabac@proactio.ca**

💻 **Website: www.RecoursTabac.com**

The QCAP Plan and Eligibility Criteria

The QCAP Plan will provide compensation to individuals who meet the QCAP Eligibility Criteria, described below, and who submit a complete Claim Form, along with any required supporting documents, by the deadline. Such individuals are referred in the QCAP Claim Forms as **“Tobacco-Victims”** collectively, and a **“Tobacco-Victim”** individually.

The QCAP Plan will also provide compensation to the estates or heirs of Tobacco-Victims who **died after November 20, 1998**, as well as to the estates or heirs of the heirs of Tobacco-Victims who died after November 20, 1998. These groups are referred to in the QCAP Claim Forms as **“Successions”** collectively, and each individually, as a **“Succession”**.

To be eligible to receive financial compensation, the Tobacco-Victim must meet all of the following QCAP Eligibility Criteria.

They must:

1. reside in Quebec (or if deceased, have resided in Quebec at the time of their death);
2. have smoked a minimum of twelve pack-years of cigarettes sold by the Canadian Tobacco Companies between **January 1, 1950 and November 20, 1998**;

Note: You may use the calculator available at www.TobaccoClaimsCanada.ca/en/HomePCC/Calculator to help determine the number of cigarettes the Tobacco-Victim smoked.

3. have been diagnosed **before March 12, 2012** with:
 - (a) Primary lung cancer; or
 - (b) Primary cancer (squamous cell carcinoma) of the larynx, the oropharynx or the hypopharynx (throat cancer); or
 - (c) Emphysema or COPD (GOLD Grade III or IV).
4. have resided in Quebec on the date of diagnosis with lung cancer, throat cancer, emphysema or COPD (GOLD Grade III or IV); **AND**
5. have been alive on **November 20, 1998**.

QCAP Claim Forms

A QCAP Claim Form must be completed and submitted to the Claims Administrator in order to receive financial compensation from the QCAP Plan.

There are two QCAP Plan Claim Forms:

The **Tobacco-Victim Claim** Form should be used if:

- You are a Tobacco-Victim, making a claim on your own behalf; or
- You are a Representative of living a Tobacco-Victim with a mandate or power of attorney to represent such individual.

The **Succession Claim Form** should be used if:

- You are the liquidator of the estate of a Tobacco-Victim;
- You are an heir of a Tobacco-Victim and the estate is closed;
- You have a mandate or power of attorney to represent the heir of a Tobacco-Victim;
- You are the heir of an heir of a Tobacco-Victim that would have been entitled to make a claim.

Claims Deadline

Your QCAP Claim Form, together with any required supporting documents, must be submitted to the Claims Administrator no later than 11:59 p.m., Eastern, on [Day Month, 20XX].

How to File a Claim

You can file your Claim Form with supporting documents in any of the following ways:

-  **Online**, through the Claims Administrator's website at www.TobaccoClaimsCanada.ca
-  **Email** to info@TobaccoClaimsCanada.ca
-  **Fax** to 1-866-262-0816
-  **Registered Mail**, sent to the following address postmarked by [Day Month, Year]:

Tobacco Claims Canada
Claims Administrator
P.O. Box 2958 STN B
Ottawa ON K1P 5W9

Your claim will be deemed to be received **only when the Claim Form and any required supporting documents are received by the Claims Administrator**. Claimants will be sent an Acknowledgement of Receipt of Claim by email or mail once their Claim Form has been received by the Claims Administrator. You must keep the record of transmission of your Claim Form until you receive the Acknowledgement of Receipt of Claim.

PLEASE DO NOT SUBMIT YOUR CLAIM MORE THAN ONCE OR THROUGH MULTIPLE METHODS.

The PCC Compensation Plan and Eligibility Criteria

If the Tobacco-Victim **does not meet** the above QCAP Eligibility Criteria, they may still be eligible to receive compensation under a separate compensation plan called the Pan-Canadian Claimant Compensation Plan ("**PCC Compensation Plan**"). To qualify under the PCC Compensation Plan, the Tobacco-Victim must meet all of the following criteria. They must:

1. reside in any Province or any Territory of Canada (or if deceased, have resided in Canada at the time of their death);
2. have been alive on **March 8, 2019**;
3. have smoked a minimum of twelve pack-years of cigarettes sold by the Canadian Tobacco Companies **between January 1, 1950 and November 20, 1998**;

Note: You may use the calculator available at www.TobaccoClaimsCanada.ca/en/HomePCC/Calculator to help determine the number of cigarettes the Tobacco-Victim smoked.

4. have been diagnosed between **March 8, 2015 and March 8, 2019** (inclusive of those dates) with:
- (a) Primary lung cancer; or
 - (b) Primary cancer (squamous cell carcinoma) of the larynx, the oropharynx or the hypopharynx (throat cancer); or
 - (c) Emphysema or COPD (GOLD Grade III or IV).

AND

5. have resided in any Province or any Territory of Canada on the date of diagnosis with lung cancer, throat cancer, emphysema or COPD (GOLD Grade III or IV).

A Tobacco-Victim will only be eligible for compensation under one plan and will be paid for the disease under the Plan which provides the highest amount of compensation to them. You cannot apply to both plans at the same time.

If you think you have a claim under the QCAP Plan, apply to the QCAP Plan, through the QCAP Agent (Proactio). The QCAP Agent (Proactio) will be able to verify if you also have a claim under the PCC Compensation Plan that could result in higher compensation for you, and if appropriate, will assist you to transfer your claim to the PCC Agent.

If you need any assistance in determining where to file, please contact the Claims Administrator.

Privacy and Confidentiality Declaration by the Claims Administrator

By submitting this Claim Form the Succession Claimant (or Representative) confirms that they have reviewed and agree to the collection, use, and disclosure of personal information as described below.

All personal information collected by the Claims Administrator through the Claims Process will be kept confidential in accordance with the Personal Information Protection and Electronic Documents Act, S.C. 2000, c. 5 and the Privacy Policy found on the Claims Administrator's website at www.TobaccoClaimsCanada.ca/en/Home/Privacy. This information is collected only for the purpose of administering the QCAP Plan and to assess the Claimant's eligibility to receive compensation.

The personal information of the Tobacco-Victim, including personal health information, may be collected, used, and disclosed by the Claims Administrator and the QCAP Agent (Proactio) to provide Agent and Claims Administration services. It will not be disclosed without the express written consent of Tobacco-Victim or Succession Claimant, except as provided for in the QCAP Plan, as required by law or Court Order, or if it is necessary to share with a future Court-appointed Claims Administrator in connection with the QCAP Claims Process. This information may not be used or disclosed for any other purpose.

For additional information, please visit the Claim Administrator's website at
www.TobaccoClaimsCanada.ca.

PART 1: INFORMATION ABOUT THE SUCCESSION CLAIMANT

Important: Before completing this Claim Form, we strongly recommend that you read the instructions in Attachment A to avoid delays or rejection.

We also suggest that you reach out to the QCAP Agent (Proactio) for assistance with your claim.

1) Succession Claimant's full legal name:

Last Name:

First Name:

Middle Name (if applicable):

2) Succession Claimant's date of birth (YYYY-MM-DD):

Please only fill out Question 3 and 4 if you are the Representative of the Succession Claimant. If you are the Succession Claimant, proceed to Question 5.

3) Full legal name of the Succession Claimant's Representative:

Last Name:

First Name:

4) Mandate, Judgment, and/or Order pursuant to which the Representative is acting?

☐ Power of Attorney or Detailed Mandate (for represented Succession Claimants with capacity only)	☐ Judgment ordering curatorship to the Succession Claimant (prior to November 1, 2022)
☐ Protection Mandate or Mandate in case of Incapacity, homologated by a judgment	☐ Order naming a provisional administrator to the property of the Succession Claimant
☐ Judgment ordering tutorship to the Succession Claimant	

A copy of the mandate, judgment and/or order pursuant to which the Succession Claimant's Representative is acting must be attached and marked with the Tobacco-Victim's Health Insurance Card Number and the words "Representative's Mandate". If submitting your Proof of Claim electronically, please save all documents in one PDF file and name the document "[Health insurance card number of the Deceased Tobacco-Victim]-Representative's Mandate.pdf".

5) Provide your mailing address: (**Note:** If you are the Succession Claimant's Representative, provide the Representative's mailing address.)

Number:

Street:

Apartment:

City/Town:

Province:

Postal Code:

Country:

6) Provide your contact information. (**Note:** If a Representative is filing the claim, provide the Representative's contact information.)

Phone:

Fax:

Email:

7) Which language should be used for communication?

- ☐ English ☐ French

PART 2: DECEASED TOBACCO-VICTIM INFORMATION

1) Deceased Tobacco-Victim's full legal name:

Last Name:

First Name:

Middle Name (if applicable):

2) Deceased Tobacco-Victim's date of birth (YYYY-MM-DD):

Date of Birth:

3) Deceased Tobacco-Victim's date of death (YYYY-MM-DD):

Date of Death:

4) Deceased Tobacco-Victim's Health Insurance Card Number (e.g., ABCD 1234 5678):

Health Insurance Card Number:

5) Did the deceased Tobacco-Victim reside in Quebec on the date on which they were diagnosed with primary lung cancer, primary squamous cell carcinoma of the larynx, oropharynx, hypopharynx (throat cancer), emphysema or COPD (GOLD Grade III or IV)?

☐ Yes ☐ No

6) Did the deceased Tobacco-Victim reside in Quebec on the date of their death?

☐ Yes ☐ No

PART 3: PROOF OF DIAGNOSIS

Diagnosis before March 12, 2012

1) Was the deceased Tobacco-Victim diagnosed before March 12, 2012 with any of the following diseases? For all that apply, indicate the date of diagnosis and the place where the deceased Tobacco-Victim was resident on the date of diagnosis.

☐ **Primary Lung Cancer**

Date of diagnosis (YYYY-MM-DD):

Place of residence on date of diagnosis:

☐ **Primary squamous cell carcinoma of the larynx, oropharynx, or hypopharynx (Throat Cancer)**

Date of diagnosis (YYYY-MM-DD):

Place of residence on date of diagnosis:

☐ **Emphysema or COPD (GOLD Grade III or IV)**

Date of diagnosis (YYYY-MM-DD):

Place of residence on date of diagnosis:

Please note, in the case of recurrence or relapse, please indicate the initial date of diagnosis only.

2) Authorization to obtain Official Confirmation of ³²⁶Diagnosis:

I hereby authorize the Claims Administrator to obtain a copy of the deceased Tobacco-Victim's medical information relating to the diseases/diagnoses referenced in Question 1 above, and I authorize the PCC Agent, the QCAP Agent, MSSS and/or the RAMQ, as applicable, to provide the Claims Administrator with copies of any of the following:

- A confirmation of the deceased Tobacco-Victim's diagnosis from the Quebec Cancer Registry;
 - An extract from RAMQ files confirming the deceased Tobacco-Victim's diagnosis;
 - An extract from the MED-ÉCHO database confirming the deceased Tobacco-Victim's diagnosis; and
 - All other medical files relating to the deceased Tobacco-Victim.
- ☐ **By checking this box, I authorize the deceased Tobacco-Victim's above-referenced medical information to be released to the Claims Administrator.**

If an official confirmation of disease/diagnosis cannot be made through these means, the Claims Administrator will contact you to request the submission of an alternative method of proof.

Do not submit any alternative evidence unless it has been explicitly requested by way of a Notice from the Claims Administrator titled "Notice to Provide Alternative Proof."

PART 4: PROOF OF SMOKING HISTORY

1) The Tobacco-Victim started smoking cigarettes:

- ☐ Before January 1, 1976;
- ☐ On or after January 1, 1976.

2) Between January 1, 1950 and November 20, 1998 the deceased Tobacco-Victim smoked approximately _____ cigarettes per day for approximately _____ years.

OR

3) If the number of cigarettes the Tobacco-Victim smoked varied between January 1, 1950 and November 20, 1998, provide a summary below of the number of cigarettes the Tobacco-Victim smoked during that period of time:

- a) Smoked approximately _____ cigarettes per day between (YYYY) _____ and (YYYY) _____;
- b) Smoked approximately _____ cigarettes per day between (YYYY) _____ and (YYYY) _____;
- c) Smoked approximately _____ cigarettes per day between (YYYY) _____ and (YYYY) _____;
- d) Smoked approximately _____ cigarettes per day between (YYYY) _____ and (YYYY) _____;
- e) Smoked approximately _____ cigarettes per day between (YYYY) _____ and (YYYY) _____.

If more space is needed, attach additional sheet(s) to this Claim Form.

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4) The Tobacco-Victim regularly smoked the following brands of cigarettes (select all that apply):

☐ **Accord**

- Accord KF

☐ **Avanti/Light**

☐ **B&H**

- B&H 100 Del.UL.LT/MEN
- B&H 100 F
- B&H 100 F Menthol
- B&H Light Menthol
- B&H Lights
- B&H Special KF
- B&H Special Lights KF

☐ **Belmont**

- Belmont KF

☐ **Belvedere**

- Belvedere Extra Mild

☐ **Camel**

☐ **Cameo**

- Cameo Extra Mild

☐ **Craven "A"**

- Craven "A" Special
- Craven "A" Light
- Craven "A" Ultra Light/Mild

☐ **Craven "M"**

- Craven "M" KF
- Craven "M" Special

☐ **du Maurier**

- du Maurier Light
- du Maurier Special
- du Maurier Ultra Light

☐ **Dunhill**

- Dunhill KF

☐ **Export**

- Export "A"
- Export "A" Lights
- Export "A" Medium
- Export "A" Extra Light
- Export "A" Special Edition
- Export "A" Ultra Light
- Export Mild
- Export Plain

☐ **LD**

☐ **Macdonald**

- Macdonald Menthol

☐ **Mark Ten**

- Mark Ten Filter

☐ **Matinee**

- Matinee Extra Mild
- Matinee Slims/Menthol
- Matinee Special/Menthol

☐ **Medallion**

☐ **More**

☐ **North American Spirit**

☐ **Number 7**

- Number 7 Lights

☐ **Peter Jackson**

- Peter Jackson Extra Light KF

☐ **Player's**

- John Player's Special
- Player's Extra Light
- Player's Filter
- Player's Light
- Player's Medium
- Player's Plain

☐ **Rothmans**

- Rothmans Extra Light
- Rothmans KF
- Rothmans Light
- Rothmans Special
- Rothmans UL LT KF

☐ **Select Special/Ultra Mild/Menthol**

☐ **Spirit**

☐ **Vantage**

- Vantage KF
- Vantage Light/Menthol

☐ **Viscount**

- Viscount #1 KF
- Viscount Extra Mild/Menthol

☐ **Winston**

1) Are you the liquidator of the deceased Tobacco-Victim's estate? Please select and mark only one of the following options.

- ☐ Yes, I am the liquidator of the estate of the deceased Tobacco-Victim, appointed pursuant to the deceased Tobacco-Victim's will, codicil or by law pursuant to a marriage contract.

If you select this option, please complete and attach **Sub-Form B.1** to this Claim Form and provide all the required supporting documents.

- ☐ Yes, I am the liquidator of the estate of the deceased Tobacco-Victim, appointed by the legal heirs, as the deceased Tobacco-Victim did not have a valid will.

If you select this option, please complete and attach **Sub-Form B.2** to this Claim Form and provide all the required supporting documents.

- ☐ No, I am not a liquidator of the estate of the deceased Tobacco-Victim.

If you selected "No" above, please answer Question 2 below.

2) Are you an heir of the deceased Tobacco-Victim?

- ☐ Yes, I am an heir pursuant to the deceased Tobacco-Victim's will, codicil or marriage contract.

If you select this option, please complete and attach **Sub-Form B.3** to this Claim Form and provide all the required supporting documents.

- ☐ Yes, I am an heir of the deceased Tobacco-Victim by operation of law.

If you select this option, please complete and attach **Sub-Form B.4** to this Claim Form and provide all the required supporting documents.

- ☐ Yes, I am an heir of an heir of the deceased Tobacco-Victim.

If you select this option, please complete and attach either **Sub-Form B.3 or B.4**, as applicable regarding the deceased Tobacco-Victim, and provide all the required supporting documents and provide a similar declaration in respect of the deceased heir that you represent.

Reminder: For assistance with the submission of required documentation, you may contact the QCAP Agent (Proactio) by phone **toll-free in Canada at 1-888-880-1844**, by email at tabac@proactio.ca, or online at www.RecoursTabac.com.

INSTRUCTIONS TO COMPLETE STATUTORY DECLARATION

You must sign the Statutory Declaration below in the presence of a Commissioner of Oaths, sometimes referred to as a Commissioner for taking Affidavits. Signing can be done remotely.

A Commissioner of Oaths is a person who is authorized to take affidavits or declarations by asking you to swear or affirm that the statements in a document are true. Every lawyer and some paralegals are Commissioners of Oaths.

If you need assistance, you may contact the QCAP Agent (Proactio) by phone toll-free (in Canada) at 1-888-880-1844, by email at tabac@proactio.ca, or online at www.RecoursTabac.com who can arrange for a Commissioner of Oaths to commission the signing of your Statutory Declaration before you submit your Claim Form to the Claims Administrator.

I, _____, solemnly declare that the information that I have provided on this Claim Form is true and correct and the documents submitted in support of my claim are genuine and have not been modified in any way whatsoever.

I make this solemn declaration conscientiously believing it to be true and knowing that it is of the same force and effect as if made under oath.

Where someone has helped me with this Claim Form, that person has read to me everything they wrote and included with this Claim Form, if necessary to allow me to understand the content of this completed Claim Form and any attachments to it, and I confirm that this information is true and correct.

this _____ day of _____, 20____.

Signature of Succession Claimant (or Representative)

SOLEMNLY AFFIRMED BEFORE ME, remotely

The Succession Claimant (Representative) at _____.
(Town/City/Municipality)

The Commissioner of Oaths at _____.
(Town/City/Municipality)

Commissioner for Oaths Quebec Number

SUCCESSION CLAIM FORM INSTRUCTIONS

As the liquidator of a deceased Tobacco-Victim's estate or an heir of a deceased Tobacco-Victim, you are considered a "Succession Claimant" under the terms of the QCAP Plan. If the claim is proven, you will be entitled to receive compensation as a "Succession Class Member." In the case of a claim submitted by an heir, the compensation may be split among all eligible heirs.

This document is intended to assist you with completing the QCAP Succession Claim Form, and assemble the supporting documentation required to prove your claim.

If you require any assistance completing your Claim Form, please call the QCAP Agent (Proactio) toll-free at 1-888-880-1844 or send an email to tabac@proactio.ca or visit the QCAP Agent website at www.RecoursTabac.com.

PART 1: INFORMATION ABOUT THE SUCCESSION CLAIMANT

You must provide information to prove that you are entitled to submit a claim on behalf of the estate of the deceased Tobacco-Victim.

Succession claims **must** be submitted by the liquidator of the deceased Tobacco-Victim's estate, if there is still a liquidator acting in that capacity. If there is no liquidator (or no longer a liquidator) to the deceased Tobacco-Victim's estate, then a claim may be submitted by an heir to the deceased Tobacco-Victim, or by an heir of an heir. Please note that it is not sufficient to be a member of a deceased Tobacco-Victim's family in order to file a claim as an heir; a person must be an heir named in a will or registered marriage contract, or be the legal heir pursuant to the Quebec law on successions.

In response to **Questions 1 and 2**, provide the personal details of the person entitled to make the claim. If you are filing the claim on your own behalf, you are the "Succession Claimant." If you are filing as a representative, then the information requested concerns the person you represent.

In response to **Question 3**, indicate whether you are submitting the Claim Form as the Representative of a Succession Claimant.

Only answer **Question 4** if you are submitting the Claim Form as the Representative of the Succession Claimant. In response to these questions, indicate the type of mandate pursuant to which you are acting. You must also attach a copy of the mandate, power of attorney or judgment with the Claim Form, marked with the words "Succession Representative's Mandate," followed by the deceased Tobacco-Victim's name on the front page of the document, and in the file name, if submitted electronically.

In response to **Questions 5 and 6**, provide your mailing address and contact information so that the Claims Administrator can communicate with you in respect of the claim. The Claims Administrator will communicate with you by email, if an email address is provided. Please add the Claims Administrator's email address info@TobaccoClaimsCanada.ca to your list of contacts to ensure that correspondence in connection with your claim reaches your inbox.

In response to **Question 7**, indicate your language of preference for communications from the Claims Administrator.

PART 2: DECEASED TOBACCO-VICTIM INFORMATION

In response to **Question 1**, provide the deceased Tobacco-Victim's full name.

In response to **Question 2**, provide the deceased Tobacco-Victim's birth date.

In response to **Question 3**, provide the deceased Tobacco-Victim's date of death.

In response to **Question 4**, provide the deceased Tobacco-Victim's health insurance card number (e.g., ABCD 1234 5678). This information is required to enable the Claims Administrator to make requests to the MSSS and RAMQ for relevant documents to assist in proving the diagnosis and the date of diagnosis of the Tobacco-Victim's tobacco-related disease(s).

In response to **Question 5**, confirm whether the deceased Tobacco-Victim resided in Quebec on the date on which they were diagnosed with primary lung cancer, primary squamous cell carcinoma of the larynx, oropharynx, hypopharynx (throat cancer), emphysema or COPD (GOLD Grade III or IV).

In response to **Question 6**, indicate whether the deceased Tobacco-Victim resided in Quebec on the date of their death.

PART 3: PROOF OF DIAGNOSIS

To be eligible for compensation, the deceased Tobacco-Victim must have been **before March 12, 2012** with primary lung cancer, primary cancer (squamous cell carcinoma) of the larynx, oropharynx, hypopharynx, emphysema, or COPD (GOLD Grade III or IV). These are the only diseases covered by the QCAP Plan.

In response to **Question 1**, indicate the disease(s) the deceased Tobacco-Victim was diagnosed with, and for each, indicate the initial date of diagnosis. A recurrence or a relapse is not considered a primary cancer. In the case of a recurrence or relapse, only indicate the initial diagnosis date. Please note that the Succession Claimant will only receive compensation relating to the proven claim that entitles the estate of the Tobacco-Victim to the highest compensation.

If you do not recall the exact date of the deceased Tobacco-Victim's diagnosis, please provide the most accurate estimate possible, as this information will be verified by the Claim Administrator.

If you need assistance, please contact the QCAP Agent (Proactio) at 1-888-880-1844 or send an email to tabac@proactio.ca or visit the QCAP Agent (Proactio) website at www.RecoursTabac.com.

In **Question 2**, you must provide authorization for the Claims Administrator to obtain medical information concerning the deceased Tobacco-Victim from the sources listed therein for the purpose of confirming the diagnosis and the date of diagnosis of the disease(s) indicated in response to **Question 1**.

To facilitate the process of proving Tobacco-Victims' diagnoses for claimants, Class Counsel will request the official records, including from RAMQ, the MSSS, the Quebec Cancer Registry, and the MED-ÉCHO database. Both the QCAP Agent (Proactio) and the Claims Administrator will have access to this information.

If an official confirmation of disease/diagnosis cannot be made from these sources, the Claims Administrator will contact you to request that you submit an alternative method of proof. By way of example only, such proof may include:

- a copy of a pathology report which confirms that the Tobacco-Victim was diagnosed with Lung Cancer or Throat Cancer, as applicable, before March 12, 2012;
- a copy of a report of a spirometry test performed on the Tobacco-Victim before March 12, 2012, demonstrating a FEV1 (non-reversible) of less than 50% of the predicted value to establish a diagnosis of Emphysema or COPD (GOLD Grade III or IV);
- an extract from the Tobacco-Victim's medical records or a written statement of the Tobacco-Victim's Physician.

Do not submit any alternative evidence unless it has been explicitly requested from you by way of a Notice from the Claims Administrator entitled "Notice to Provide Alternative Proof".

If requested, when submitting your Alternative Proof electronically, please name the PDF document "[insert health insurance card number]-Alternative Medical Proof.pdf" as applicable.

PART 4: PROOF OF SMOKING HISTORY

In **Question 1**, you must confirm that you have knowledge of the deceased Tobacco-Victim's smoking habits and indicate whether the deceased Tobacco-Victim started smoking either: (a) before January 1, 1976; or (b) on or after, January 1, 1976. The Quebec Courts reduced the Tobacco companies' liability by 20% for Tobacco-Victims who started smoking after January 1, 1976 because the Courts determined that, by January 1, 1980, the dangers of contracting a disease from smoking were known to the public, and that it would have taken 4 years for an individual to become addicted to smoking. Thus, people who started smoking after January 1, 1976 are deemed to have been aware of the dangers of contracting a disease from smoking (the Courts also determined that the public was deemed to have knowledge as of March 1, 1996 that cigarettes were addictive). Consequently, deceased Tobacco-Victims who started smoking after January 1, 1976 are entitled to compensation of 80%. These determinations by the Courts are final and cannot be appealed.

Please note that in order to be entitled to compensation, the deceased Tobacco-Victim must have smoked 12 pack-years, or 87,600 cigarettes, between January 1, 1950 and November 20, 1998.

A pack-year is 7,300 cigarettes, expressed in terms of daily smoking. For example, 12 pack-years equals:

- 20 cigarettes a day for 12 years ($20 \times 365 \times 12 = 87,600$); or
- 30 cigarettes a day for 8 years ($30 \times 365 \times 8 = 87,600$); or
- 10 cigarettes a day for 24 years ($10 \times 365 \times 24 = 87,600$).

It is not necessary for you to calculate the number of pack-years smoked by the Tobacco-Victim, as this calculation will be done by the Claims Administrator when reviewing the Claim Form.

If the deceased Tobacco-Victim's smoking history³³³ can be easily expressed in terms of number of cigarettes smoked per day per year, then please fill out the requisite information where indicated in **Question 2**. If the deceased Tobacco-Victim's smoking history cannot be easily expressed in such terms, please provide a summary where indicated in **Question 3** of the deceased Tobacco-Victim's smoking habits between January 1, 1950 and November 20, 1998.

In **Question 4**, please check the boxes for all brands of cigarettes that the deceased Tobacco-Victim smoked on a regular basis between January 1, 1950 and November 20, 1998. The brand choices listed include the "family" of those brands. For example, Player's includes Player's Light and Player's Filter, etc. The purpose of providing this information is to confirm that the deceased Tobacco-Victim smoked cigarettes manufactured by the Defendant Tobacco companies.

PART 5: PROOF OF SUCCESSION STATUS

Provide the required proof of the Succession Claimant's status to assert a Succession Claim.

In response to **Question 1**, indicate whether the Succession Claimant is a liquidator to the estate of the deceased Tobacco-Victim. Mark the first box if you are the liquidator pursuant to a will, codicil or by law pursuant to a marriage contract. Mark the second box if you are a liquidator pursuant to an appointment by the heirs, in the case of a deceased Tobacco-Victim who did not have a will. Mark the third box if the Succession Claimant is not a liquidator.

Question 2 only needs to be answered if you marked the third box "No" in Question 1. Mark the first box if the Succession Claimant is an heir pursuant to a will, codicil or marriage contract. Mark the second box if the Succession Claimant is an heir by operation of law (i.e., if the deceased Tobacco-Victim did not have a will). Mark the third box if the Succession Claimant is an heir of an heir who has died. If you are filing the Claim Form as an heir of an heir, you will need to complete and attach a Declaration in respect of the estate of the deceased Tobacco-Victim and a Declaration in respect of the estate of the heir whom you represent.

You must also fill in the Sub-Form required as indicated next to the box you marked. Follow the instructions found on that Sub-Form and provide all required supporting documents.

If you require assistance, please contact the QCAP Agent (Proactio) toll-free at 1-888-880-1844 or send an email to tabac@proactio.ca or visit the QCAP Agent (Proactio) website at www.RecoursTabac.com.

PART 6: STATUTORY DECLARATION AND SIGNATURE

Provide the Succession Claimant (or Representative)'s name, the date and add your signature. By signing the Claim Form, the Succession Claimant (or Representative) acknowledges that the information submitted is true and that all supporting documents are authentic and have not been altered.

The Claim Form must be signed before a Commissioner for Oaths. Signing can be done remotely.

If the QCAP Agent (Proactio) is assisting you with your Claim Form, they can arrange for a Commissioner for Oaths to commission your Claim Form prior to submitting it to the Claims Administrator.

If you are not using the assistance of the QCAP Agent (Proactio), you may locate a Commissioner for Oaths by visiting the following link: <https://www.assermentation.justice.gouv.qc.ca/ServicesPublicsConsultation/Commissaires/Proximate/Criteres.aspx>

LIQUIDATOR TO AN ESTATE OF THE DECEASED PURSUANT TO A WILL, CODICIL OR MARRIAGE CONTRACT

In **Section 1**, fill in the blanks where indicated. If options are listed, please check the box next to the option that is applicable to your situation.

Locate and attach all exhibits referred to in the Declaration. For ease of reference, the exhibits are also listed in **Section 2**.

The Declaration must be signed before a Commissioner of Oaths. Signing can be done remotely.

If the QCAP Agent (Proactio) is assisting you with your Declaration, they can arrange for a Commissioner of Oaths to commission your Declaration prior to submitting it to the Claims Administrator.

If you are not using the assistance of the QCAP Agent (Proactio), you may locate a Commissioner of Oaths to commission your Declaration at the following link: <https://www.assermentation.justice.gouv.qc.ca/ServicesPublicsConsultation/Commissaires/Proximate/Criteres.aspx>.

If submitting your Claim Form electronically, please save the Declaration and Exhibits together in one PDF file and name the document “[Health insurance card number of the deceased Tobacco Victim]-Declaration of Liquidator.pdf”.

SECTION 1. DECLARATION OF A LIQUIDATOR PURSUANT TO A WILL, CODICIL OR MARRIAGE CONTRACT

I _____ (name), _____ (profession), residing and domiciled at _____ (address), do solemnly affirm the following:

1. I attach hereto the death certificate of _____ (name of deceased).
2. I attach hereto the Will Search Certificate of _____ (name of deceased) from the *Chambre des notaires du Québec*.
3. I attach hereto the Will Search Certificate of _____ (name of deceased) from the Bar of Quebec.
4. I attach hereto:
 - ☐ the notarial will;
 - ☐ the will, together with the judgment probating the will or minutes of probate by a notary;
 - ☐ the notarial codicil;
 - ☐ the codicil, together with the judgment probating the codicil or the minutes of probate by a notary;
 - ☐ the registered marriage contract.

pursuant to which I was appointed the liquidator to the estate of _____ (name of deceased).

5. I confirm that I am still acting in the capacity ³³⁵as liquidator to the estate of _____ (name of deceased) and confirm that I shall receive any compensation due to such estate and distribute such compensation in accordance with the deceased's instructions in accordance with my duties.
6. If applicable, I also attach any other relevant documents for the estate of _____ (name of deceased).

Examples of other relevant documents include a certified copy of will before witnesses or holograph will probated by a Notary; a court order appointing a provisional liquidator or replacement liquidator; or a notarial deed or private writing executed by the heirs appointing a liquidator.

7. All of the facts contained herein are true and all of the documents that I have submitted in support of this claim are genuine and have not been altered in any way.

AND I HAVE SIGNED,

Name of Succession Claimant

On _____ (Date)

SOLEMNLY AFFIRMED BEFORE ME remotely

the Succession Claimant at _____ (City), Quebec

the Commissioner of Oaths at _____ (City), Quebec

Commissioner for Oaths Quebec Number

SECTION 2. LIST OF DOCUMENTS TO ATTACH

- ☐ **Death Certificate**
- ☐ **Will Search Certificate — Chambres des notaires du Québec**
- ☐ **Will Search Certificate — Barreau du Québec**
- ☐ **(i) The Notarial Will; (ii) Will, together with the judgment probating the Will or minutes of probate by a notary; (iii) Notarial Codicil; (iv) Codicil, together with the judgment probating the Codicil or minutes of probate by a notary; or (v) Marriage Contract**
- ☐ **If applicable, other relevant documents**

LIQUIDATOR OF THE ESTATE OF A DECEASED, APPOINTED BY THE HEIRS

In **Section 1**, fill in the blanks where indicated. If options are listed, please check the box next to the option that is applicable.

Locate and attach all exhibits referred to in the Declaration. For ease of reference, the exhibits are also listed in **Section 2**.

The Declaration must be signed before a Commissioner of Oaths. Signing can be done remotely.

If the QCAP Agent (Proactio) is assisting you with your Declaration, they can arrange for a Commissioner of Oaths to commission your Declaration prior to submitting it to the Claims Administrator.

If you are not using the assistance of the QCAP Agent (Proactio), you may locate a Commissioner of Oaths to commission your Declaration at the following link: <https://www.assermentation.justice.gouv.qc.ca/ServicesPublicsConsultation/Commissaires/Proximite/Criteres.aspx>.

If submitting your Proof of Claim electronically, please save the Declaration and Exhibits together in one PDF file and name the document "[Health insurance card number of the Deceased Tobacco-Victim]-Declaration of Liquidator.pdf".

SECTION 1. DECLARATION OF A LIQUIDATOR OF THE ESTATE OF THE DECEASED, APPOINTED BY THE HEIRS

I _____ (name), _____ (profession), residing and domiciled at _____ (address), do solemnly affirm the following:

1. I attach hereto the death certificate of _____ (name of deceased).
2. I attach hereto the Will Search Certificate of _____ (name of deceased) from the *Chambre des notaires du Québec*.
3. I attach hereto the Will Search Certificate of _____ (name of deceased) from the Bar of Quebec.
4. As appears from the foregoing, there are no registered wills in the name of _____ (name of deceased), and I do not believe that the deceased had a will.
5. I am the _____ (relationship) of _____ (name of deceased).
6. On _____ (date), I was appointed by the legal heirs of _____ (name of deceased) to act as liquidator to the estate of _____ (name of deceased), as appears from the following document:
 - ☐ a copy of a notarial deed;
 - ☐ a private writing;
 - ☐ any other document, as applicable.

7. I confirm that I am still acting in the capacity³³⁷ as liquidator to the estate of _____ (name of deceased) and confirm that I shall receive any compensation due to such estate and distribute such compensation in accordance with the law in accordance with my duties as liquidator.
8. If applicable, I also attach any other relevant documents for the estate of _____ (name of deceased).
9. All of the facts contained herein are true and all of the documents that I have submitted in support of this claim are genuine and have not been altered in any way.

AND I HAVE SIGNED,

Name of Succession Claimant

On _____ (Date)

SOLEMNLY AFFIRMED BEFORE ME remotely

the Succession Claimant at _____ (City), Quebec

the Commissioner of Oaths at _____ (City), Quebec

Commissioner for Oaths Quebec Number

SECTION 2. LIST OF DOCUMENTS TO ATTACH

- ☐ **Death Certificate**
- ☐ **Will Search Certificate — Chambres des notaires du Québec**
- ☐ **Will Search Certificate — Barreau du Québec**
- ☐ **Copy of the Notarial Deed or Private Writing, or another document**
- ☐ **If applicable, other relevant documents**

³³⁸ SUB-FORM B.3:

HEIR OF THE ESTATE OF A DECEASED PURSUANT TO A WILL, CODICIL, OR MARRIAGE CONTRACT

In **Section 1**, fill in the blanks where indicated. If options are listed, please check the box next to the option that is applicable.

Locate and attach all exhibits referred to in the Declaration. For ease of reference, the exhibits are also listed in **Section 2**.

The Declaration must be signed before a Commissioner of Oaths. Signing can be done remotely.

If the QCAP Agent (Proactio) is assisting you with your Declaration, they can arrange for a Commissioner for Oaths to commission your Declaration prior to submitting it to the Claims Administrator.

If you are not using the assistance of the QCAP Agent (Proactio), you may locate a Commissioner of Oaths to commission your Declaration at the following link: <https://www.assermentation.justice.gouv.qc.ca/ServicesPublicsConsultation/Commissaires/Proximite/Criteres.aspx>.

If submitting your Claim Form electronically, please save the Declaration and Exhibits together in one PDF file and name the document “[Health insurance card number of the deceased Tobacco Victim]-Declaration of Heir.pdf”.

SECTION 1. DECLARATION OF AN HEIR PURSUANT TO A WILL, CODICIL OR MARRIAGE CONTRACT

I _____ (name), _____ (profession), residing and domiciled at _____ (address), do solemnly affirm the following:

1. I attach hereto the death certificate of _____ (name of deceased).
2. I attach hereto the Will Search Certificate of _____ (name of deceased) from the *Chambre des notaires*.
3. I attach hereto the Will Search Certificate of _____ (name of deceased) from the Bar of Quebec.
4. I attach hereto:
 - ☐ the notarial will;
 - ☐ the will, together with the judgment probating the will or minutes of probate by a notary;
 - ☐ the notarial codicil;
 - ☐ the codicil, together with the judgment probating the codicil or the minutes of probate by a notary;
 - ☐ the registered marriage contract.

5. As appears from such document, I was named ³³⁹

- ☐ an heir to the estate of _____ (name of deceased);
- ☐ a particular legatee entitled to receive compensation from the class action.

6. The estate is closed and there is no liquidator in place.

7. I am:

- ☐ the sole heir;
- ☐ one of several heirs

to the estate of _____ (name of deceased).

8. If there are other heirs pursuant to the will or marriage contract entitled to receive compensation from the class action, I am attaching a list of their names and contact information.

9. If applicable, I also attach any other relevant documents for the estate of _____ (name of deceased).

10. All of the facts contained herein are true and all of the documents that I have submitted in support of this claim are genuine and have not been altered in any way.

AND I HAVE SIGNED,

Name of Succession Claimant or Representative

On _____ (Date)

SOLEMNLY AFFIRMED BEFORE ME remotely

the Succession Claimant at _____ (City), Quebec

the Commissioner of Oaths at _____ (City), Quebec

Commissioner for Oaths Quebec Number

SECTION 2. LIST OF DOCUMENTS TO ATTACH

- ☐ **Death Certificate**
- ☐ **Will Search Certificate — Chambres des notaires du Québec**
- ☐ **Will Search Certificate — Barreau du Québec**
- ☐ **(i) The Notarial Will; (ii) Will, together with the judgment probating the Will or minutes of probate by a notary; (iii) Notarial Codicil; (iv) Codicil, together with the judgment probating the Codicil or minutes of probate by a notary; or (v) Marriage Contract**
- ☐ **If applicable, other relevant documents**

HEIR OF THE ESTATE OF A DECEASED BY OPERATION OF LAW

For **Section 1**, fill in the blanks where indicated. This document must be printed and signed before a Commissioner of Oaths.

Locate and attach all exhibits referred to in the Declaration. For ease of reference, the exhibits are also listed in **Section 2**.

The Declaration must be signed before a Commissioner of Oaths. Signing can be done remotely.

If the QCAP Agent (Proactio) is assisting you with your Declaration, they can arrange for a Commissioner of Oaths to commission your Declaration prior to submitting it to the Claims Administrator.

If you are not using the QCAP Agent (Proactio), you may locate a Commissioner of Oaths to commission your Declaration at the following link: <https://www.assermentation.justice.gouv.qc.ca/ServicesPublicsConsultation/Commissaires/Proximite/Criteres.aspx>.

If submitting your Proof of Claim electronically, please save the Declaration and Exhibits together in one PDF file and name the document “[Health insurance card number of the deceased Tobacco Victim]-Declaration of Heir.pdf”.

SECTION 1. DECLARATION OF A LEGAL HEIR OF THE ESTATE OF A DECEASED

I _____ (name), _____ (profession), residing and domiciled at _____ (address), do solemnly affirm the following:

1. I attach hereto the death certificate of _____ (name of deceased).
2. I attach hereto the Will Search Certificate of _____ (name of deceased) from the *Chambre des notaires du Québec*.
3. I attach hereto the Will Search Certificate of _____ (name of deceased) from the Bar of Quebec.
4. As appears from the above-referenced searches, there are no registered wills in the name of _____ (name of deceased), and I do not believe that the deceased had a will.
5. I am the _____ (relationship) of _____ (name of deceased).

6. I attach a list containing the name and ³⁴¹contact information (for living heirs) of all of _____ (name of deceased)'s other heirs, including, as applicable, the deceased's spouse, children, parents, siblings, nieces and nephews.
7. If applicable, I also attach any other relevant documents for the estate of _____ (name of deceased).
8. All of the facts contained herein are true and all of the documents that I have submitted in support of this claim are genuine and have not been altered in any way.

AND I HAVE SIGNED,

Name of Succession Claimant

On _____ (Date)

SOLEMNLY AFFIRMED BEFORE ME remotely

the Succession Claimant at _____ (City), Quebec

the Commissioner of Oaths at _____ (City), Quebec

Commissioner for Oaths Quebec Number

SECTION 2. LIST OF DOCUMENTS TO ATTACH

- ☐ **Death Certificate**
- ☐ **Will Search Certificate — Chambres des notaires du Québec**
- ☐ **Will Search Certificate — Barreau du Québec**
- ☐ **A list of any other heirs, including their name, address, email address and telephone number**
- ☐ **If applicable, other relevant documents**

Attachment G

TCC – Audio/Video Script**June 9, 2025 version (51 words)**

A claims program for harmed Canadians has begun as a result of a landmark tobacco settlement. If you smoked regularly before November 20, 1998, and were diagnosed with lung cancer, throat cancer, emphysema or COPD, you may qualify for a significant payment. To learn more, call 888-482-5852* or go to TobaccoClaimsCanada.ca.

*888-482-5852 is the Epiq toll-free number for Claims Administrator/PCC Agent. The IVR would be programmed to allow the selection to speak with the QCAP Agent (Proactio) and the IVR will automatically route to Proactio.

Attachment H

PCC-QCAP Notice
Digital Banners and Social Media

728x90 Online Display Banner

(Frame 1 – on screen for 8 seconds/Frame 2 on screen for 6 seconds)

**If you smoked regularly before
Nov. 20, 1998 and were diagnosed
with a tobacco-related disease,**



**you may qualify for
\$14,400-\$100,000 from a
landmark settlement.**

File a Claim Now



**If you smoked regularly before
Nov. 20, 1998 and were diagnosed with
a tobacco-related disease,**



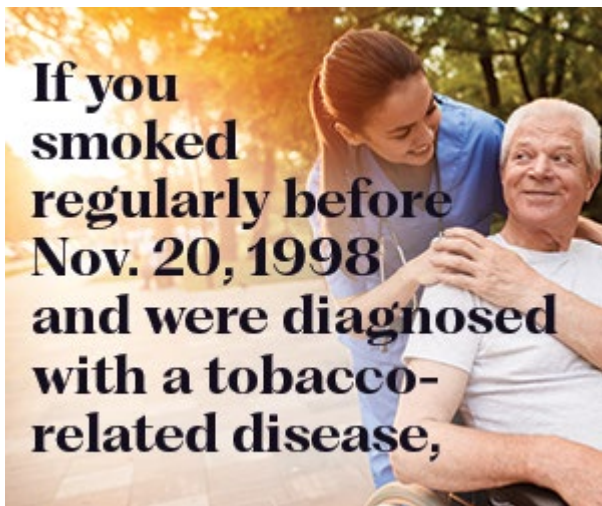
**you may qualify for
\$14,400-\$100,000 from a
landmark settlement.**

File a Claim Now

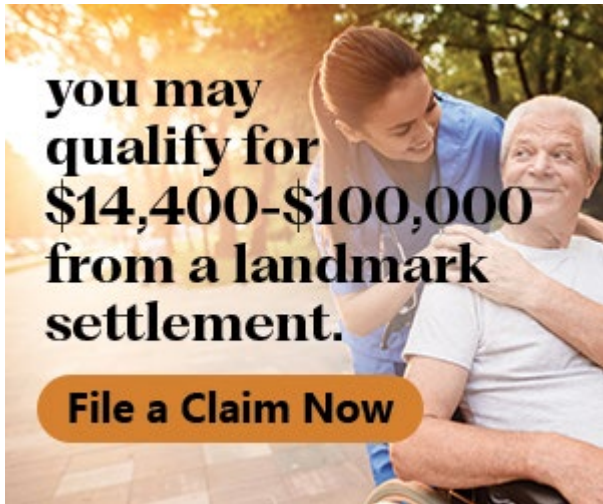


300 x 250 Online Display Banner

(Frame 1 – on screen for 8 seconds/Frame 2 on screen for 6 seconds)

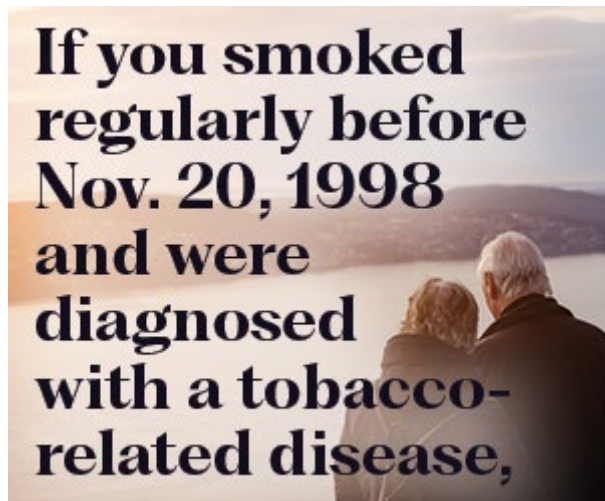


**If you
smoked
regularly before
Nov. 20, 1998
and were diagnosed
with a tobacco-
related disease,**



**you may
qualify for
\$14,400-\$100,000
from a landmark
settlement.**

File a Claim Now



**If you smoked
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Nov. 20, 1998
and were
diagnosed
with a tobacco-
related disease,**



**you may qualify
for \$14,400-
\$100,000 from
a landmark
settlement.**

File a Claim Now

Facebook

 Tobacco Claims Canada
Sponsored · 

If you smoked regularly before Nov. 20, 1998 and were diagnosed with a tobacco-related disease, you may qualify for compensation.

If you smoked regularly before Nov. 20, 1998 and were diagnosed with a tobacco-related disease,

you may qualify for \$14,400-\$100,000 from a landmark settlement.

www.tobaccoclaimscanada.ca
File a Claim Now
If you smoked regularly b...

[Learn more](#)

 Like  Comment  Share

 Tobacco Claims Canada
Sponsored · 

If you smoked regularly before Nov. 20, 1998 and were diagnosed with a tobacco-related disease, you may qualify for compensation.

If you smoked regularly before Nov. 20, 1998 and were diagnosed with a tobacco-related disease,

you may qualify for \$14,400-\$100,000 from a landmark settlement.

www.tobaccoclaimscanada.ca
File a Claim Now
If you smoked regularly b...

[Learn more](#)

 Like  Comment  Share

Instagram

Instagram

 Tobacco Claims Canada
Sponsored · 

...

If you smoked regularly before Nov. 20, 1998 and were diagnosed with a tobacco-related disease,

you may qualify for \$14,400-\$100,000 from a landmark settlement.

Learn more >

Smoked regularly and were diagnosed with a tobacco-related disease?

Instagram

 Tobacco Claims Canada
Sponsored · 

...

If you smoked regularly before Nov. 20, 1998 and were diagnosed with a tobacco-related disease,

you may qualify for \$14,400-\$100,000 from a landmark settlement.

Learn more >

Smoked regularly and were diagnosed with a tobacco-related disease?

X**Tobacco Claims Canada**

If you smoked regularly before Nov. 20, 1998 and were diagnosed with a tobacco-related disease, you may qualify for \$14,400-\$100,000 from a landmark settlement.

**If you smoked
regularly before
Nov. 20, 1998
and were diagnosed
with a tobacco-
related disease,**

**you may qualify for
\$14,400-\$100,000 from
a landmark settlement.**

www.tobaccoclaimscanada.ca



Promoted

**Tobacco Claims Canada**

If you smoked regularly before Nov. 20, 1998 and were diagnosed with a tobacco-related disease, you may qualify for \$14,400-\$100,000 from a landmark settlement.

**If you smoked
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Nov. 20, 1998
and were diagnosed
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**you may qualify for
\$14,400-\$100,000 from
a landmark settlement.**

www.tobaccoclaimscanada.ca



Promoted

Reddit

Tobacco Claims Canada

PROMOTED

If you smoked regularly before Nov. 20, 1998 and were diagnosed with a tobacco-related disease, you may qualify for \$14,400-\$100,000 from a landmark settlement.

**If you smoked
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and were diagnosed
with a tobacco-
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\$14,400-\$100,000 from
a landmark settlement.**

www.tobaccoclaimscanada.ca [LEARN MORE](#)

...

Tobacco Claims Canada

PROMOTED

If you smoked regularly before Nov. 20, 1998 and were diagnosed with a tobacco-related disease, you may qualify for \$14,400-\$100,000 from a landmark settlement.

**If you smoked
regularly before
Nov. 20, 1998
and were diagnosed
with a tobacco-
related disease,**

**you may qualify for
\$14,400-\$100,000 from
a landmark settlement.**

www.tobaccoclaimscanada.ca [LEARN MORE](#)

...

Attachment I

If you smoked regularly before Nov. 20, 1998 and were diagnosed with a tobacco-related disease, you may qualify for \$14,400-\$100,000 from a landmark settlement.

Canadian Newswire / CITY, PROVINCE / Day Month, 20YY / As part of a landmark settlement with Canadian tobacco companies, the Ontario Superior Court of Justice (Commercial List) approved two compensation plans to provide payments to eligible smokers and ex-smokers diagnosed with certain tobacco-related diseases:

- The Pan-Canadian Claimants' Compensation Plan (**PCC**); and
- The Quebec Class Action Administration Plan (**QCAP**)

For those who have died that qualify, payments may be available for their estates.

What are the eligible diseases and dollar amounts?

This table shows the diseases covered by the plans and the maximum payment amounts:

Disease	You started smoking before January 1, 1976	You started smoking on or after January 1, 1976
Primary Lung Cancer or Primary Throat Cancer	\$60,000 PCC \$100,000 QCAP	\$48,000 PCC \$80,000 QCAP
Emphysema or COPD (GOLD Grade III or IV)	\$18,000 PCC \$30,000 QCAP	\$14,400 PCC \$24,000 QCAP

Important: Payments may be reduced depending on the number of eligible claims in each plan. A person will only be entitled to one payment, under one plan, and for one disease.

What are the claim deadlines?

The Claims Submission Periods commenced on Month DD, 2025 and the two plans have different claim deadlines:

- **PCC** claim deadline is **Month DD, 2027**
- **QCAP** claim deadline is **Month DD, 2026**

Important: QCAP deadline is one year earlier than PCC deadline.

How many cigarettes and which brands?

Both plans require the smoker or ex-smoker to have smoked at least 87,600 cigarettes (for example, 20 cigarettes a day for 12 years) between January 1, 1950 and November 20, 1998. The cigarettes must be from brands sold by the tobacco companies. The website has a list of the eligible brands, which include most legal cigarettes sold in Canada.

What are other PCC Requirements?

In addition to the disease and smoking requirements, the smoker or ex-smoker under **PCC** must:

- (a) reside in Canada (or if deceased, must have resided in Canada at the time of death);
- (b) have been diagnosed **between March 8, 2015 and March 8, 2019**, inclusive of those dates;
- (c) have resided in Canada at the time of diagnosis; and
- (d) have been alive on March 8, 2019.

What are other QCAP Requirements?

In addition to the disease and smoking requirements, the smoker or ex-smoker under **QCAP** must:

- (a) reside in Quebec (or if deceased, must have resided in Quebec at the time of death);
- (b) have been diagnosed **before March 12, 2012**;
- (c) have resided in Quebec at the time of diagnosis; and
- (d) have been alive on November 20, 1998.

How can I get Free help?

Agents are available **free of charge** to assist claimants under these plans. Agents will help you (a) complete your claim form; (b) commission your signature on the claim form; (c) provide guidance on how to obtain the necessary information and documents for your claim.

PCC Agent is Epiq +1 (888) 482-5852
PCCAgent@TobaccoClaimsCanada.ca

QCAP Agent is Proactio +1 (888) 880-1844
tabac@proactio.ca

If you do not submit a claim by the applicable deadline, you cannot be eligible to get a payment.

If you are not sure whether you qualify, the website has a simple questionnaire to help you. The plans have been designed so that you **do not need a lawyer** to prepare and submit your claim. If you have already registered, you will be notified by an Agent about how to complete your claim.

Full information is available at the official website www.TobaccoClaimsCanada.ca.

###

SOURCE// TBD

PRESS ONLY// TBD

B

This is Exhibit “B” referred to in the Affidavit of Michael O’Connor, sworn before me this 22nd day of August, 2025.

Sarah Stothart

A Commissioner for Taking Affidavits, etc.

COUR SUPÉRIEURE
(Chambre des actions collectives)

CANADA
PROVINCE DE QUÉBEC
DISTRICT DE MONTRÉAL

N° : 500-06-000076-980

DATE : 21 Juillet 2025

SOUS LA PRÉSIDENTE DE : L'HONORABLE CATHERINE PICHÉ J.C.S.

**Dans l'affaire de la mise en œuvre du Plan
d'administration du Québec**

CONSEIL QUÉBÉCOIS SUR LE TABAC ET LA SANTÉ

Demandeur

-et-

JTI MACDONALD CORP.

-et-

IMPERIAL TOBACCO CANADA LIMITED

-et-

ROTHMANS, BENSON & HEDGES INC.

Défenderesses

-et-

DELOITTE RESTRUCTURING INC.,

-et-

FTI CONSULTING INC.

500-06-000076-980

PAGE : 2

-et-

ERNST & YOUNG INC.

Intervenants

-et-

PROCUREUR GÉNÉRAL DU QUÉBEC

-et-

RÉGIE DE L'ASSURANCE MALADIE DU QUÉBEC

-et-

SERVICES PROACTIO INC.

-et-

EPIQ CLASS ACTION SERVICES CANADA INC.

-et-

THE LAW PRACTICE OF WAGNER & ASSOCIATES INC.

Mis en cause

ORDONNANCE

[1] **CONSIDÉRANT** la *Demande pour l'obtention d'une ordonnance autorisant et ordonnant à la RAMQ et au MSSS de fournir les confirmations officielles des membres du groupe du Québec et les pièces à son soutien;*

[2] **CONSIDÉRANT** que, dans le cadre des procédures entreprises en vertu de la *Loi sur les arrangements avec les créanciers des compagnies (LACC)*, des plans d'arrangement pour chacun des défendeurs (les « **Plans de la LACC** ») ont

été présentés pour approbation à la Cour supérieure de la province de l'Ontario (le « **Tribunal de la LACC** »)

[3] **CONSIDÉRANT** que les Plans de la LACC ont été approuvés le 6 mars 2025 par le Tribunal de la LACC;

[4] **CONSIDÉRANT** que cette Cour aide et assiste le **Tribunal de la LACC** et qu'elle supervisera conjointement avec celui-ci la mise en œuvre du **Plan d'administration du Québec** contenu dans les **Plans de la LACC** visant à encadrer le processus de réclamation;

[5] **CONSIDÉRANT** les représentations des procureurs à l'audience;

LA COUR :

[6] **ACCUEILLE** la *Demande pour l'obtention d'une ordonnance autorisant et ordonnant à la Régie de l'assurance-maladie du Québec (RAMQ) et au Ministère de la santé et des services sociaux (MSSS) de fournir les confirmations officielles des membres du groupe du Québec* (la « **Demande** »);

[7] **DÉCLARE** que les expressions définies dans la présente ordonnance (en caractères gras) ont le même sens que celui qui leur est donné dans la Demande;

[8] **AUTORISE** le MSSS et la RAMQ à procéder dans les meilleurs délais à l'extraction dans les **Registres officiels** ou dans le **FIPA** des renseignements décrits ci-après pour les **Maladies indemnissables** jusqu'au 8 mars 2019, en fonction des critères et des paramètres décrits ci-après, et les autoriser à créer trois listes regroupant l'ensemble des extractions effectuées:

1. Les renseignements liés à tous les diagnostics de Cancer du poumon (Liste 1), soit :

- Les noms et prénoms la personne ayant reçu le diagnostic;
- La date de naissance de la personne ayant reçu le diagnostic;
- Le sexe de la personne ayant reçu le diagnostic;
- Le nom complet de la mère de la personne ayant reçu le diagnostic;
- Le **NAM** de la personne ayant reçu le diagnostic;

- Le type de cancer diagnostiqué;
 - La date du diagnostic;
 - La date de décès, le cas échéant.
2. Les renseignements liés à tous les diagnostics de Cancer de la gorge (Liste 2), soit :
- Les noms et prénoms de la personne ayant reçu le diagnostic;
 - La date de naissance de la personne ayant reçu le diagnostic;
 - Le sexe de la personne ayant reçu le diagnostic;
 - Le nom complet de la mère de la personne ayant reçu le diagnostic;
 - Le **NAM** de la personne ayant reçu le diagnostic;
 - Le type de cancer diagnostiqué;
 - La date du diagnostic;
 - La date de décès, le cas échéant;
3. Les renseignements liés à tous les diagnostics d'Emphysème (Liste 3) soit :
- Les noms et prénoms de la personne ayant reçu le diagnostic;
 - La date de naissance de la personne ayant reçu le diagnostic;
 - Le sexe de la personne ayant reçu le diagnostic;
 - Le nom complet de la mère de la personne ayant reçu le diagnostic;
 - Le **NAM** de la personne ayant reçu le diagnostic;
 - La date du diagnostic et/ou, pour MED-ECHO, la date d'admission en lien avec le diagnostic;
 - La date de décès, le cas échéant.

[9] **AUTORISE** la RAMQ à procéder dans les meilleurs délais à l'extraction des renseignements concernant les données de facturation des professionnels de la santé en lien avec un diagnostic d'Emphysème jusqu'au 8 mars 2019, et à créer une quatrième liste (liste 4), regroupant les renseignements ci-après décrits à partir des extractions effectuées dans le FIPA et à partir des données de facturation des professionnels de la santé :

- Les noms et prénoms de la personne ayant reçu le diagnostic;
- La date de naissance de la personne ayant reçu le diagnostic;
- Le sexe de la personne ayant reçu le diagnostic;
- Le nom complet de la mère de la personne ayant reçu le diagnostic;
- Le **NAM** de la personne ayant reçu le diagnostic;
- Le nom du médecin ayant donné le diagnostic;
- La ou les dates du diagnostic;
- La date de décès, le cas échéant;

[10] **AUTORISE** la RAMQ à communiquer aux Services Proactio Inc. et EPIQ Class Action Services Canada Inc. en leur qualité de mandataire auprès des **Avocats des Membres** et **Avocats représentant les PCC**, respectivement, désignées en vertu du **Plan d'administration du Québec** et du **Plan d'administration des PCC**, respectivement (les « **Parties autorisées** ») dans le format qu'elles auront convenu les renseignements contenus aux listes 1, 2, 3 et 4;

[11] **AUTORISE** les **Parties autorisées** à communiquer, le cas échéant, aux Requéranants successoraux qui auront prouvé leur qualité d'héritier, ou à leurs représentants légaux tel que défini dans les **Plans de la LACC**, ainsi qu'au liquidateur de la succession de la personne pour laquelle est présentée une réclamation le **NAM** de la personne ayant reçu le diagnostic;

[12] **AUTORISE** les **Parties autorisées** à communiquer les **Confirmations officielles** qu'elles ont reçues ainsi que de tout renseignement s'y rapportant qui est extrait des listes 1, 2, 3 et 4, à l'**Administrateur des réclamations** en Ontario

une fois que le réclamant a fourni son consentement à la transmission de ces renseignements à l'Administrateur des réclamations;

[13] **ORDONNE** aux Parties autorisées et à l'Administrateur des réclamations d'utiliser les renseignements contenus dans les listes 1, 2, 3 et 4 et les **Confirmations officielles** conformément aux pouvoirs, droits et obligations tels qu'énoncés dans les Plans de la LACC, le Plan d'administration du Québec, le Plan d'administrations des PCC, les ordonnances d'homologation du 6 mars 2025 et toute autre ordonnance qui sera rendue à l'égard de ces documents;

[14] **ORDONNE** aux **Parties autorisées** de traiter les listes 1, 2, 3 et 4 de manière strictement confidentielle, de prendre les mesures nécessaires pour assurer cette confidentialité de même que la protection des renseignements contenus à ces listes et aux **Confirmations officielles** afin qu'ils ne soient utilisés qu'aux fins de faire valoir une réclamation aux termes du **Plan d'administration du Québec** ou du **Plan d'administration des PCC**;

[15] **ORDONNE** aux **Parties autorisées** de transmettre au MSSS et à la RAMQ, avant la communication des listes 1, 2, 3 et 4 un engagement de confidentialité complété par toute personne à qui les renseignements peuvent être communiqués ou qui peut les utiliser pour l'exécution de la présente ordonnance;

[16] **ORDONNE** aux **Parties autorisées** de ne pas communiquer ou héberger les renseignements contenus aux listes 1, 2, 3 et 4 à l'extérieur du Québec, sauf aux fins de la transmission des **Confirmations officielles** à l'**Administrateur des réclamations** en Ontario;

[17] **ORDONNE** aux **Parties autorisées** d'aviser sans retard le responsable de la protection des renseignements du MSSS ou de la RAMQ de toute violation ou tentative de violation par toute personne de l'une des obligations relatives à la protection des renseignements contenus aux listes 1, 2, 3 et 4 ou aux **Confirmations officielles** qui sont prévues par la présente ordonnance et de permettre au MSSS ou à la RAMQ d'effectuer toute vérification ou toute enquête relative à la protection des renseignements communiqués conformément à la présente ordonnance; et

[18] **ORDONNE** aux **Parties autorisées** de ne pas conserver les renseignements contenus aux listes 1, 2, 3 et 4 ou aux **Confirmations officielles** et de les détruire de façon sécuritaire de même que toute copie de ces renseignements trois ans suivant le terme du processus de distribution prévu au **Plan d'administration du Québec** inclus dans les **Plans de la LACC**;

500-06-000076-980

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[19] **ORDONNE** que l'Administrateur des réclamations soit assujetti aux obligations de confidentialité prévues aux paragraphes 14 à 18 des présentes, à l'égard des **Confirmations officielles** qu'il reçoit ainsi que de tout renseignement s'y rapportant qui est extrait des listes 1, 2, 3 et 4.

[20] **LE TOUT** sans frais.



CATHERINE PICHÉ, J.C.S.

C

This is Exhibit “C” referred to in the Affidavit of Michael O’Connor, sworn before me this 22nd day of August, 2025.

Sarah Stothart

A Commissioner for Taking Affidavits, etc.



[Month Day, Year]

Notice of Incomplete Claim

<<PCC Claimant or Representative Name>>

<<PCC Claimant Address or Representative Address Line 1>>

<<City/Town, Province, Postal Code, Country>> Dear <<PCC

Claimant or Representative Name>>:

Re: <<Claim Number [Customized Claim Number]>>

The Claims Administrator received your Claim Package. However, your Claim Package is incomplete as submitted for the following reason(s) <<insert custom incomplete claim reasons below>>:

[sample incomplete claim reasons]

- [You did not complete Part <<Part Number and Name>> of the PCC Compensation Plan Claim Form];
- [You did not provide <<your/Tobacco-Victim's Name>> Health Insurance Card Number];
- [You did not provide complete [Proof of Succession or Representative Proof of Authority] documentation];
- [You did not provide <<your/the Tobacco-Victim's>> diagnosis of disease(s)];
- [Your Claim Form is unsigned].

You must provide the documentation detailed above **no later than <<Claim Deadline Month Day, Year/60 days from the date of this Notice of Incomplete Claim>>**.

If your Claim Package is not completed by the deadline provided above, your claim will be rejected without further notice.

You may complete your Claim by submitting this supplementation documentation to the Claims Administrator by any of the following ways:

- **Online** at www.TobaccoClaimsCanada.ca
- **Email** to info@TobaccoClaimsCanada.ca
- **Registered Mail** sent to the following address (postmarked by the deadline provided above):

Tobacco Claims Canada Claims
Administrator
P.O. Box 2958 STN B
Ottawa ON K1P 5W9

- **Fax** to 1-866-262-0816

If you have any questions, please contact the Claims Administrator by telephone toll-free (in Canada) at 1-888-482-5852, by email at info@TobaccoClaimsCanada.ca, or visit the Claims Administrator's website at www.TobaccoClaimsCanada.ca.

Sincerely,
Claims Administrator

D

This is Exhibit “D” referred to in the Affidavit of Michael O’Connor, sworn before me this 22nd day of August, 2025.

Sarah Stothart

A Commissioner for Taking Affidavits, etc.

[Month Day, Year]

Notice to Provide Alternative Proof

<<PCC Claimant or Representative Name>>

<<PCC Claimant Address or Representative Address Line 1>>

<<City/Town, Province, Postal Code, Country>>

Re: <<Claim Number [Customized Claim Number]>>

Dear <<PCC Claimant or Representative Name>>:

You are receiving this Notice to Provide Alternative Proof regarding <<your/Tobacco-Victim name>> diagnosis of lung cancer, throat cancer, and/or emphysema or COPD (GOLD Grade III or IV) in connection with the claim referenced above.

The Claims Administrator did not receive the required Proof of Diagnosis from the Quebec Cancer Registry or MED-ÉCHO or has received the Proof of Diagnosis but it does not meet the required criteria.

To avoid your claim being rejected, you must submit one of the following documents as Alternative Proof to confirm the tobacco-related diagnosis stated in your Claim Form, including the date of that diagnosis, within one hundred and twenty (120) days from the date of this Notice.

You must provide the Claims Administrator with **at least one** of the following documents to support <<your/Tobacco-Victim name>> diagnosis as indicated in the Claim Form submitted.

Primary Documents:

- For Lung Cancer or Throat Cancer - A copy of a pathology report confirming the diagnosis.
- For Emphysema or COPD (GOLD Grade III or IV) - A copy of a report of a spirometry test (performed between March 8, 2015 and March 8, 2019) that first demonstrated a FEV1 (non-reversible) of less than 50% of the predicted value to first establish a diagnosis of Emphysema or COPD (GOLD Grade III or IV).

If you are unable to provide one of the above documents, you may instead submit one of the following alternatives:

- A copy of an extract from the Tobacco-Victim's medical file; or
- A completed Physician Form; or
- A written statement from a Physician (of the Tobacco-Victim, or another physician having access to the medical record), along with at least one of the following records:

- o For Lung Cancer or Throat Cancer: pathology report; operative report; biopsy report; MRI report; CT scan report; PET scan report; x-ray report; and/or sputum cytology report; or
- o For Emphysema or COPD (GOLD Grade III or IV): spirometry report or CT scan.

Alternative Proof must be sent to the Claims Administrator **no later than 120 days from the date of this Notice** in any of the following ways:

- **Online** through the Claims Administrator's website at www.TobaccoClaimsCanada.ca;
- **By email** to info@TobaccoClaimsCanada.ca;
- **By fax** to 1-866-262-0816; or
- **By registered mail** to the following address:

Tobacco Claims Canada Claims
Administrator
P.O. Box 2958 STN B
Ottawa ON K1P 5W9

You cannot submit the required Alternative Proof by hand delivery or by regular mail and you must keep a record of transmission of the Alternative Proof to the Claims Administrator.

To obtain the required Alternative Proof, we strongly recommend promptly contacting the Physician or requesting <<your/Tobacco-Victim name>> medical files. Instructions are usually available on the medical institution's website or by calling their medical records department.

If you do not submit any Alternative Proof to the Claims Administrator within 120 days after the date of this Notice, your claim will be rejected without further notice.

If you timely submit Alternative Proof, the Claims Administrator will consider this Alternative Proof when making a final determination on your claim. If any further information is required following your submission, you will be contacted by the Claims Administrator.

If you have questions in respect of this Notice or the claims process, please consult the Claims Administrator's website at www.TobaccoClaimsCanada.ca or contact the Claims Administrators by phone at 1-888-482-5852 or by email to info@TobaccoClaimsCanada.ca.

For assistance preparing your Alternative Proof submission, please contact the PCC Agent by phone at 1-888-482-5852 or by email at PCCAgent@TobaccoClaimsCanada.ca.

Sincerely,

Claims Administrator

E

This is Exhibit “E” referred to in the Affidavit of Michael O’Connor, sworn before me this 22nd day of August, 2025.

Sarah Stothart

A Commissioner for Taking Affidavits, etc.

View 1: Projected Costs by Court Appointment, Category and Year

Epiq Class Action Services Canada

August 22, 2025



Year 1 commences on the first day of the calendar month following the Plan Implementation Date and is comprised of the succeeding 12 calendar months.

Court Appointment/ Category	Pre-Implementation	Y1	Y2	Y3	Y4	Total
PCC Notice Plan						
Paid Media Noticing	\$ -	\$ 3,094,764	\$ 2,078,457	\$ -	\$ -	\$ 5,173,221
Print & Mail Operations	\$ -	\$ 110,080	\$ 66,725	\$ -	\$ -	\$ 176,805
Project & Escalation Mgmt/ Noticing	\$ 167,482	\$ 296,869	\$ 147,751	\$ -	\$ -	\$ 612,102
Technology Management	\$ -	\$ 10,692	\$ 10,692	\$ -	\$ -	\$ 21,384
Contact Centre	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Claims Operations	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Initial & Recurring Items	\$ -	\$ 5,816	\$ 1,056	\$ -	\$ -	\$ 6,872
Other	\$ 2,500	\$ 81,724	\$ 74,224	\$ -	\$ -	\$ 158,448
<i>Subtotal</i>	\$ 169,982	\$ 3,599,946	\$ 2,378,905	\$ -	\$ -	\$ 6,148,832
QCAP Notice Plan						
Paid Media Noticing	\$ -	\$ 406,528	\$ -	\$ -	\$ -	\$ 406,528
Print & Mail Operations	\$ -	\$ 148,145	\$ -	\$ -	\$ -	\$ 148,145
Project & Escalation Mgmt/ Noticing	\$ 191,581	\$ 234,155	\$ -	\$ -	\$ -	\$ 425,736
Technology Management	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Contact Centre	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Claims Operations	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Initial & Recurring Items	\$ -	\$ 7,920	\$ -	\$ -	\$ -	\$ 7,920
Other	\$ 10,000	\$ 131,962	\$ -	\$ -	\$ -	\$ 141,962
<i>Subtotal</i>	\$ 201,581	\$ 928,710	\$ -	\$ -	\$ -	\$ 1,130,291
PCC Agent						
Paid Media Noticing	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Print & Mail Operations	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Project & Escalation Mgmt/ Noticing	\$ 352,055	\$ 4,223,258	\$ 8,422,074	\$ 1,695,379	\$ 81,701	\$ 14,774,468
Technology Management	\$ 354,449	\$ 1,120,544	\$ 613,686	\$ 171,654	\$ 10,178	\$ 2,270,511
Contact Centre	\$ 351,213	\$ 7,200,009	\$ 5,428,270	\$ 607,331	\$ -	\$ 13,586,823
Claims Operations	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Initial & Recurring Items	\$ -	\$ 6,000	\$ -	\$ -	\$ -	\$ 6,000
Other	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
<i>Subtotal</i>	\$ 1,057,716	\$ 12,549,811	\$ 14,464,031	\$ 2,474,363	\$ 91,879	\$ 30,637,801
PCC Claim Administration Estimated Claims: 74,401						
Paid Media Noticing	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Print & Mail Operations	\$ -	\$ 175,832	\$ 223,652	\$ 281,732	\$ 11,441	\$ 692,657
Project & Escalation Mgmt/ Noticing	\$ 1,217,331	\$ 4,001,920	\$ 6,525,099	\$ 4,440,393	\$ 1,325,557	\$ 17,510,300
Technology Management	\$ 1,476,131	\$ 1,789,243	\$ 1,145,387	\$ 478,424	\$ 47,276	\$ 4,936,461
Contact Centre	\$ 56,931	\$ 545,012	\$ 458,623	\$ 1,777,166	\$ 114,656	\$ 2,952,388
Claims Operations	\$ 30,950	\$ 1,300,024	\$ 3,434,623	\$ 606,418	\$ -	\$ 5,372,015
Initial & Recurring Items	\$ -	\$ 30,986	\$ 9,676	\$ 10,732	\$ 5,056	\$ 56,450
Other	\$ 1,925	\$ -	\$ -	\$ 70,554	\$ 264	\$ 72,743
<i>Subtotal</i>	\$ 2,783,268	\$ 7,843,018	\$ 11,797,060	\$ 7,665,419	\$ 1,504,250	\$ 31,593,014
QCAP Claim Administration Estimated Claims: 69,970						
Paid Media Noticing	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Print & Mail Operations	\$ -	\$ 256,966	\$ 250,628	\$ 47,463	\$ -	\$ 555,057
Project & Escalation Mgmt/ Noticing	\$ 793,594	\$ 6,517,638	\$ 3,069,012	\$ 48,126	\$ -	\$ 10,428,369
Technology Management	\$ 1,065,309	\$ 1,844,519	\$ 698,447	\$ 30,403	\$ 7,000	\$ 3,645,678
Contact Centre	\$ 30,130	\$ 424,794	\$ 697,551	\$ 30,328	\$ -	\$ 1,182,803
Claims Operations	\$ 288,626	\$ 6,085,817	\$ 53,741	\$ -	\$ -	\$ 6,428,183
Initial & Recurring Items	\$ -	\$ 33,626	\$ 9,676	\$ 9,676	\$ 5,056	\$ 58,034
Other	\$ 10,000	\$ 28,075	\$ 75,436	\$ 20,145	\$ -	\$ 133,656
<i>Subtotal</i>	\$ 2,187,658	\$ 15,191,435	\$ 4,854,489	\$ 186,142	\$ 12,056	\$ 22,431,780
Total	\$ 6,400,205	\$ 40,112,920	\$ 33,494,485	\$ 10,325,924	\$ 1,608,185	\$ 91,941,719

Amounts provided exclude any applicable sales or other taxes.

CCAA TOBACCO GLOBAL CLAIM ADMINISTRATION COSTS FRAMEWORK

372

View 2: Projected Costs by Category, CLIN and Year

Epiq Class Action Services Canada

August 22, 2025



Year 1 commences on the first day of the calendar month following the Plan Implementation Date and is comprised of the succeeding 12 calendar months.

Contract Line Item (CLIN)	Pre-Implementation	Y1	Y2	Y3	Y4	Total
Paid Media Noticing	\$ -	\$ 3,501,292	\$ 2,078,457	\$ -	\$ -	\$ 5,579,749
Print & Mail Operations						
Mailing Coordinator	\$ -	\$ 452,625	\$ 328,250	\$ 117,181	\$ 2,069	\$ 900,125
Account Mgmt & Reconciliation	\$ -	\$ -	\$ 37,500	\$ 45,000	\$ 7,500	\$ 90,000
Print 1-image Cheque with Stub	\$ -	\$ -	\$ 99,894	\$ 147,340	\$ 350	\$ 247,584
Print/Mail PCC or QCAP Int Ntc/CL Pkt	\$ -	\$ 2,010	\$ -	\$ -	\$ -	\$ 2,010
Requested Fulfillment Notice	\$ -	\$ 172,900	\$ -	\$ -	\$ -	\$ 172,900
Reminder Fulfillment Notice	\$ -	\$ 56,140	\$ 60,150	\$ -	\$ -	\$ 116,290
Record Undeliverable Mail	\$ -	\$ -	\$ 821	\$ 1,186	\$ 50	\$ 2,057
Email & Record Undeliverable Email	\$ -	\$ 5,800	\$ 200	\$ -	\$ -	\$ 6,000
Photocopy or Image	\$ -	\$ -	\$ 6,375	\$ 10,525	\$ 100	\$ 17,000
Box Storage	\$ -	\$ 1,548	\$ 3,765	\$ 3,003	\$ 462	\$ 8,778
Stop Payment Fee	\$ -	\$ -	\$ 750	\$ 1,000	\$ 250	\$ 2,000
Bank Fees - Account	\$ -	\$ -	\$ 3,300	\$ 3,960	\$ 660	\$ 7,920
Subtotal	\$ -	\$ 691,023	\$ 541,005	\$ 329,195	\$ 11,441	\$ 1,572,664
Project & Escalation Mgmt/ Noticing						
Project Coordinator	\$ 377,120	\$ 6,051,529	\$ 7,576,171	\$ 2,079,707	\$ 418,047	\$ 16,502,576
Proj Specialist/Proj Attorney	\$ 169,154	\$ 2,903,694	\$ 4,392,745	\$ 1,621,357	\$ 59,558	\$ 9,146,507
Project Manager	\$ 532,724	\$ 2,373,847	\$ 2,637,729	\$ 948,132	\$ 261,785	\$ 6,754,217
Graphic Design/ Planner	\$ 43,559	\$ 66,394	\$ 21,087	\$ -	\$ -	\$ 131,040
Program Mgr/ Noticing Mgr	\$ 164,054	\$ 827,569	\$ 841,951	\$ 307,598	\$ 139,418	\$ 2,280,590
Client Services Mgr/Notice Dir	\$ 289,554	\$ 884,082	\$ 890,540	\$ 575,945	\$ 506,135	\$ 3,146,255
Managing Director/Executive	\$ 1,145,878	\$ 2,033,725	\$ 1,800,713	\$ 649,408	\$ 22,066	\$ 5,651,789
Docusign Usage Fee	\$ -	\$ 130,001	\$ -	\$ -	\$ -	\$ 130,001
Dedicated Monthly Fax I&R Fee	\$ -	\$ 1,200	\$ 1,200	\$ 700	\$ 100	\$ 3,200
Dedicated Monthly Email I&R Fee	\$ -	\$ 1,800	\$ 1,800	\$ 1,050	\$ 150	\$ 4,800
Subtotal	\$ 2,722,042	\$ 15,273,841	\$ 18,163,936	\$ 6,183,898	\$ 1,407,259	\$ 43,750,975
Technology Management						
Data Analyst and Reporting	\$ 148,009	\$ 1,708,827	\$ 799,865	\$ 110,555	\$ 39,461	\$ 2,806,718
Software Engineer/SQL Developer	\$ 2,450,078	\$ 2,337,457	\$ 1,395,482	\$ 471,434	\$ 848	\$ 6,655,299
Solutions Architect	\$ 25,527	\$ 147,391	\$ -	\$ -	\$ -	\$ 172,918
Product/ Design Manager	\$ 53,460	\$ 114,085	\$ 5,940	\$ -	\$ -	\$ 173,485
Technology Mgr/Sr Software Eng	\$ 218,815	\$ 439,347	\$ 249,033	\$ 78,600	\$ 4,545	\$ 990,339
Website Hosting	\$ -	\$ 3,564	\$ 3,564	\$ 3,564	\$ -	\$ 10,692
Facilitator Monthly Support	\$ -	\$ 7,200	\$ 7,200	\$ 4,200	\$ 600	\$ 19,200
Dashboard Monthly Support	\$ -	\$ 7,128	\$ 7,128	\$ 7,128	\$ -	\$ 21,384
Data Storage Retention	\$ -	\$ -	\$ -	\$ 5,000	\$ 19,000	\$ 24,000
Subtotal	\$ 2,895,889	\$ 4,764,998	\$ 2,468,211	\$ 680,482	\$ 64,454	\$ 10,874,034
Contact Centre						
Contact Centre Agent	\$ 154,275	\$ 3,505,950	\$ 2,800,350	\$ 959,175	\$ 44,100	\$ 7,463,850
Contact Centre QA/Lead/Train	\$ 138,297	\$ 3,091,981	\$ 2,496,321	\$ 904,812	\$ 42,817	\$ 6,674,227
Contact Centre Help Desk	\$ 42,562	\$ 442,724	\$ 386,251	\$ 248,671	\$ 14,043	\$ 1,134,251
Contact Centre Supervisor	\$ 59,637	\$ 611,855	\$ 488,376	\$ 161,004	\$ 7,273	\$ 1,328,144
Contact Centre Manager	\$ 43,206	\$ 444,483	\$ 359,176	\$ 122,116	\$ 5,629	\$ 974,609
IVR Maintenance Fee	\$ 297	\$ 3,564	\$ 3,564	\$ 1,782	\$ -	\$ 9,207
IVR Minutes of Use	\$ -	\$ 69,259	\$ 50,406	\$ 17,265	\$ 794	\$ 137,724
Subtotal	\$ 438,274	\$ 8,169,816	\$ 6,584,444	\$ 2,414,825	\$ 114,656	\$ 17,722,014
Claims Operations Services						
Data Entry/ Clerical	\$ 7,535	\$ 77,517	\$ 47,269	\$ 9,504	\$ -	\$ 141,825
Claims Review	\$ 204,642	\$ 5,577,759	\$ 2,277,858	\$ 418,476	\$ -	\$ 8,478,734
Claims Lead/ QA	\$ 53,128	\$ 538,469	\$ 372,685	\$ 53,686	\$ -	\$ 1,017,968
Claims Supervisor	\$ 54,272	\$ 277,924	\$ 215,093	\$ 19,848	\$ -	\$ 567,138
Paper/Email/Fax Claims Doc Intake	\$ -	\$ 20,730	\$ 13,000	\$ 2,370	\$ -	\$ 36,100
Paper/Email/Fax Misc Doc Intake	\$ -	\$ 78,488	\$ 50,888	\$ 9,312	\$ -	\$ 138,688
Acknowledgement or Claim Notif.	\$ -	\$ 741,508	\$ 464,970	\$ 84,716	\$ -	\$ 1,291,194
Online Claim Document Intake	\$ -	\$ 33,923	\$ 21,398	\$ 3,902	\$ -	\$ 59,224
Scanning and Image Storage	\$ -	\$ 39,524	\$ 25,202	\$ 4,602	\$ -	\$ 69,328
Subtotal	\$ 319,576	\$ 7,385,841	\$ 3,488,363	\$ 606,418	\$ -	\$ 11,800,198
Initial & Recurring Items						
Import and Standardize Data	\$ -	\$ 2,640	\$ -	\$ -	\$ -	\$ 2,640
Form Set-up	\$ -	\$ 48,840	\$ -	\$ -	\$ -	\$ 48,840
IVR Configuration and Recording	\$ -	\$ 6,000	\$ -	\$ -	\$ -	\$ 6,000
Activation Fee for Fax & Inbox	\$ -	\$ 500	\$ -	\$ -	\$ -	\$ 500
Post Office Box - Dedicated	\$ -	\$ 3,168	\$ 3,168	\$ 3,168	\$ 2,112	\$ 11,616
Email Form or Notice Setup	\$ -	\$ 23,200	\$ -	\$ -	\$ -	\$ 23,200
Settlement Fund Tax Filing	\$ -	\$ -	\$ 8,000	\$ 8,000	\$ 8,000	\$ 24,000
Escrow Management Fee	\$ -	\$ -	\$ 9,240	\$ 9,240	\$ -	\$ 18,480
Subtotal	\$ -	\$ 84,348	\$ 20,408	\$ 20,408	\$ 10,112	\$ 135,276
Other						
Reimbursed Travel Expenses	\$ 1,925	\$ 18,075	\$ 15,000	\$ -	\$ -	\$ 35,000
Translation	\$ 22,500	\$ 27,500	\$ -	\$ -	\$ -	\$ 50,000
Postage	\$ -	\$ 196,186	\$ 133,910	\$ 89,499	\$ 214	\$ 419,809
Delivery	\$ -	\$ -	\$ 750	\$ 1,200	\$ 50	\$ 2,000
Subtotal	\$ 24,425	\$ 241,761	\$ 149,660	\$ 90,699	\$ 264	\$ 506,809
Total	\$ 6,400,205	\$ 40,112,920	\$ 33,494,485	\$ 10,325,924	\$ 1,608,185	\$ 91,941,719

Amounts provided exclude any applicable sales or other taxes.

CCAA TOBACCO GLOBAL CLAIM ADMINISTRATION COSTS FRAMEWORK

373

View 3: Projected Costs by Category, CLIN and Court Appointment

Epiq Class Action Services Canada

August 22, 2025



Contract Line Item (CLIN)	PCC Notice Plan	QCAP Notice Plan	PCC Agent	PCC Claim Administration	QCAP Claim Administration	Total
Paid Media Noticing	\$ 5,173,221	\$ 406,528	\$ -	\$ -	\$ -	\$ 5,579,749
Print & Mail Operations						
Mailing Coordinator	\$ 12,750	\$ 15,000	\$ -	\$ 512,375	\$ 360,000	\$ 900,125
Account Mgmt & Reconciliation	\$ -	\$ -	\$ -	\$ 45,000	\$ 45,000	\$ 90,000
Print 1-image Cheque with Stub	\$ -	\$ -	\$ -	\$ 114,392	\$ 133,192	\$ 247,584
Print/Mail PCC or QCAP Int Ntc/CI Pkt	\$ 1,005	\$ 1,005	\$ -	\$ -	\$ -	\$ 2,010
Requested Fulfillment Notice	\$ 96,900	\$ 76,000	\$ -	\$ -	\$ -	\$ 172,900
Reminder Fulfillment Notice	\$ 60,150	\$ 56,140	\$ -	\$ -	\$ -	\$ 116,290
Record Undeliverable Mail	\$ -	\$ -	\$ -	\$ 962	\$ 1,095	\$ 2,057
Email & Record Undeliverable Email	\$ 6,000	\$ -	\$ -	\$ -	\$ -	\$ 6,000
Photocopy or Image	\$ -	\$ -	\$ -	\$ 8,500	\$ 8,500	\$ 17,000
Box Storage	\$ -	\$ -	\$ -	\$ 6,468	\$ 2,310	\$ 8,778
Stop Payment Fee	\$ -	\$ -	\$ -	\$ 1,000	\$ 1,000	\$ 2,000
Bank Fees - Account	\$ -	\$ -	\$ -	\$ 3,960	\$ 3,960	\$ 7,920
Subtotal	\$ 176,805	\$ 148,145	\$ -	\$ 692,657	\$ 555,057	\$ 1,572,664
Project & Escalation Mgmt/ Noticing						
Project Coordinator	\$ 61,200	\$ 67,500	\$ 8,276,804	\$ 4,204,139	\$ 3,892,932	\$ 16,502,576
Proj Specialist/Proj Attorney	\$ 33,600	\$ 16,800	\$ 3,492,132	\$ 4,540,561	\$ 1,063,414	\$ 9,146,507
Project Manager	\$ 83,640	\$ 62,730	\$ 1,675,613	\$ 3,098,519	\$ 1,833,715	\$ 6,754,217
Graphic Design/ Planner	\$ 87,360	\$ 43,680	\$ -	\$ -	\$ -	\$ 131,040
Program Mgr/ Noticing Mgr	\$ 135,432	\$ 67,716	\$ 420,890	\$ 1,053,303	\$ 603,249	\$ 2,280,590
Client Services Mgr/Notice Dir	\$ 87,120	\$ 43,560	\$ 223,608	\$ 1,918,733	\$ 873,234	\$ 3,146,255
Managing Director/Executive	\$ 123,750	\$ 123,750	\$ 685,420	\$ 2,690,296	\$ 2,028,574	\$ 5,651,789
DocuSign Usage Fee	\$ -	\$ -	\$ -	\$ -	\$ 130,001	\$ 130,001
Dedicated Monthly Fax I&R Fee	\$ -	\$ -	\$ -	\$ 1,900	\$ 1,300	\$ 3,200
Dedicated Monthly Email I&R Fee	\$ -	\$ -	\$ -	\$ 2,850	\$ 1,950	\$ 4,800
Subtotal	\$ 612,102	\$ 425,736	\$ 14,774,468	\$ 17,510,300	\$ 10,428,369	\$ 43,750,975
Technology Management						
Data Analyst and Reporting	\$ -	\$ -	\$ 507,530	\$ 1,398,859	\$ 900,329	\$ 2,806,718
Software Engineer/SQL Developer	\$ -	\$ -	\$ 1,339,942	\$ 2,992,260	\$ 2,323,097	\$ 6,655,299
Solutions Architect	\$ -	\$ -	\$ 46,671	\$ 68,334	\$ 57,913	\$ 172,918
Product/ Design Manager	\$ -	\$ -	\$ 47,128	\$ 66,939	\$ 59,418	\$ 173,485
Technology Mgr/Sr Software Eng	\$ -	\$ -	\$ 329,241	\$ 375,977	\$ 285,121	\$ 990,339
Website Hosting	\$ 7,128	\$ -	\$ -	\$ 3,564	\$ -	\$ 10,692
Facilitator Monthly Support	\$ -	\$ -	\$ -	\$ 11,400	\$ 7,800	\$ 19,200
Dashboard Monthly Support	\$ 14,256	\$ -	\$ -	\$ 7,128	\$ -	\$ 21,384
Data Storage Retention	\$ -	\$ -	\$ -	\$ 12,000	\$ 12,000	\$ 24,000
Subtotal	\$ 21,384	\$ -	\$ 2,270,511	\$ 4,936,461	\$ 3,645,678	\$ 10,874,034
Contact Centre						
Contact Centre Agent	\$ -	\$ -	\$ 5,898,300	\$ 1,135,575	\$ 429,975	\$ 7,463,850
Contact Centre QA/Lead/Train	\$ -	\$ -	\$ 5,114,138	\$ 1,102,533	\$ 457,557	\$ 6,674,227
Contact Centre Help Desk	\$ -	\$ -	\$ 627,101	\$ 361,620	\$ 145,530	\$ 1,134,251
Contact Centre Supervisor	\$ -	\$ -	\$ 1,066,337	\$ 187,278	\$ 74,529	\$ 1,328,144
Contact Centre Manager	\$ -	\$ -	\$ 762,194	\$ 144,942	\$ 67,473	\$ 974,609
IVR Maintenance Fee	\$ -	\$ -	\$ 9,207	\$ -	\$ -	\$ 9,207
IVR Minutes of Use	\$ -	\$ -	\$ 109,544	\$ 20,440	\$ 7,740	\$ 137,724
Subtotal	\$ -	\$ -	\$ 13,586,823	\$ 2,952,388	\$ 1,182,803	\$ 17,722,014
Claims Operations Services						
Data Entry/ Clerical	\$ -	\$ -	\$ -	\$ 74,625	\$ 67,200	\$ 141,825
Claims Review	\$ -	\$ -	\$ -	\$ 3,571,302	\$ 4,907,432	\$ 8,478,734
Claims Lead/ QA	\$ -	\$ -	\$ -	\$ 575,868	\$ 442,100	\$ 1,017,968
Claims Supervisor	\$ -	\$ -	\$ -	\$ 326,573	\$ 240,565	\$ 567,138
Paper/Email/Fax Claims Doc Intake	\$ -	\$ -	\$ -	\$ 18,600	\$ 17,500	\$ 36,100
Paper/Email/Fax Misc Doc Intake	\$ -	\$ -	\$ -	\$ 73,112	\$ 65,576	\$ 138,688
Acknowledgement or Claim Notif.	\$ -	\$ -	\$ -	\$ 665,166	\$ 626,028	\$ 1,291,194
Online Claim Document Intake	\$ -	\$ -	\$ -	\$ 30,636	\$ 28,588	\$ 59,224
Scanning and Image Storage	\$ -	\$ -	\$ -	\$ 36,134	\$ 33,194	\$ 69,328
Subtotal	\$ -	\$ -	\$ -	\$ 5,372,015	\$ 6,428,183	\$ 11,800,198
Initial & Recurring Items						
Import and Standardize Data	\$ -	\$ -	\$ -	\$ -	\$ 2,640	\$ 2,640
Form Set-up	\$ 3,960	\$ 7,920	\$ -	\$ 18,480	\$ 18,480	\$ 48,840
IVR Configuration and Recording	\$ -	\$ -	\$ 6,000	\$ -	\$ -	\$ 6,000
Activation Fee for Fax & Inbox	\$ -	\$ -	\$ -	\$ 250	\$ 250	\$ 500
Post Office Box - Dedicated	\$ 2,112	\$ -	\$ -	\$ 5,280	\$ 4,224	\$ 11,616
Email Form or Notice Setup	\$ 800	\$ -	\$ -	\$ 11,200	\$ 11,200	\$ 23,200
Settlement Fund Tax Filing	\$ -	\$ -	\$ -	\$ 12,000	\$ 12,000	\$ 24,000
Escrow Management Fee	\$ -	\$ -	\$ -	\$ 9,240	\$ 9,240	\$ 18,480
Subtotal	\$ 6,872	\$ 7,920	\$ 6,000	\$ 56,450	\$ 58,034	\$ 135,276
Other						
Reimbursed Travel Expenses	\$ -	\$ -	\$ -	\$ 1,925	\$ 33,075	\$ 35,000
Translation	\$ 10,000	\$ 20,000	\$ -	\$ -	\$ 20,000	\$ 50,000
Postage	\$ 148,448	\$ 121,962	\$ -	\$ 69,818	\$ 79,581	\$ 419,809
Delivery	\$ -	\$ -	\$ -	\$ 1,000	\$ 1,000	\$ 2,000
Subtotal	\$ 158,448	\$ 141,962	\$ -	\$ 72,743	\$ 133,656	\$ 506,809
Total	\$ 6,148,832	\$ 1,130,291	\$ 30,637,801	\$ 31,593,014	\$ 22,431,780	\$ 91,941,719

Amounts provided exclude any applicable sales or other taxes.

Pre-Implementation Detail: PCC Notice Plan

Epiq Class Action Services Canada

August 22, 2025

	To July 31, 2025 Invoiced	August 1-15, 2025 Actual	August 16-31, 2025 Estimated	August 2025 Subtotal	Total
Paid Media Noticing	\$ -	\$ -	\$ -	\$ -	\$ -
Print & Mail Operations					
Mailing Coordinator	\$ -	\$ -	\$ -	\$ -	\$ -
Account Mgmt & Reconciliation	\$ -	\$ -	\$ -	\$ -	\$ -
Print 1-image Cheque with Stub	\$ -	\$ -	\$ -	\$ -	\$ -
Print/Mail PCC or QCAP Int Ntc/CI Pkt	\$ -	\$ -	\$ -	\$ -	\$ -
Requested Fulfillment Notice	\$ -	\$ -	\$ -	\$ -	\$ -
Reminder Fulfillment Notice	\$ -	\$ -	\$ -	\$ -	\$ -
Record Undeliverable Mail	\$ -	\$ -	\$ -	\$ -	\$ -
Email & Record Undeliverable Email	\$ -	\$ -	\$ -	\$ -	\$ -
Photocopy or Image	\$ -	\$ -	\$ -	\$ -	\$ -
Box Storage	\$ -	\$ -	\$ -	\$ -	\$ -
Stop Payment Fee	\$ -	\$ -	\$ -	\$ -	\$ -
Bank Fees - Account	\$ -	\$ -	\$ -	\$ -	\$ -
<i>Subtotal</i>	\$ -	\$ -	\$ -	\$ -	\$ -
Project & Escalation Mgmt/ Noticing					
Project Coordinator	\$ -	\$ 135	\$ 585	\$ 720	\$ 720
Proj Specialist/Proj Attorney	\$ -	\$ -	\$ -	\$ -	\$ -
Project Manager	\$ 1,190	\$ 765	\$ 731	\$ 1,496	\$ 2,686
Graphic Design/ Planner	\$ -	\$ 104	\$ 11,848	\$ 11,952	\$ 11,952
Program Mgr/ Noticing Mgr	\$ 386	\$ 564	\$ (178)	\$ 386	\$ 772
Client Services Mgr/Notice Dir	\$ -	\$ -	\$ 182	\$ 182	\$ 182
Managing Director/Executive	\$ 2,970	\$ 149	\$ 162,113	\$ 162,261	\$ 165,231
Docusign Usage Fee	\$ -	\$ -	\$ -	\$ -	\$ -
Dedicated Monthly Fax I&R Fee	\$ -	\$ -	\$ -	\$ -	\$ -
Dedicated Monthly Email I&R Fee	\$ -	\$ -	\$ -	\$ -	\$ -
<i>Subtotal</i>	\$ 4,546	\$ 1,717	\$ 175,279	\$ 176,996	\$ 181,542
Technology Management					
Data Analyst and Reporting	\$ -	\$ -	\$ -	\$ -	\$ -
Software Engineer/SQL Developer	\$ -	\$ -	\$ -	\$ -	\$ -
Solutions Architect	\$ -	\$ -	\$ -	\$ -	\$ -
Product/ Design Manager	\$ -	\$ -	\$ -	\$ -	\$ -
Technology Mgr/Sr Software Eng	\$ -	\$ -	\$ -	\$ -	\$ -
Website Hosting	\$ -	\$ -	\$ -	\$ -	\$ -
Facilitator Monthly Support	\$ -	\$ -	\$ -	\$ -	\$ -
Dashboard Monthly Support	\$ -	\$ -	\$ -	\$ -	\$ -
Data Storage Retention	\$ -	\$ -	\$ -	\$ -	\$ -
<i>Subtotal</i>	\$ -	\$ -	\$ -	\$ -	\$ -
Contact Centre					
Contact Centre Agent	\$ -	\$ -	\$ -	\$ -	\$ -
Contact Centre QA/Lead/Train	\$ -	\$ -	\$ -	\$ -	\$ -
Contact Centre Help Desk	\$ -	\$ -	\$ -	\$ -	\$ -
Contact Centre Supervisor	\$ -	\$ -	\$ -	\$ -	\$ -
Contact Centre Manager	\$ -	\$ -	\$ -	\$ -	\$ -
IVR Maintenance Fee	\$ -	\$ -	\$ -	\$ -	\$ -
IVR Minutes of Use	\$ -	\$ -	\$ -	\$ -	\$ -
<i>Subtotal</i>	\$ -	\$ -	\$ -	\$ -	\$ -
Claims Operations Services					
Data Entry/ Clerical	\$ -	\$ -	\$ -	\$ -	\$ -
Claims Review	\$ -	\$ -	\$ -	\$ -	\$ -
Claims Lead/ QA	\$ -	\$ -	\$ -	\$ -	\$ -
Claims Supervisor	\$ -	\$ -	\$ -	\$ -	\$ -
Paper/Email/Fax Claims Doc Intake	\$ -	\$ -	\$ -	\$ -	\$ -
Paper/Email/Fax Misc Doc Intake	\$ -	\$ -	\$ -	\$ -	\$ -
Acknowledgement or Claim Notif.	\$ -	\$ -	\$ -	\$ -	\$ -
Online Claim Document Intake	\$ -	\$ -	\$ -	\$ -	\$ -
Scanning and Image Storage	\$ -	\$ -	\$ -	\$ -	\$ -
<i>Subtotal</i>	\$ -	\$ -	\$ -	\$ -	\$ -
Initial & Recurring Items					
Import and Standardize Data	\$ -	\$ -	\$ -	\$ -	\$ -
Form Set-up	\$ -	\$ -	\$ -	\$ -	\$ -
IVR Configuration and Recording	\$ -	\$ -	\$ -	\$ -	\$ -
Activation Fee for Fax & Inbox	\$ -	\$ -	\$ -	\$ -	\$ -
Post Office Box - Dedicated	\$ -	\$ -	\$ -	\$ -	\$ -
Email Form or Notice Setup	\$ -	\$ -	\$ -	\$ -	\$ -
Settlement Fund Tax Filing	\$ -	\$ -	\$ -	\$ -	\$ -
Escrow Management Fee	\$ -	\$ -	\$ -	\$ -	\$ -
<i>Subtotal</i>	\$ -	\$ -	\$ -	\$ -	\$ -
Other					
CCAA Outside Counsel - General	\$ -	\$ -	\$ -	\$ -	\$ -
CCAA Outside Counsel - Rpt/Motions	\$ -	\$ -	\$ -	\$ -	\$ -
Claims: Lgl Rep, Estate Succ. Counsel	\$ -	\$ -	\$ -	\$ -	\$ -
Claims: Other advisory/audit	\$ -	\$ -	\$ -	\$ -	\$ -
Reimbursed Travel Expenses	\$ -	\$ -	\$ -	\$ -	\$ -
Translation	\$ -	\$ -	\$ -	\$ -	\$ -
Postage	\$ -	\$ -	\$ -	\$ -	\$ -
Delivery	\$ -	\$ -	\$ -	\$ -	\$ -
<i>Subtotal</i>	\$ -	\$ -	\$ -	\$ -	\$ -
Total	\$ 4,546	\$ 1,717	\$ 175,279	\$ 176,996	\$ 181,542
Items Not Included in Framework	\$ -	\$ -	\$ -	\$ -	\$ -
Net Framework Totals	\$ 4,546	\$ 1,717	\$ 175,279	\$ 176,996	\$ 181,542
Total Epiq Hours	14.3	8.0	381.2	389.2	403.5

Amounts provided exclude any applicable sales or other taxes.



	To July 31, 2025 Invoiced	August 1-15, 2025 Actual	August 16-31, 2025 Estimated	August 2025 Subtotal	Total
Paid Media Noticing	\$ -	\$ -	\$ -	\$ -	\$ -
Print & Mail Operations					
Mailing Coordinator	\$ -	\$ -	\$ -	\$ -	\$ -
Account Mgmt & Reconciliation	\$ -	\$ -	\$ -	\$ -	\$ -
Print 1-image Cheque with Stub	\$ -	\$ -	\$ -	\$ -	\$ -
Print/Mail PCC or QCAP Int Ntc/CI Pkt	\$ -	\$ -	\$ -	\$ -	\$ -
Requested Fulfillment Notice	\$ -	\$ -	\$ -	\$ -	\$ -
Reminder Fulfillment Notice	\$ -	\$ -	\$ -	\$ -	\$ -
Record Undeliverable Mail	\$ -	\$ -	\$ -	\$ -	\$ -
Email & Record Undeliverable Email	\$ -	\$ -	\$ -	\$ -	\$ -
Photocopy or Image	\$ -	\$ -	\$ -	\$ -	\$ -
Box Storage	\$ -	\$ -	\$ -	\$ -	\$ -
Stop Payment Fee	\$ -	\$ -	\$ -	\$ -	\$ -
Bank Fees - Account	\$ -	\$ -	\$ -	\$ -	\$ -
<i>Subtotal</i>	\$ -	\$ -	\$ -	\$ -	\$ -
Project & Escalation Mgmt/ Noticing					
Project Coordinator	\$ -	\$ 450	\$ 1,905	\$ 2,355	\$ 2,355
Proj Specialist/Proj Attorney	\$ -	\$ -	\$ -	\$ -	\$ -
Project Manager	\$ 1,190	\$ 867	\$ 3,213	\$ 4,080	\$ 5,270
Graphic Design/ Planner	\$ -	\$ 26	\$ 12,160	\$ 12,186	\$ 12,186
Program Mgr/ Noticing Mgr	\$ 386	\$ 713	\$ 178	\$ 891	\$ 1,277
Client Services Mgr/Notice Dir	\$ -	\$ 36	\$ 653	\$ 690	\$ 690
Managing Director/Executive	\$ 2,970	\$ 545	\$ 163,845	\$ 164,390	\$ 167,360
Docusign Usage Fee	\$ -	\$ -	\$ -	\$ -	\$ -
Dedicated Monthly Fax I&R Fee	\$ -	\$ -	\$ -	\$ -	\$ -
Dedicated Monthly Email I&R Fee	\$ -	\$ -	\$ -	\$ -	\$ -
<i>Subtotal</i>	\$ 4,546	\$ 2,637	\$ 181,954	\$ 184,591	\$ 189,137
Technology Management					
Data Analyst and Reporting	\$ -	\$ -	\$ -	\$ -	\$ -
Software Engineer/SQL Developer	\$ -	\$ -	\$ -	\$ -	\$ -
Solutions Architect	\$ -	\$ -	\$ -	\$ -	\$ -
Product/ Design Manager	\$ -	\$ -	\$ -	\$ -	\$ -
Technology Mgr/Sr Software Eng	\$ -	\$ -	\$ -	\$ -	\$ -
Website Hosting	\$ -	\$ -	\$ -	\$ -	\$ -
Facilitator Monthly Support	\$ -	\$ -	\$ -	\$ -	\$ -
Dashboard Monthly Support	\$ -	\$ -	\$ -	\$ -	\$ -
Data Storage Retention	\$ -	\$ -	\$ -	\$ -	\$ -
<i>Subtotal</i>	\$ -	\$ -	\$ -	\$ -	\$ -
Contact Centre					
Contact Centre Agent	\$ -	\$ -	\$ -	\$ -	\$ -
Contact Centre QA/Lead/Train	\$ -	\$ -	\$ -	\$ -	\$ -
Contact Centre Help Desk	\$ -	\$ -	\$ -	\$ -	\$ -
Contact Centre Supervisor	\$ -	\$ -	\$ -	\$ -	\$ -
Contact Centre Manager	\$ -	\$ -	\$ -	\$ -	\$ -
IVR Maintenance Fee	\$ -	\$ -	\$ -	\$ -	\$ -
IVR Minutes of Use	\$ -	\$ -	\$ -	\$ -	\$ -
<i>Subtotal</i>	\$ -	\$ -	\$ -	\$ -	\$ -
Claims Operations Services					
Data Entry/ Clerical	\$ -	\$ -	\$ -	\$ -	\$ -
Claims Review	\$ -	\$ -	\$ -	\$ -	\$ -
Claims Lead/ QA	\$ -	\$ -	\$ -	\$ -	\$ -
Claims Supervisor	\$ -	\$ -	\$ -	\$ -	\$ -
Paper/Email/Fax Claims Doc Intake	\$ -	\$ -	\$ -	\$ -	\$ -
Paper/Email/Fax Misc Doc Intake	\$ -	\$ -	\$ -	\$ -	\$ -
Acknowledgement or Claim Notif.	\$ -	\$ -	\$ -	\$ -	\$ -
Online Claim Document Intake	\$ -	\$ -	\$ -	\$ -	\$ -
Scanning and Image Storage	\$ -	\$ -	\$ -	\$ -	\$ -
<i>Subtotal</i>	\$ -	\$ -	\$ -	\$ -	\$ -
Initial & Recurring Items					
Import and Standardize Data	\$ -	\$ -	\$ -	\$ -	\$ -
Form Set-up	\$ -	\$ -	\$ -	\$ -	\$ -
IVR Configuration and Recording	\$ -	\$ -	\$ -	\$ -	\$ -
Activation Fee for Fax & Inbox	\$ -	\$ -	\$ -	\$ -	\$ -
Post Office Box - Dedicated	\$ -	\$ -	\$ -	\$ -	\$ -
Email Form or Notice Setup	\$ -	\$ -	\$ -	\$ -	\$ -
Settlement Fund Tax Filing	\$ -	\$ -	\$ -	\$ -	\$ -
Escrow Management Fee	\$ -	\$ -	\$ -	\$ -	\$ -
<i>Subtotal</i>	\$ -	\$ -	\$ -	\$ -	\$ -
Other					
CCAA Outside Counsel - General	\$ -	\$ -	\$ -	\$ -	\$ -
CCAA Outside Counsel - Rpt/Motions	\$ -	\$ -	\$ -	\$ -	\$ -
Claims: Lgl Rep, Estate Succ. Counsel	\$ -	\$ -	\$ -	\$ -	\$ -
Claims: Other advisory/audit	\$ -	\$ -	\$ -	\$ -	\$ -
Reimbursed Travel Expenses	\$ -	\$ -	\$ -	\$ -	\$ -
Translation	\$ -	\$ -	\$ -	\$ -	\$ -
Postage	\$ -	\$ -	\$ -	\$ -	\$ -
Delivery	\$ -	\$ -	\$ -	\$ -	\$ -
<i>Subtotal</i>	\$ -	\$ -	\$ -	\$ -	\$ -
Total	\$ 4,546	\$ 2,637	\$ 181,954	\$ 184,591	\$ 189,137
Items Not Included in Framework	\$ -	\$ -	\$ -	\$ -	\$ -
Net Framework Totals	\$ 4,546	\$ 2,637	\$ 181,954	\$ 184,591	\$ 189,137
Total Epiq Hours	14.3	11.8	411.8	423.6	437.9

Amounts provided exclude any applicable sales or other taxes.

Pre-Implementation Detail: PCC Agent

Epiq Class Action Services Canada

August 22, 2025

	To July 31, 2025 Invoiced	August 1-15, 2025 Actual	August 16-31, 2025 Estimated	August 2025 Subtotal	Total
Paid Media Noticing	\$ -	\$ -	\$ -	\$ -	\$ -
Print & Mail Operations					
Mailing Coordinator	\$ -	\$ -	\$ -	\$ -	\$ -
Account Mgmt & Reconciliation	\$ -	\$ -	\$ -	\$ -	\$ -
Print 1-image Cheque with Stub	\$ -	\$ -	\$ -	\$ -	\$ -
Print/Mail PCC or QCAP Int Ntc/CI Pkt	\$ -	\$ -	\$ -	\$ -	\$ -
Requested Fulfillment Notice	\$ -	\$ -	\$ -	\$ -	\$ -
Reminder Fulfillment Notice	\$ -	\$ -	\$ -	\$ -	\$ -
Record Undeliverable Mail	\$ -	\$ -	\$ -	\$ -	\$ -
Email & Record Undeliverable Email	\$ -	\$ -	\$ -	\$ -	\$ -
Photocopy or Image	\$ -	\$ -	\$ -	\$ -	\$ -
Box Storage	\$ -	\$ -	\$ -	\$ -	\$ -
Stop Payment Fee	\$ -	\$ -	\$ -	\$ -	\$ -
Bank Fees - Account	\$ -	\$ -	\$ -	\$ -	\$ -
<i>Subtotal</i>	\$ -	\$ -	\$ -	\$ -	\$ -
Project & Escalation Mgmt/ Noticing					
Project Coordinator	\$ 38,603	\$ 12,510	\$ 48,041	\$ 60,551	\$ 99,154
Proj Specialist/Proj Attorney	\$ -	\$ -	\$ 109,154	\$ 109,154	\$ 109,154
Project Manager	\$ 99,273	\$ 21,641	\$ 34,861	\$ 56,502	\$ 155,775
Graphic Design/ Planner	\$ -	\$ 78	\$ 2,470	\$ 2,548	\$ 2,548
Program Mgr/ Noticing Mgr	\$ 2,020	\$ 416	\$ 5,083	\$ 5,498	\$ 7,518
Client Services Mgr/Notice Dir	\$ 27,795	\$ 5,046	\$ 4,555	\$ 9,601	\$ 37,396
Managing Director/Executive	\$ 125,596	\$ 25,196	\$ (1,844)	\$ 23,352	\$ 148,948
Docusign Usage Fee	\$ -	\$ -	\$ -	\$ -	\$ -
Dedicated Monthly Fax I&R Fee	\$ -	\$ -	\$ -	\$ -	\$ -
Dedicated Monthly Email I&R Fee	\$ -	\$ -	\$ -	\$ -	\$ -
<i>Subtotal</i>	\$ 293,287	\$ 64,886	\$ 202,320	\$ 267,206	\$ 560,492
Technology Management					
Data Analyst and Reporting	\$ 4,762	\$ 1,258	\$ 11,400	\$ 12,658	\$ 17,419
Software Engineer/SQL Developer	\$ 241,726	\$ 35,567	\$ 60,115	\$ 95,682	\$ 337,407
Solutions Architect	\$ -	\$ 950	\$ 5,519	\$ 6,470	\$ 6,470
Product/ Design Manager	\$ -	\$ 2,792	\$ 8,366	\$ 11,157	\$ 11,157
Technology Mgr/Sr Software Eng	\$ -	\$ 9,837	\$ 26,656	\$ 36,493	\$ 36,493
Website Hosting	\$ -	\$ -	\$ -	\$ -	\$ -
Facilitator Monthly Support	\$ -	\$ -	\$ -	\$ -	\$ -
Dashboard Monthly Support	\$ -	\$ -	\$ -	\$ -	\$ -
Data Storage Retention	\$ -	\$ -	\$ -	\$ -	\$ -
<i>Subtotal</i>	\$ 246,487	\$ 50,404	\$ 112,055	\$ 162,459	\$ 408,946
Contact Centre					
Contact Centre Agent	\$ -	\$ -	\$ 154,275	\$ 154,275	\$ 154,275
Contact Centre QA/Lead/Train	\$ -	\$ 50	\$ 138,247	\$ 138,297	\$ 138,297
Contact Centre Help Desk	\$ -	\$ -	\$ 42,562	\$ 42,562	\$ 42,562
Contact Centre Supervisor	\$ -	\$ -	\$ 59,637	\$ 59,637	\$ 59,637
Contact Centre Manager	\$ -	\$ 884	\$ 42,322	\$ 43,206	\$ 43,206
IVR Maintenance Fee	\$ -	\$ -	\$ 297	\$ 297	\$ 297
IVR Minutes of Use	\$ -	\$ -	\$ -	\$ -	\$ -
<i>Subtotal</i>	\$ -	\$ 934	\$ 437,340	\$ 438,274	\$ 438,274
Claims Operations Services					
Data Entry/ Clerical	\$ -	\$ -	\$ 2,512	\$ 2,512	\$ 2,512
Claims Review	\$ -	\$ -	\$ 68,214	\$ 68,214	\$ 68,214
Claims Lead/ QA	\$ -	\$ -	\$ 14,584	\$ 14,584	\$ 14,584
Claims Supervisor	\$ -	\$ -	\$ 14,841	\$ 14,841	\$ 14,841
Paper/Email/Fax Claims Doc Intake	\$ -	\$ -	\$ -	\$ -	\$ -
Paper/Email/Fax Misc Doc Intake	\$ -	\$ -	\$ -	\$ -	\$ -
Acknowledgement or Claim Notif.	\$ -	\$ -	\$ -	\$ -	\$ -
Online Claim Document Intake	\$ -	\$ -	\$ -	\$ -	\$ -
Scanning and Image Storage	\$ -	\$ -	\$ -	\$ -	\$ -
<i>Subtotal</i>	\$ -	\$ -	\$ 100,150	\$ 100,150	\$ 100,150
Initial & Recurring Items					
Import and Standardize Data	\$ -	\$ -	\$ -	\$ -	\$ -
Form Set-up	\$ -	\$ -	\$ -	\$ -	\$ -
IVR Configuration and Recording	\$ -	\$ -	\$ -	\$ -	\$ -
Activation Fee for Fax & Inbox	\$ -	\$ -	\$ -	\$ -	\$ -
Post Office Box - Dedicated	\$ -	\$ -	\$ -	\$ -	\$ -
Email Form or Notice Setup	\$ -	\$ -	\$ -	\$ -	\$ -
Settlement Fund Tax Filing	\$ -	\$ -	\$ -	\$ -	\$ -
Escrow Management Fee	\$ -	\$ -	\$ -	\$ -	\$ -
<i>Subtotal</i>	\$ -	\$ -	\$ -	\$ -	\$ -
Other					
CCAA Outside Counsel - General	\$ 61,658	\$ 65,940	\$ 38,844	\$ 104,784	\$ 166,442
CCAA Outside Counsel - Rpt/Motions	\$ -	\$ -	\$ -	\$ -	\$ -
Claims: Lgl Rep, Estate Succ. Counsel	\$ 659,114	\$ 119,686	\$ 246,332	\$ 366,018	\$ 1,025,132
Claims: Other advisory/audit	\$ -	\$ -	\$ -	\$ -	\$ -
Reimbursed Travel Expenses	\$ -	\$ -	\$ -	\$ -	\$ -
Translation	\$ 3,130	\$ -	\$ 6,617	\$ 6,617	\$ 9,747
Postage	\$ -	\$ -	\$ -	\$ -	\$ -
Delivery	\$ -	\$ -	\$ -	\$ -	\$ -
<i>Subtotal</i>	\$ 723,902	\$ 185,626	\$ 291,793	\$ 477,420	\$ 1,201,321
Total	\$ 1,263,675	\$ 301,851	\$ 1,143,658	\$ 1,445,509	\$ 2,709,184
Items Not Included in Framework	\$ 720,772	\$ 185,626	\$ 285,176	\$ 470,802	\$ 1,191,575
Net Framework Totals	\$ 542,903	\$ 116,224	\$ 858,482	\$ 974,706	\$ 1,517,609
Total Epiq Hours	2,167.2	471.0	6,524.7	6,995.7	9,162.9

Amounts provided exclude any applicable sales or other taxes.

Pre-Implementation Detail: PCC Claim Administration

Epiq Class Action Services Canada

August 22, 2025



	To July 31, 2025 Invoiced	August 1-15, 2025 Actual	August 16-31, 2025 Estimated	August 2025 Subtotal	Total
Paid Media Noticing	\$ -	\$ -	\$ -	\$ -	\$ -
Print & Mail Operations					
Mailing Coordinator	\$ -	\$ -	\$ -	\$ -	\$ -
Account Mgmt & Reconciliation	\$ -	\$ -	\$ -	\$ -	\$ -
Print 1-image Cheque with Stub	\$ -	\$ -	\$ -	\$ -	\$ -
Print/Mail PCC or QCAP Int Ntc/CI Pkt	\$ -	\$ -	\$ -	\$ -	\$ -
Requested Fulfillment Notice	\$ -	\$ -	\$ -	\$ -	\$ -
Reminder Fulfillment Notice	\$ -	\$ -	\$ -	\$ -	\$ -
Record Undeliverable Mail	\$ -	\$ -	\$ -	\$ -	\$ -
Email & Record Undeliverable Email	\$ -	\$ -	\$ -	\$ -	\$ -
Photocopy or Image	\$ -	\$ -	\$ -	\$ -	\$ -
Box Storage	\$ -	\$ -	\$ -	\$ -	\$ -
Stop Payment Fee	\$ -	\$ -	\$ -	\$ -	\$ -
Bank Fees - Account	\$ -	\$ -	\$ -	\$ -	\$ -
<i>Subtotal</i>	\$ -	\$ -	\$ -	\$ -	\$ -
Project & Escalation Mgmt/ Noticing					
Project Coordinator	\$ 67,568	\$ 20,235	\$ 66,056	\$ 86,291	\$ 153,859
Proj Specialist/Proj Attorney	\$ -	\$ -	\$ 30,000	\$ 30,000	\$ 30,000
Project Manager	\$ 120,965	\$ 30,940	\$ 70,595	\$ 101,535	\$ 222,500
Graphic Design/ Planner	\$ -	\$ 260	\$ 9,412	\$ 9,672	\$ 9,672
Program Mgr/ Noticing Mgr	\$ 85,028	\$ 1,396	\$ 14,408	\$ 15,804	\$ 100,832
Client Services Mgr/Notice Dir	\$ 104,003	\$ 11,180	\$ 8,548	\$ 19,729	\$ 123,732
Managing Director/Executive	\$ 307,598	\$ 46,580	\$ 94,978	\$ 141,558	\$ 449,155
Docusign Usage Fee	\$ -	\$ -	\$ -	\$ -	\$ -
Dedicated Monthly Fax I&R Fee	\$ -	\$ -	\$ -	\$ -	\$ -
Dedicated Monthly Email I&R Fee	\$ -	\$ -	\$ -	\$ -	\$ -
<i>Subtotal</i>	\$ 685,162	\$ 110,591	\$ 293,998	\$ 404,589	\$ 1,089,751
Technology Management					
Data Analyst and Reporting	\$ 39,433	\$ 14,634	\$ 30,396	\$ 45,029	\$ 84,462
Software Engineer/SQL Developer	\$ 778,906	\$ 116,615	\$ 285,287	\$ 401,902	\$ 1,180,807
Solutions Architect	\$ -	\$ 1,426	\$ 8,549	\$ 9,974	\$ 9,974
Product/ Design Manager	\$ -	\$ 5,019	\$ 18,315	\$ 23,334	\$ 23,334
Technology Mgr/Sr Software Eng	\$ -	\$ 4,501	\$ 89,999	\$ 94,500	\$ 94,500
Website Hosting	\$ -	\$ -	\$ -	\$ -	\$ -
Facilitator Monthly Support	\$ -	\$ -	\$ -	\$ -	\$ -
Dashboard Monthly Support	\$ -	\$ -	\$ -	\$ -	\$ -
Data Storage Retention	\$ -	\$ -	\$ -	\$ -	\$ -
<i>Subtotal</i>	\$ 818,338	\$ 142,194	\$ 432,546	\$ 574,740	\$ 1,393,078
Contact Centre					
Contact Centre Agent	\$ -	\$ -	\$ -	\$ -	\$ -
Contact Centre QA/Lead/Train	\$ -	\$ 50	\$ (50)	\$ -	\$ -
Contact Centre Help Desk	\$ -	\$ -	\$ -	\$ -	\$ -
Contact Centre Supervisor	\$ -	\$ -	\$ -	\$ -	\$ -
Contact Centre Manager	\$ -	\$ 629	\$ (629)	\$ -	\$ -
IVR Maintenance Fee	\$ -	\$ -	\$ -	\$ -	\$ -
IVR Minutes of Use	\$ -	\$ -	\$ -	\$ -	\$ -
<i>Subtotal</i>	\$ -	\$ 679	\$ (679)	\$ -	\$ -
Claims Operations Services					
Data Entry/ Clerical	\$ -	\$ -	\$ 2,512	\$ 2,512	\$ 2,512
Claims Review	\$ -	\$ -	\$ 68,214	\$ 68,214	\$ 68,214
Claims Lead/ QA	\$ -	\$ -	\$ 19,272	\$ 19,272	\$ 19,272
Claims Supervisor	\$ -	\$ -	\$ 19,716	\$ 19,716	\$ 19,716
Paper/Email/Fax Claims Doc Intake	\$ -	\$ -	\$ -	\$ -	\$ -
Paper/Email/Fax Misc Doc Intake	\$ -	\$ -	\$ -	\$ -	\$ -
Acknowledgement or Claim Notif.	\$ -	\$ -	\$ -	\$ -	\$ -
Online Claim Document Intake	\$ -	\$ -	\$ -	\$ -	\$ -
Scanning and Image Storage	\$ -	\$ -	\$ -	\$ -	\$ -
<i>Subtotal</i>	\$ -	\$ -	\$ 109,713	\$ 109,713	\$ 109,713
Initial & Recurring Items					
Import and Standardize Data	\$ -	\$ -	\$ -	\$ -	\$ -
Form Set-up	\$ -	\$ -	\$ -	\$ -	\$ -
IVR Configuration and Recording	\$ -	\$ -	\$ -	\$ -	\$ -
Activation Fee for Fax & Inbox	\$ -	\$ -	\$ -	\$ -	\$ -
Post Office Box - Dedicated	\$ -	\$ -	\$ -	\$ -	\$ -
Email Form or Notice Setup	\$ -	\$ -	\$ -	\$ -	\$ -
Settlement Fund Tax Filing	\$ -	\$ -	\$ -	\$ -	\$ -
Escrow Management Fee	\$ -	\$ -	\$ -	\$ -	\$ -
<i>Subtotal</i>	\$ -	\$ -	\$ -	\$ -	\$ -
Other					
CCAA Outside Counsel - General	\$ 123,316	\$ 131,880	\$ 77,689	\$ 209,569	\$ 332,885
CCAA Outside Counsel - Rpt/Motions	\$ -	\$ -	\$ -	\$ -	\$ -
Claims: Lgl Rep, Estate Succ. Counsel	\$ -	\$ -	\$ -	\$ -	\$ -
Claims: Other advisory/audit	\$ -	\$ -	\$ -	\$ -	\$ -
Reimbursed Travel Expenses	\$ 1,925	\$ -	\$ -	\$ -	\$ 1,925
Translation	\$ 5,669	\$ -	\$ -	\$ -	\$ 5,669
Postage	\$ -	\$ -	\$ -	\$ -	\$ -
Delivery	\$ -	\$ -	\$ -	\$ -	\$ -
<i>Subtotal</i>	\$ 130,909	\$ 131,880	\$ 77,689	\$ 209,569	\$ 340,478
Total	\$ 1,634,409	\$ 385,344	\$ 913,266	\$ 1,298,610	\$ 2,933,020
Items Not Included in Framework	\$ 123,316	\$ 131,880	\$ 77,689	\$ 209,569	\$ 332,885
Net Framework Totals	\$ 1,511,094	\$ 253,464	\$ 835,577	\$ 1,089,041	\$ 2,600,135
Total Epiq Hours	5,672.6	1,029.4	3,858.4	4,887.8	10,560.3

Amounts provided exclude any applicable sales or other taxes.

Pre-Implementation Detail: QCAP Claim Administration

Epiq Class Action Services Canada

August 22, 2025

	To July 31, 2025 Invoiced	August 1-15, 2025 Actual	August 16-31, 2025 Estimated	August 2025 Subtotal	Total
Paid Media Noticing	\$ -	\$ -	\$ -	\$ -	\$ -
Print & Mail Operations					
Mailing Coordinator	\$ -	\$ -	\$ -	\$ -	\$ -
Account Mgmt & Reconciliation	\$ -	\$ -	\$ -	\$ -	\$ -
Print 1-image Cheque with Stub	\$ -	\$ -	\$ -	\$ -	\$ -
Print/Mail PCC or QCAP Int Ntc/CI Pkt	\$ -	\$ -	\$ -	\$ -	\$ -
Requested Fulfillment Notice	\$ -	\$ -	\$ -	\$ -	\$ -
Reminder Fulfillment Notice	\$ -	\$ -	\$ -	\$ -	\$ -
Record Undeliverable Mail	\$ -	\$ -	\$ -	\$ -	\$ -
Email & Record Undeliverable Email	\$ -	\$ -	\$ -	\$ -	\$ -
Photocopy or Image	\$ -	\$ -	\$ -	\$ -	\$ -
Box Storage	\$ -	\$ -	\$ -	\$ -	\$ -
Stop Payment Fee	\$ -	\$ -	\$ -	\$ -	\$ -
Bank Fees - Account	\$ -	\$ -	\$ -	\$ -	\$ -
<i>Subtotal</i>	\$ -	\$ -	\$ -	\$ -	\$ -
Project & Escalation Mgmt/ Noticing					
Project Coordinator	\$ 48,992	\$ 13,665	\$ 58,376	\$ 72,041	\$ 121,033
Proj Specialist/Proj Attorney	\$ -	\$ -	\$ 30,000	\$ 30,000	\$ 30,000
Project Manager	\$ 68,316	\$ 23,545	\$ 54,632	\$ 78,177	\$ 146,493
Graphic Design/ Planner	\$ -	\$ 208	\$ 6,994	\$ 7,202	\$ 7,202
Program Mgr/ Noticing Mgr	\$ 41,503	\$ 1,040	\$ 11,112	\$ 12,151	\$ 53,654
Client Services Mgr/Notice Dir	\$ 111,419	\$ 29,149	\$ (13,014)	\$ 16,135	\$ 127,554
Managing Director/Executive	\$ 94,515	\$ 33,116	\$ 87,553	\$ 120,669	\$ 215,184
Docusign Usage Fee	\$ -	\$ -	\$ -	\$ -	\$ -
Dedicated Monthly Fax I&R Fee	\$ -	\$ -	\$ -	\$ -	\$ -
Dedicated Monthly Email I&R Fee	\$ -	\$ -	\$ -	\$ -	\$ -
<i>Subtotal</i>	\$ 364,745	\$ 100,722	\$ 235,653	\$ 336,375	\$ 701,120
Technology Management					
Data Analyst and Reporting	\$ 18,711	\$ 2,276	\$ 25,142	\$ 27,417	\$ 46,128
Software Engineer/SQL Developer	\$ 648,534	\$ 114,155	\$ 169,174	\$ 283,329	\$ 931,863
Solutions Architect	\$ -	\$ 1,218	\$ 7,866	\$ 9,083	\$ 9,083
Product/ Design Manager	\$ -	\$ 4,128	\$ 14,840	\$ 18,968	\$ 18,968
Technology Mgr/Sr Software Eng	\$ -	\$ 22,724	\$ 65,097	\$ 87,821	\$ 87,821
Website Hosting	\$ -	\$ -	\$ -	\$ -	\$ -
Facilitator Monthly Support	\$ -	\$ -	\$ -	\$ -	\$ -
Dashboard Monthly Support	\$ -	\$ -	\$ -	\$ -	\$ -
Data Storage Retention	\$ -	\$ -	\$ -	\$ -	\$ -
<i>Subtotal</i>	\$ 667,245	\$ 144,500	\$ 282,119	\$ 426,619	\$ 1,093,864
Contact Centre					
Contact Centre Agent	\$ -	\$ -	\$ -	\$ -	\$ -
Contact Centre QA/Lead/Train	\$ -	\$ 50	\$ (50)	\$ -	\$ -
Contact Centre Help Desk	\$ -	\$ -	\$ -	\$ -	\$ -
Contact Centre Supervisor	\$ -	\$ -	\$ -	\$ -	\$ -
Contact Centre Manager	\$ -	\$ 629	\$ (629)	\$ -	\$ -
IVR Maintenance Fee	\$ -	\$ -	\$ -	\$ -	\$ -
IVR Minutes of Use	\$ -	\$ -	\$ -	\$ -	\$ -
<i>Subtotal</i>	\$ -	\$ 679	\$ (679)	\$ -	\$ -
Claims Operations Services					
Data Entry/ Clerical	\$ -	\$ -	\$ 2,512	\$ 2,512	\$ 2,512
Claims Review	\$ -	\$ -	\$ 68,214	\$ 68,214	\$ 68,214
Claims Lead/ QA	\$ -	\$ -	\$ 19,272	\$ 19,272	\$ 19,272
Claims Supervisor	\$ -	\$ -	\$ 19,716	\$ 19,716	\$ 19,716
Paper/Email/Fax Claims Doc Intake	\$ -	\$ -	\$ -	\$ -	\$ -
Paper/Email/Fax Misc Doc Intake	\$ -	\$ -	\$ -	\$ -	\$ -
Acknowledgement or Claim Notif.	\$ -	\$ -	\$ -	\$ -	\$ -
Online Claim Document Intake	\$ -	\$ -	\$ -	\$ -	\$ -
Scanning and Image Storage	\$ -	\$ -	\$ -	\$ -	\$ -
<i>Subtotal</i>	\$ -	\$ -	\$ 109,713	\$ 109,713	\$ 109,713
Initial & Recurring Items					
Import and Standardize Data	\$ -	\$ -	\$ -	\$ -	\$ -
Form Set-up	\$ -	\$ -	\$ -	\$ -	\$ -
IVR Configuration and Recording	\$ -	\$ -	\$ -	\$ -	\$ -
Activation Fee for Fax & Inbox	\$ -	\$ -	\$ -	\$ -	\$ -
Post Office Box - Dedicated	\$ -	\$ -	\$ -	\$ -	\$ -
Email Form or Notice Setup	\$ -	\$ -	\$ -	\$ -	\$ -
Settlement Fund Tax Filing	\$ -	\$ -	\$ -	\$ -	\$ -
Escrow Management Fee	\$ -	\$ -	\$ -	\$ -	\$ -
<i>Subtotal</i>	\$ -	\$ -	\$ -	\$ -	\$ -
Other					
CCAA Outside Counsel - General	\$ 123,316	\$ 131,880	\$ 77,689	\$ 209,569	\$ 332,885
CCAA Outside Counsel - Rpt/Motions	\$ -	\$ -	\$ -	\$ -	\$ -
Claims: Lgl Rep, Estate Succ. Counsel	\$ -	\$ -	\$ -	\$ -	\$ -
Claims: Other advisory/audit	\$ -	\$ -	\$ -	\$ -	\$ -
Reimbursed Travel Expenses	\$ -	\$ -	\$ -	\$ -	\$ -
Translation	\$ 7,084	\$ -	\$ -	\$ -	\$ 7,084
Postage	\$ -	\$ -	\$ -	\$ -	\$ -
Delivery	\$ -	\$ -	\$ -	\$ -	\$ -
<i>Subtotal</i>	\$ 130,400	\$ 131,880	\$ 77,689	\$ 209,569	\$ 339,969
Total	\$ 1,162,390	\$ 377,781	\$ 704,495	\$ 1,082,276	\$ 2,244,666
Items Not Included in Framework	\$ 123,316	\$ 131,880	\$ 77,689	\$ 209,569	\$ 332,885
Net Framework Totals	\$ 1,039,074	\$ 245,901	\$ 626,806	\$ 872,707	\$ 1,911,781
Total Epiq Hours	4,051.0	932.9	3,044.9	3,977.8	8,028.8

Amounts provided exclude any applicable sales or other taxes.

2025 Standard Rates

Epiq Class Action Services Canada

August 22, 2025



CLIN No.	Contract Line Item (CLIN) Description	Rate
099	Media Noticing	
100	Paid Media Noticing	As used
199	Print & Mail Operations	
200-210	Print & Mail Operations Hourly Rates	\$125-\$170
211	Print 1-image Cheque with Stub	\$2.00
212	Print/Mail PCC or QCAP Int Ntc/Cl Pkt	\$2.01
213	Requested Fulfillment Notice	\$3.80
214	Reminder Fulfillment Notice	\$4.01
270	Record Undeliverable Mail	\$0.50
275	Email & Record Undeliverable Email	\$0.20
290	Photocopy or Image	\$0.20
295	Box Storage per Box per Month	\$4.62
296	Stop Payment Fee	\$25.00
297	Bank Fees - Account	\$330.00
299	Project & Escalation Mgmt/Noticing	
300-340	Proj Mgmt, Noticing and Tech Hourly Rates	\$150-\$363
345	Senior Management	\$495.00
346	Docusign Usage Fee	\$2.10
353	Dedicated Monthly Fax I&R Fee	\$50.00
354	Dedicated Monthly Email I&R Fee	\$75.00
399	Technology Management	
400-440	Proj Mgmt, Noticing and Tech Hourly Rates	\$150-\$363
450	Website Hosting	\$297.00
452	Facilitator Monthly Support	\$300.00
455	Dashboard Monthly Support	\$594.00
460	Data Storage Retention	\$500.00
499	Contact Centre	
500-624	Contact Centre Hourly Rates	\$75-\$170
550	IVR Maintenance Fee	\$297.00
555	IVR Minutes of Use	\$0.09
599	Claims Operations	
600-639	Claims Operations Hourly Rates	\$75-\$170
650	Paper/Email/Fax Claims Doc Intake	\$5.00
651	Paper/Email/Fax Misc Doc Intake	\$8.00
652	Acknowledgement or Claim Notif.	\$2.00
655	Online Claim Document Intake	\$0.35
660	Scanning and Image Storage	\$0.20
699	Initial & Recurring Items	
705	Import and Standardize Data	\$1,320.00
710	Form Set-up	\$1,320.00
715	IVR Configuration and Recording	\$3,000.00
717	Activation Fee for Fax & Inbox	\$250.00
720	Post Office Box - Dedicated	\$1,056.00
735	Email Form or Notice Setup	\$800.00
760	Settlement Fund Tax Filing	\$4,000.00
765	Escrow Management Fee	\$4,620.00
799	Other	As used
805	Reimbursed Travel Expenses	
806	Translation	
807	Postage	
808	Delivery	

Rates subject to standard adjustment increases.

ONTARIO

**SUPERIOR COURT OF JUSTICE
(COMMERCIAL LIST)**

Proceeding commenced at Toronto

**AFFIDAVIT OF MICHAEL O'CONNOR
(Motion Returnable August 27, 2025)**

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Court File No. CV-19-615862-00CL
Court File No. CV-19-616077-00CL
Court File No. CV-19-616779-00CL

**ONTARIO
SUPERIOR COURT OF JUSTICE
COMMERCIAL LIST**

IN THE MATTER OF THE *COMPANIES' CREDITORS ARRANGEMENT ACT*,
R.S.C. 1985, c. C-36, AS AMENDED

AND IN THE MATTER OF A PLAN OF COMPROMISE
OR ARRANGEMENT OF **JTI-MACDONALD CORP.**

AND IN THE MATTER OF A PLAN OF COMPROMISE
OR ARRANGEMENT OF **IMPERIAL TOBACCO CANADA LIMITED**
AND **IMPERIAL TOBACCO COMPANY LIMITED**

AND IN THE MATTER OF A PLAN OF COMPROMISE
OR ARRANGEMENT OF **ROTHMANS, BENSON & HEDGES INC.**

Applicants

PAN-CANADIAN CLAIMANTS' COMPENSATION PLAN

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**GUIDING PRINCIPLES FOR THE
PAN-CANADIAN CLAIMANTS' COMPENSATION PLAN AND
QUEBEC CLASS ACTION ADMINISTRATION PLAN**

The following principles underpin and shall guide the approval, implementation and execution of the Pan-Canadian Claimants' Compensation Plan ("**PCC Compensation Plan**") and the Quebec Class Action Administration Plan ("**Quebec Administration Plan**"):

1. The CCAA Court shall have an ongoing supervisory role in respect of the administration of the CCAA Plans which include the Quebec Administration Plan (Schedule "K" to Imperial's CCAA Plan and Schedule "N" to the CCAA Plans of RBH and JTIM) and the PCC Compensation Plan (Schedule "P" to Imperial's CCAA Plan and Schedule "S" to the CCAA Plans of RBH and JTIM).
2. The CCAA Court shall hear and determine the proceedings relating to the approval of the PCC Compensation Plan and the Quebec Administration Plan, including the approval of the retainer agreement respecting fees and disbursements between the Quebec Class Counsel and the representative plaintiffs, and the approval of the Quebec Class Counsel Fee. Matters relating to the ongoing supervision of the Quebec Administration Plan shall be heard and determined jointly by the CCAA Court and the Quebec Superior Court. In performing this function, the CCAA Court and the Quebec Superior Court may communicate with one another in accordance with a protocol to be worked out and established by them. Matters relating to the ongoing supervision of the PCC Compensation Plan shall be heard and determined solely by the CCAA Court.
3. No changes, modifications or revisions shall be made to the Quebec Administration Plan without the joint approval of the CCAA Court and the Quebec Superior Court as set out in an Order issued by the CCAA Court.
4. No changes, modifications or revisions shall be made to the PCC Compensation Plan without the approval of the CCAA Court as set out in an Order issued by the CCAA Court.

5. Upon the recommendation of the Court-Appointed Mediator and the Monitors and subject to the approval of the CCAA Court, Daniel Shapiro, K.C. will be appointed by the CCAA Court to serve as the Court-appointed Administrative Coordinator (“**Administrative Coordinator**”) and, in that capacity, he will coordinate and serve as a liaison and conduit to facilitate the flow of information between the Claims Administrator and the CCAA Plan Administrators in regard to both the PCC Compensation Plan and the Quebec Administration Plan.
6. Upon the recommendation of the Court-Appointed Mediator and the Monitors and subject to the approval of the CCAA Court, the CCAA Court will appoint one Claims Administrator to administer both the Quebec Administration Plan and the PCC Compensation Plan.
7. The Claims Administrator shall be neutral and independent from the Quebec Class Action Plaintiffs (including the *Blais* Class Members and the *Létourneau* Class Members), Quebec Class Counsel, Raymond Chabot, Pan-Canadian Claimants, PCC Representative Counsel, Tobacco Companies, Claimants, CCAA Plan Administrators, Administrative Coordinator and Court-Appointed Mediator. The Claims Administrator may, in its discretion, retain its own legal or other advisors.
8. The Claims Administrator shall liaise with the Administrative Coordinator who will assist the Claims Administrator to address and resolve issues that may arise from time to time in the interpretation, implementation and ongoing administration of both plans. If the Administrative Coordinator and the Claims Administrator are unable to resolve an issue relating to the Quebec Administration Plan, then the Administrative Coordinator shall refer the matter to the CCAA Plan Administrators who may, in their discretion, refer the matter jointly to the CCAA Court and the Quebec Superior Court for resolution. If the Administrative Coordinator and the Claims Administrator are unable to resolve an issue relating to the PCC Compensation Plan, then the Administrative Coordinator shall refer the matter to the CCAA Plan Administrators who may, in their discretion, refer the matter to the CCAA Court for resolution.

9. In respect of all decisions regarding the implementation and execution of the Quebec Administration Plan, the Claims Administrator shall not collaborate or consult with or seek any advice, instructions or directions from the Quebec Class Counsel. Notwithstanding the above, the Quebec Class Counsel shall communicate and cooperate with the Claims Administrator and the Administrative Coordinator so as to fulfill their duties and responsibilities to the *Blais* Class Members.
10. In respect of all decisions regarding the implementation and execution of the PCC Compensation Plan, the Claims Administrator shall not collaborate or consult with or seek any advice, instructions or directions from the PCC Representative Counsel. Notwithstanding the above, the PCC Representative Counsel shall communicate and cooperate with the Claims Administrator and the Administrative Coordinator so as to fulfill their duties and responsibilities to the PCCs.
11. The Quebec Class Counsel have a traditional solicitor-client relationship with the *Blais* Class Members and the *Létourneau* Class Members and a duty to act in the best interests of the classes as a whole.
12. The PCC Representative Counsel has a traditional solicitor-client relationship with the Pan-Canadian Claimants and a duty to act in the best interests of all Pan-Canadian Claimants in regard to the Claims Process.

PAN-CANADIAN CLAIMANTS' COMPENSATION PLAN

INTRODUCTION

A compensation plan, called the Pan-Canadian Claimants' Compensation Plan or PCC Compensation Plan, has been developed for eligible persons across Canada who are suffering from at least one of three tobacco-related diseases caused by smoking cigarettes sold in Canada by three tobacco companies, Imperial Tobacco Canada Limited, Rothmans, Benson & Hedges and JTI-Macdonald Corp. Persons may be eligible to receive a payment if they meet the requirements of the PCC Compensation Plan including:

1. They reside in Canada and were alive on March 8, 2019.
2. Between January 1, 1950 and November 20, 1998:
 - (a) They smoked a minimum of 87,600 cigarettes (the PCC Compensation Plan explains how to calculate the number of cigarettes smoked); and
 - (b) The cigarettes that they smoked were of one or more of the following cigarette brands (the PCC Compensation Plan contains a complete list of the cigarette brands and sub-brands):

Accord	Craven "A"	Mark Ten	Number 7
B&H	Craven "M"	Matinee	Peter Jackson
Belmont	du Maurier	Medallion	Players
Belvedere	Dunhill	Macdonald	Rothmans
Camel	Export	More	Vantage
Cameo	LD	North American Spirit	Viscount
			Winston

3. Between March 8, 2015 and March 8, 2019 (inclusive of those dates), they were diagnosed with Lung Cancer, Throat Cancer or Emphysema/COPD (GOLD Grade III or IV) (the PCC Compensation Plan contains details of the tobacco-related diseases), and they resided in Canada at the time of their diagnosis.

The PCC Compensation Plan provides important information and forms to help people decide whether they may have a claim for payment. If they think they have a claim, they may fill out the Claim Forms and file them by sending them in to the Claims Administrator for the PCC Compensation Plan.

The Claims Process for the PCC Compensation Plan has been designed to make it easy for a person to complete the Claim Forms without the need for assistance from a lawyer. The Claims Process also allows the Claims Administrator to quickly process each claim and decide whether the claim is eligible to be paid. The instructions and questions on the Claim Forms are easy to understand with fill in the blanks and boxes to check.

The Claims Administrator will have a Call Centre offering services in English and French to respond to questions regarding the PCC Compensation Plan and the Claims Process. If a claimant has questions in respect of the Claims Process under the PCC Compensation Plan, they may consult the Claims Administrator's website at [\[URL for website of Claims Administrator\]](#) or call the Claims Administrator's Call Center at [\[Call Centre toll-free number\]](#) or send an email to [\[Claims Administrator's email\]](#). When possible, the Claims Administrator's staff will help persons who wish to submit claims. It is a claimant's responsibility to complete and submit their Claim Forms to the Claims Administrator.

To ensure the integrity and fairness of the Claims Process, persons who submit claims to the PCC Compensation Plan will be asked to declare that the answers they provide on their Claim Forms are true and accurate. Where the Claims Administrator finds evidence of fraud, false information or an intentional misleading of the Claims Administrator, the claim will be disallowed.

PAN-CANADIAN CLAIMANTS' COMPENSATION PLAN

WHEREAS JTI-Macdonald Corp. (“**JTIM**”) is insolvent and was granted protection from its creditors under the *Companies’ Creditors Arrangement Act*, R.S.C. 1985, c. C-36, as amended (“**CCAA**”), pursuant to the Initial Order of the Honourable Justice Hainey of the CCAA Court dated March 8, 2019;

AND WHEREAS Imperial Tobacco Canada Limited (“**ITCAN**”) and Imperial Tobacco Company Limited (“**ITCO**”), collectively “**Imperial**”, are insolvent and were granted protection from their creditors under the CCAA pursuant to the Initial Order of the Honourable Justice McEwen of the CCAA Court dated March 12, 2019;

AND WHEREAS Rothmans, Benson & Hedges Inc. (“**RBH**”) is insolvent and was granted protection from its creditors under the CCAA pursuant to the Initial Order of the Honourable Justice Pattillo of the CCAA Court dated March 22, 2019;

AND WHEREAS by the Initial Orders the CCAA Court appointed Deloitte Restructuring Inc., FTI Consulting Canada Inc. and Ernst & Young Inc. as officers of the CCAA Court and the Monitors respectively of JTIM, Imperial and RBH (“**Monitors**”);

AND WHEREAS by an Order dated April 5, 2019, the CCAA Court appointed the Honourable Warren K. Winkler, K.C. (“**Court-Appointed Mediator**”) as an officer of the Court to, as a neutral third party, mediate a global settlement of the claims by the Claimants;

AND WHEREAS the Court-Appointed Mediator conducted the mediation with the Tobacco Companies and the Claimants;

AND WHEREAS by an Order dated September 27, 2023, the Honourable Chief Justice Geoffrey B. Morawetz directed the Monitors to work with the Court-Appointed Mediator to develop a plan of compromise and arrangement concerning each of JTIM, Imperial and RBH;

AND WHEREAS, subject to the approval of the CCAA Court, the Pan-Canadian Claimants' Compensation Plan ("**PCC Compensation Plan**") has been developed to provide for the payment of compensation directly to eligible Individuals in every Province and Territory who suffer from Lung Cancer, Throat Cancer, or Emphysema/COPD (GOLD Grade III or IV) attributable to smoking cigarettes sold by the Tobacco Companies during a specified period of time, and who are not covered by the class action judgment rendered in favour of the *Blais* Class Members against ITCAN, RBH and JTIM in *Conseil québécois sur le tabac et la santé et Jean-Yves Blais c. Imperial Tobacco Ltée, Rothmans, Benson & Hedges inc. et JTI-MacDonald Corp.* ("**Blais Judgment**");

AND WHEREAS, where appropriate and to the extent possible, the PCC Compensation Plan and the Quebec Administration Plan for the administration of claims by *Blais* Class Members pursuant to the *Blais* Judgment shall be harmonized with each other; and

NOW THEREFORE, set out herein are the terms of the Pan-Canadian Claimants' Compensation Plan that is attached as Schedule "P" to Imperial's CCAA Plan and Schedule "S" to the CCAA Plans of RBH and JTIM.

PART A: INTERPRETATION

SECTION I – INTERPRETATION

1. Definitions

1.1 In this document, including all Appendices hereto, unless otherwise stated or the context otherwise requires:

"Acknowledgement of Receipt" means an acknowledgement sent by the Claims Administrator to a PCC-Claimant or their Legal Representative acknowledging the receipt of documents submitted by them pursuant to the PCC Compensation Plan.

“Acknowledgement of Receipt of Claim Package” means the notice, in the form attached hereto as **Appendix “G”**, sent by the Claims Administrator to a PCC-Claimant or their Legal Representative acknowledging receipt of their Claim Package.

“Administrative Coordinator” means Daniel Shapiro, K.C., in his capacity as the Court-appointed Administrative Coordinator in respect of the administration of both the PCC Compensation Plan and the Quebec Administration Plan. Daniel Shapiro’s appointment as the Administrative Coordinator will be upon the recommendation of the Court-Appointed Mediator and the Monitors and subject to the approval of the CCAA Court.

“Affiliate” means a Person is an affiliate of another Person if,

- (a) one of them is the subsidiary of the other, or
- (b) each of them is controlled by the same Person.

For the purpose of this definition,

- (i) “subsidiary” means a Person that is controlled directly or indirectly by another Person and includes a subsidiary of that subsidiary, and
- (ii) a Person (first Person) is considered to control another Person (second Person) if,
 - (A) the first Person beneficially owns or directly or indirectly exercises control or direction over securities of the second Person carrying votes which, if exercised, would entitle the first Person to elect a majority of the directors of the second Person, unless that first Person holds the voting securities only to secure an obligation,
 - (B) the second Person is a partnership, other than a limited partnership, and the first Person holds more than 50% of the interests of the partnership, or

- (C) the second Person is a limited partnership and the general partner of the limited partnership is the first Person.

“**Alternative Product**” means (i) any device that produces emissions in the form of an aerosol and is intended to be brought to the mouth for inhalation of the aerosol without burning of (a) a substance; or (b) a mixture of substances; (ii) any substance or mixture of substances, whether or not it contains tobacco or nicotine, that is intended for use with or without those devices to produce emissions in the form of an aerosol without burning; (iii) any non-combustible tobacco (other than smokeless tobacco) or nicotine delivery product; and (iv) any component, part, or accessory of or used in connection with any such device or product referred to above.

“**Annual Contributions**” has the meaning given in Article 5, Section 5.7 of the CCAA Plans, and “**Annual Contribution**” means any one of them.

“**Bank**” has the meaning given in Article 5, Section 5.3 of the CCAA Plans.

“**Blais Class Action**” means *Conseil québécois sur le tabac et la santé et al. v. JTI-Macdonald Corp. et al.*, Court File No. 500-06-000076-980 (Montreal, Quebec).

“**Blais Class Members**” means persons who meet the criteria of the following certified class definition in the *Blais Class Action*:

All persons residing in Quebec who satisfy the following criteria:

- (1) To have smoked, between January 1, 1950 and November 20, 1998, a minimum of 12 pack/years of cigarettes manufactured by the defendants (that is, the equivalent of a minimum of 87,600 cigarettes, namely any combination of the number of cigarettes smoked in a day multiplied by the number of days of consumption insofar as the total is equal to or greater than 87,600 cigarettes).

For example, 12 pack/years equals:

20 cigarettes a day for 12 years (20 X 365 X 12 = 87,600) or

30 cigarettes a day for 8 years ($30 \times 365 \times 8 = 87,600$) or
 10 cigarettes a day for 24 years ($10 \times 365 \times 24 = 87,600$);

- (2) To have been diagnosed before March 12, 2012 with:
- (a) Lung cancer or
 - (b) Cancer (squamous cell carcinoma) of the throat, that is to say of the larynx, the oropharynx or the hypopharynx or
 - (c) Emphysema/ COPD (GOLD Grade III or IV).

The group also includes the Heirs of the persons deceased after November 20, 1998 who satisfied the criteria mentioned herein.

“Blais Eligibility Criteria” means the criteria set out in the certified class definition in the *Blais* Class Action which a person must meet to be eligible to receive a Compensation Payment as a *Blais* Class Member.

“Blais Judgment” means the judgment rendered by the Honourable Justice Brian Riordan on May 27, 2015 as rectified on June 9, 2015, and the judgment of the Court of Appeal of Quebec dated March 1, 2019 in the class action commenced in the Quebec Superior Court in Court File No. 500-06-00076-980 (*Conseil québécois sur le tabac et la santé et Jean-Yves Blais c. Imperial Tobacco Ltée, Rothmans, Benson & Hedges Inc. et JTI-MacDonald Corp.*).

“Business Day” means, for the purpose of the PCC Compensation Plan, a day other than Saturday, Sunday or a day observed as a holiday under the laws of the Province or Territory in which the person who needs to take action pursuant to the PCC Compensation Plan is situated, or a holiday under the federal laws of Canada applicable in the said Province or Territory.

“Call Centre” means the call centre established by the Claims Administrator which will offer services in English and French to respond to inquiries from and provide information to PCC-

Claimants and prospective PCC-Claimants, and their Legal Representatives, as applicable, regarding the PCC Compensation Plan and the Claims Process.

“**CCAA**” means the *Companies’ Creditors Arrangement Act*, R.S.C. 1985, c. C-36, as amended.

“**CCAA Court**” means the Ontario Superior Court of Justice (Commercial List) at Toronto.

“**CCAA Plan**” means in respect of each Tobacco Company, the Court-Appointed Mediator’s and Monitors’ plan of compromise and arrangement pursuant to the CCAA concerning, affecting and involving such Tobacco Company, including all Schedules thereto.

“**CCAA Plan Administrators**” has the meaning given in Article 14, Section 14.1 of the CCAA Plans.

“**CCAA Proceeding**” means, in respect of each Tobacco Company, the proceeding commenced by such Tobacco Company pursuant to the CCAA, namely Application No. CV-19-616077-00CL in respect of Imperial, Application No. CV-19-616779-00CL in respect of RBH, and Application No. CV-19-615862-00CL in respect of JTIM, collectively the “**CCAA Proceedings**”.

“**Certificate**” means the certificate filed by the Monitors with the CCAA Court confirming that the full amount of the Upfront Contributions has been received from the Tobacco Companies and deposited into the Global Settlement Trust Account.

“**Checklist**” means the checklist attached hereto as Appendix “H” which the Claims Administrator will use to process the Claim Packages.

“**Claim Form for PCC-Claimant**” means the form attached hereto as Appendix “C” which a PCC-Claimant is required to complete and submit to the Claims Administrator in order to make a PCC Claim to the PCC Compensation Plan.

“**Claim Form for the Legal Representative of a PCC-Claimant**” means the form attached hereto as Appendix “D” which the Legal Representative of a PCC-Claimant is required to complete and

submit to the Claims Administrator in order to make a PCC Claim to the PCC Compensation Plan on behalf of a PCC-Claimant.

“Claim Package” means all of the documents that a PCC-Claimant or a PCC-Claimant’s Legal Representative, as applicable, is required to complete and submit to the Claims Administrator including the Claim Form for PCC-Claimant, Claim Form for the Legal Representative of a PCC-Claimant, Physician Form (only if a pathology report in respect of Lung Cancer or Throat Cancer, or a spirometry report in respect of Emphysema/COPD (GOLD Grade III or IV), is not available), and all medical and other documents requested in the Claim Forms and the Physician Form (if completed).

“Claimants” means, collectively, the Quebec Class Action Plaintiffs, Pan-Canadian Claimants, *Knight* Class Action Plaintiffs, Tobacco Producers, His Majesty the King in right of British Columbia, His Majesty the King in right of Alberta, His Majesty the King in right of Saskatchewan, His Majesty the King in right of Manitoba, His Majesty the King in right of Ontario, the Attorney General of Quebec, His Majesty the King in right of New Brunswick, His Majesty the King in right of Nova Scotia, His Majesty the King in right of Prince Edward Island, His Majesty the King in right of Newfoundland and Labrador, the Government of Yukon, the Government of the Northwest Territories and the Government of Nunavut.

“Claims Administrator” means the claims administrator approved and appointed by the CCAA Court to manage the overall administration of the individual Claims Process and perform all other duties and responsibilities assigned to it in regard to the PCC Compensation Plan. The appointment of Epiq as the Claims Administrator will be upon the recommendation of the Court-Appointed Mediator and the Monitors and subject to the approval of the CCAA Court.

“Claims Process” means the process by which PCC-Claimants may assert PCC Claims for Individual Payments as set forth in the PCC Compensation Plan.

“Compensation Payment” means the amount determined by the Claims Administrator to be payable to an Eligible *Blais* Class Member under the Quebec Administration Plan in satisfaction of their QCAP Claim.

“Contribution Security Agreement” has the meaning given in Article 5, Section 5.13 of the CCAA Plans and is attached to the CCAA Plans as Schedule “E”.

“COPD” means chronic obstructive pulmonary disease (GOLD Grade III or IV). The Global Initiative for Chronic Obstructive Lung Disease (**“GOLD”**) developed a four grade classification system based upon severity of airflow limitation and other diagnostic parameters. The GOLD Grade III (severe) and GOLD Grade IV (very severe) classifications represent the two most severe categories of disease.

“Costs” has the meaning given in paragraph 47.1 of the PCC Compensation Plan.

“Court-Appointed Mediator” means the Honourable Warren K. Winkler, K.C., in his capacity as Court-appointed mediator in the CCAA Proceedings of the Tobacco Companies.

“Cy-près Fund” means the aggregated amount allocated from the Global Settlement Amount payable into the Cy-près Trust Account which shall be administered by the Cy-près Foundation.

“Definitive Documents” means the CCAA Plans, the Sanction Orders, the Contribution Security Agreements, the Hypothec, any intercreditor agreements, the documents required to implement and give effect to the PCC Compensation Plan and the Cy-près Fund, and all other agreements, documents and orders contemplated by, or necessary to implement the transactions contemplated by any of the foregoing.

“Diagnosis” means a PCC-Claimant’s diagnosis of Throat Cancer, Lung Cancer or Emphysema/COPD (GOLD Grade III or IV), and the date of such diagnosis.

“Effective Time” means such time on the Plan Implementation Date as the Court-Appointed Mediator and the Monitors may determine and designate.

“Eligible *Blais* Class Members” means the Tobacco-Victim Claimants and Succession Claimants whom the Claims Administrator has determined meet all the *Blais* Eligibility Criteria such that their Tobacco-Victim Claims and Succession Claims are approved to receive a Compensation

Payment in accordance with the terms of the Quebec Administration Plan, and “**Eligible *Blais* Class Member**” means any one of them.

“**Eligible PCC-Claimants**” means the PCC-Claimants whom the Claims Administrator has determined meet all the PCC Eligibility Criteria such that their PCC Claims are approved for an Individual Payment in accordance with the terms of the PCC Compensation Plan, and “**Eligible PCC-Claimant**” means any one of them.

“**Emphysema**” means the condition of the lung that is marked by distension and eventual rupture of the alveoli with progressive loss of pulmonary elasticity, that is accompanied by shortness of breath with or without cough, and that may lead to impairment of heart action. For the purpose of the PCC Compensation Plan, “Emphysema” includes COPD (GOLD Grade III or IV).

“**Epiq**” means Epiq Class Actions Services Canada, Inc.

“**Exit Report**” means the final report that the Claims Administrator shall be required to submit to the CCAA Plan Administrators within six months, or as soon as is practicable, following the termination of the administration of the PCC Compensation Plan.

“**FEV1**” means the measurement recorded during a spirometry test of the maximum volume of air that the individual can forcibly expel during the first second following maximal inhalation.

“**First Notice**” means the initial notice which the Claims Administrator shall publish regarding the PCC Compensation Plan. Attached hereto as Appendix “A” is a version of the First Notice which is provided for guidance only to assist the understanding of the Claims Administrator which shall be responsible for designing, implementing and managing the PCC Notice Plan pursuant to which prospective PCC-Claimants will be informed about the PCC Compensation Plan and be provided with ongoing notice throughout the PCC Claims Submission Period.

“**First Notice Date**” means the date on which the Claims Administrator publishes the First Notice.

“**Global Settlement Amount**” has the meaning given in Article 5, Section 5.1 of the CCAA Plans.

“Global Settlement Trust Account” has the meaning given in Article 5, Section 5.3 of the CCAA Plans.

“Heir” means:

- (i) a universal legatee to the Estate of a deceased Tobacco-Victim identified in a will in effect at time of death, who is entitled to receive all or a portion of the Compensation Payment payable in respect of the deceased Tobacco-Victim;
- (ii) a particular legatee where the will stipulates that such person is entitled to receive all or a portion of the Compensation Payment payable in respect of the deceased Tobacco-Victim;
- (iii) an heir pursuant to testamentary provisions in a registered marriage contract;
- (iv) an heir of a deceased Tobacco-Victim established by operation of law pursuant to the rules for legal successions contained in the Civil Code of Quebec, and summarized in the chart as Appendix “F” to the Quebec Administration Plan; or
- (v) the estate, testamentary heirs or legal heirs of a deceased Heir, who takes the claim of the deceased Heir by representation;

and **“Heirs”** means all of them. In all cases, proof of such status of Heir must be submitted to the Claims Administrator in a manner consistent with paragraphs 38.5 and 38.6 of the Quebec Administration Plan, as applicable.

“Hypopharynx” means the laryngeal part of the pharynx extending from the hyoid bone to the lower margin of the cricoid cartilage.

“Imperial” means, collectively, ITCAN and ITCO.

“Individual Payment” means the amount determined by the Claims Administrator to be payable to an Eligible PCC-Claimant under the PCC Compensation Plan in satisfaction of their PCC Claim.

“**Individuals**” means all individuals residing in a Province or Territory of Canada, and
 “**Individual**” means any one of them.

“**Initial Order**” means, in respect of each Tobacco Company, the initial order commencing the CCAA Proceedings of the Tobacco Company, as amended and restated from time to time.

“**ITCAN**” means Imperial Tobacco Canada Limited.

“**ITCO**” means Imperial Tobacco Company Limited.

“**JTIM**” means JTI-Macdonald Corp.

“**JTIM TM**” means JTI-Macdonald TM Corp.

“***Knight Class Action***” means *Kenneth Knight v. Imperial Tobacco Canada Limited* (Supreme Court of British Columbia, Court File No. L031300).

“***Knight Class Action Plaintiffs***” means Individuals who meet the criteria of the certified class definition in the *Knight Class Action*. The fact that an Individual is a *Knight Class Action Plaintiff* does not thereby disqualify that Individual from being a Pan-Canadian Claimant.

“**Larynx**” means the upper part of the respiratory passage that is bounded above by the glottis and is continuous below with the trachea.

“**Legal Representative**” means an Individual who establishes through the submission to the Claims Administrator of one of the documents listed in the Claim Form for the Legal Representative of a PCC-Claimant that they have the right and are authorized to make a Submitted PCC Claim on behalf of the PCC-Claimant.

“***Létourneau Class Action***” means *Cecilia Létourneau et al. v. Imperial Tobacco Canada Ltd., et al.*, Court File No. 500-06-000070-983 (Montreal, Quebec).

“Létourneau Class Members” means persons who meet the criteria of the following certified class definition in the *Létourneau Class Action*:

All persons residing in Quebec who, as of September 30, 1998, were addicted to the nicotine contained in the cigarettes made by the defendants and who otherwise satisfy the following criteria:

- (1) They started to smoke before September 30, 1994 and since that date have smoked principally cigarettes manufactured by the defendants;
- (2) Between September 1 and September 30, 1998, they smoked on a daily basis an average of at least 15 cigarettes manufactured by the defendants; and
- (3) On February 21, 2005, or until their death if it occurred before that date, they were still smoking on a daily basis an average of at least 15 cigarettes manufactured by the defendants.

The group also includes the Heirs of the members who satisfy the criteria described herein.

“Lung Cancer” means primary cancer of the lungs.

“Monitor” means, in respect of each Tobacco Company, the Court-appointed monitor appointed pursuant to the applicable Initial Order in the respective CCAA Proceedings.

“Notice of Acceptance of PCC Claim” or **“Notice of Rejection of Claim”** means the Notice, in the form attached hereto as **Appendix “I”**, sent by the Claims Administrator to a PCC Claimant advising that their PCC Claim has been accepted.

“Notice of Rejection of PCC Claim” means the Notice, in the form attached hereto as **Appendix “B”**, issued by the Claims Administrator to a PCC-Claimant advising them that their PCC Claim has been rejected and of the Request for Review.

“Oropharynx” means the part of the pharynx that is below the soft palate and above the epiglottis and is continuous with the mouth. It includes the back third of the tongue, the soft palate, the side and back walls of the throat, and the tonsils.

“Pan-Canadian Claimants”, or **“PCCs”**, means Individuals, excluding *Blais* Class Members and *Létourneau* Class Members in relation to QCAP Claims, who have asserted or may be entitled to assert a PCC Claim.

“Pan-Canadian Claimants’ Compensation Plan”, or **“PCC Compensation Plan”**, means the Pan-Canadian Claimants’ Compensation Plan which provides for the payment of Individual Payments to Eligible PCC-Claimants.

“Parent” means:

- (i) In the case of Imperial, British American Tobacco p.l.c.;
- (ii) In the case of RBH, Philip Morris International Inc.; and
- (iii) In the case of JTIM, JT International Holding B.V.

“PCC Claim” means any claim of any Pan-Canadian Claimant that has been made or may in the future be asserted or made in whole or in part against or in respect of the Released Parties, or any one of them (either individually or with any other Person), that has been advanced, could have been advanced or could be advanced, whether on such Pan-Canadian Claimant’s own account, or on their behalf, or on behalf of a certified or proposed class, to recover damages or any other remedy in respect of the development, design, manufacture, production, marketing, advertising, distribution, purchase or sale of Tobacco Products, including any representations or omissions in respect thereof, the historical or ongoing use of or exposure (whether directly or indirectly) to Tobacco Products or their emissions and the development of any disease or condition as a result thereof, whether existing or hereafter arising, in each case based on, arising from or in respect of any conduct, act, omission, transaction, duty, responsibility, indebtedness, liability, obligation, dealing, fact, matter or occurrence existing or taking place at or prior to the Effective Time

(whether or not continuing thereafter) including, all Claims that have been advanced, could have been advanced or could be advanced in the following actions commenced by individuals under provincial class proceedings legislation and actions commenced by individuals, or in any other similar proceedings:

- (a) *Barbara Bourassa v. Imperial Tobacco Canada Limited et al.* (Supreme Court of British Columbia, Court File No. 10-2780 and Court File No. 14-4722);
- (b) *Roderick Dennis McDermid v. Imperial Tobacco Canada Limited et al.* (Supreme Court of British Columbia, Court File No. 10-2769);
- (c) *Linda Dorion v. Canadian Tobacco Manufacturers' Council et al.* (Alberta Court of Queen's Bench, Court File No. 0901-08964);
- (d) *Thelma Adams v. Canadian Tobacco Manufacturers' Council et al.* (Saskatchewan Court of Queen's Bench, Court File No. 916 of 2009);
- (e) *Deborah Kunta v. Canadian Tobacco Manufacturers' Council et al.* (Manitoba Court of Queen's Bench, Court File No. CI09-01-61479);
- (f) *Suzanne Jacklin v. Canadian Tobacco Manufacturers' Council* (Ontario Superior Court of Justice, Court File No. 53794/12);
- (g) *Ben Semple v. Canadian Tobacco Manufacturers' Council et al.* (Supreme Court of Nova Scotia, Court File No. 312869);
- (h) *Victor Todd Sparkes v. Imperial Tobacco Canada Limited* (Newfoundland and Labrador Supreme Court - Trial Division, Court File No. 200401T2716 CP);
- (i) *Peter Stright v. Imperial Tobacco Canada Limited* (Supreme Court of Nova Scotia, Court File No. 177663);

- (j) *Ljubisa Spasic as estate trustee of Mirjana Spasic v. Imperial Tobacco Limited and Rothmans, Benson & Hedges Inc.* (Ontario Superior Court of Justice, Court File No. C17773/97);
- (k) *Ljubisa Spasic as estate trustee of Mirjana Spasic v. B.A.T. Industries P.L.C.* (Ontario Superior Court of Justice, Court File No. C18187/97);
- (l) *Ragoonanan v. Imperial Tobacco Canada Limited* (Ontario Superior Court of Justice, Court File No. 00-CV-183165-CP00);
- (m) *Scott Landry v. Imperial Tobacco Canada Limited* (Ontario Superior Court of Justice, Court File No. 1442/03);
- (n) *Joseph Battaglia v. Imperial Tobacco Canada Limited* (Ontario Superior Court of Justice, Court File No. 21513/97);
- (o) *Roland Bergeron v. Imperial Tobacco Canada Limited* (Quebec Superior Court, Court File No. 750-32-700014-163);
- (p) *Paradis, in personal capacity and on behalf of estate of Lorraine Trepanier v. Rothmans, Benson & Hedges Inc.* (Quebec Small Claims Court);
- (q) *Couture v. Rothmans, Benson & Hedges Inc.* (Quebec Superior Court); and

including any such Claim that is a Section 5.1(2) Claim or Section 19(2) Claim.

“**PCC-Claimants**” means the Pan-Canadian Claimants who are all Individuals resident in a Province or Territory of Canada, excluding the Quebec Class Action Plaintiffs in relation to QCAP Claims but including the Pan-Canadian Claimants' respective heirs, successors, assigns and representatives, who assert a PCC Claim by submitting a Claim Package to the Claims Administrator pursuant to the PCC Compensation Plan, and “**PCC-Claimant**” means any one of them.

“PCC Claims Application Deadline” means the date twenty-four months after the First Notice Date by which all PCC-Claimants are required to submit their completed Claim Packages to the Claims Administrator. The PCC Claims Application Deadline may be extended by the CCAA Court if it is deemed necessary and expedient to do so as the implementation of the PCC Compensation Plan unfolds.

“PCC Claims Period” means the period of time that extends from March 8, 2015 and March 8, 2019 (inclusive of those dates) during which a PCC-Claimant was diagnosed with a PCC Compensable Disease.

“PCC Claims Submission Period” means the twenty-four month period of time which shall commence on the First Notice Date and shall end on the PCC Claims Application Deadline. The PCC Claims Submission Period may be extended by the CCAA Court if it is deemed necessary and expedient to do so as the implementation of the PCC Compensation Plan unfolds.

“PCC Compensable Diseases” means, collectively, Lung Cancer, Throat Cancer and Emphysema/COPD (GOLD Grade III or IV).

“PCC Compensation Plan Amount” means the aggregate amount allocated from the Global Settlement Amount to be payable into the PCC Trust Account in respect of compensation for Eligible PCC-Claimants as set forth in Article 16, Sections 16.1, 16.2 and 16.3 of the CCAA Plans.

“PCC Eligibility Criteria” has the meaning given in paragraph 31.1 herein.

“PCC Notice Plan” means the plan to publish legal notice regarding the PCC Compensation Plan to prospective PCC-Claimants in the Provinces and Territories and provide the PCC-Claimants with ongoing notice throughout the PCC Claims Submission Period.

“PCC Notices” means the legal notices that will provide notice to prospective PCC-Claimants in the Provinces and Territories regarding the PCC Compensation Plan and provide the PCC-Claimants with ongoing notice throughout the PCC Claims Submission Period.

“PCC Representative Counsel” means The Law Practice of Wagner & Associates, Inc.

“PCC Trust Account” means the designated trust account or trust accounts held in the Bank for the benefit of the Pan-Canadian Claimants and into which the PCC Compensation Plan Amount shall be paid and deposited from the Global Settlement Trust Account.

“Person” means an individual, a corporation, a partnership, a limited liability company, a trust, an unincorporated association, or any other entity or body.

“Personal Information” means any information in any form, including any data which is derived from such information, about an identifiable Individual, whether living or deceased, including information relating to age, address, telephone number, email address, any identifying number assigned to the Individual (including Provincial or Territorial Health Insurance Number), personal health information, medical records, and the Individual’s name where it appears with other Personal Information relating to the Individual, or where the disclosure of the name would reveal other Personal Information about the Individual.

“Physician” means an Individual who is licensed to practice medicine in Canada.

“Physician Form” means the form attached hereto as **Appendix “E”** which may be completed by the treating Physician of a PCC-Claimant, or any other Physician with access to the PCC-Claimant’s medical records, and submitted to the Claims Administrator in order to complete a PCC-Claimant’s Claim Package (only if a pathology report in respect of Lung Cancer or Throat Cancer, or a spirometry report in respect of Emphysema/COPD (GOLD Grade III or IV), is not available).

“Place of Residence” has the meaning given in paragraph 42.1.3 of the PCC Compensation Plan.

“Plan Implementation Date” means the date upon which all of the conditions to the CCAA Plans and other Definitive Documents have been satisfied or waived and the transactions contemplated by the CCAA Plans, the Sanction Orders and the other Definitive Documents are to be

implemented, as evidenced by the Monitors' Certificates to be delivered to the Tobacco Companies and filed with the CCAA Court.

“**Provinces**” means for the purpose of the PCC Compensation Plan, collectively, the geographic regions of British Columbia, Alberta, Saskatchewan, Manitoba, Ontario, Quebec, New Brunswick, Nova Scotia, Prince Edward Island, and Newfoundland and Labrador, and “**Province**” means any one of these geographic regions.

“**QCAP Claim**” means any Claim that has been advanced, could have been advanced or could be advanced in the following class actions or in any other similar proceedings, whether before or after the Effective Time:

- (a) *Conseil québécois sur le tabac et la santé et Jean-Yves Blais c. Imperial Tobacco Ltée, Rothmans, Benson & Hedges Inc. et JTI-MacDonald Corp.* (Quebec Superior Court, Court File No. 500-06-00076-980); and
- (b) *Létourneau c. Imperial Tobacco Ltée, Rothmans Benson & Hedges Inc. et JTI MacDonald Corp.* (Quebec Superior Court, Court File No. 500-06-000070-983),

including the judgment of the Honourable Justice Brian Riordan dated May 27, 2015 as rectified on June 9, 2015, and the judgment of the Court of Appeal of Quebec dated March 1, 2019, and any such Claim that is a Section 5.1(2) Claim or Section 19(2) Claim.

“**Quebec Class Action Administration Plan**”, or “**Quebec Administration Plan**”, means the document (with attached appendices) that is subject to the approval of the CCAA Court setting out the process by which the Quebec Class Action Plaintiffs may submit claims for a Compensation Payment pursuant to the *Blais* Judgment, the process of administering such claims, and the joint oversight and supervision thereof by the CCAA Court and the Superior Court of Quebec.

“**Quebec Class Action Plaintiffs**”, or “**QCAPs**”, means individuals who meet the criteria of the certified class definitions in the Quebec Class Actions.

“**Quebec Class Actions**” means, collectively, (i) *Conseil québécois sur le tabac et la santé et al. v. JTI-Macdonald Corp. et al.*, Court File No. 500-06-000076-980 (Montreal, Quebec), and (ii) *Cecilia Létourneau et al. v. Imperial Tobacco Canada Ltd., et al.*, Court File No. 500-06-000070-983 (Montreal, Quebec).

“**Quebec Class Counsel**” means, collectively, the law practices of Trudel Johnston & Lespérance s.e.n.c., Kugler Kandestin s.e.n.c.r.l., L.L.P., De Grandpré Chait s.e.n.c.r.l., L.L.P., and Fishman Flanz Meland Paquin s.e.n.c.r.l., L.L.P.

“**Raymond Chabot**” means Raymond Chabot Administrateur Provisoire Inc. and its Affiliates.

“**RBH**” means Rothmans, Benson & Hedges Inc.

“**Released Parties**”, collectively, means:

- (a) ITCAN,
- (b) ITCO,
- (c) RBH,
- (d) JTIM,
- (e) British American Tobacco p.l.c.,
- (f) Philip Morris International Inc.,
- (g) JT International Holding B.V.,
- (h) JT International Group Holding B.V.,
- (i) the ITCAN Subsidiaries,

- (j) B.A.T. Investment Finance p.l.c.,
- (k) B.A.T Industries p.l.c.,
- (l) British American Tobacco (Investments) Limited,
- (m) Carreras Rothmans Limited,
- (n) Philip Morris U.S.A. Inc.,
- (o) Philip Morris Incorporated,
- (p) Philip Morris Global Brands Inc.,
- (q) Philip Morris S.A.,
- (r) Rothmans Inc.,
- (s) Ryeseeks p.l.c.,
- (t) Altria Group, Inc.,
- (u) R.J. Reynolds Tobacco Company,
- (v) R.J. Reynolds Tobacco International Inc.,
- (w) RJR Nabisco, Inc.,
- (x) JT International SA,
- (y) JT Canada LLC Inc.,
- (z) Japan Tobacco Inc.,

- (aa) JTIM TM,
- (bb) Canadian Tobacco Manufacturers' Council, and
- (cc) every other current or former Affiliate of any of the companies listed in subparagraphs (a) to (aa) herein, and each of their respective indemnitees,

and **"Released Party"** means any of them. Each Released Party includes their respective Representatives.

"Representatives" means, in respect of a Person, as may be applicable, such Person's past, present or future representatives, predecessors, successors, executors, trustees, heirs, dependents, children, siblings, parents, administrators, executors, directors, officers, shareholders, partners, employees, servants, agents, consultants, legal counsel and advisers, including their respective successors and assigns, and each of their respective directors, officers, partners and employees.

"Request for Review" has the meaning given in paragraph 29.1 of the PCC Compensation Plan and is in the form attached hereto as Appendix "J".

"Residual Funds" means any residual funds that may remain from the PCC Compensation Plan Amount after the payment in full of all Individual Payments to all Eligible PCC-Claimants.

"Retention Period" has the meaning given in paragraph 58.1 of the PCC Compensation Plan.

"Review Officer" means a senior employee or officer of the Claims Administrator who is screened from the Claims Process and whose role is designated solely to review upon an independent basis any Requests for Review that may be submitted to the Claims Administrator by PCC-Claimants and decide whether to confirm, reverse or vary the Claims Administrator's decision.

"Sanction Hearing" means the hearing before the CCAA Court in respect of the Sanction Orders.

“Sanction Orders” means the orders of the CCAA Court, among other things, sanctioning the CCAA Plans of Imperial, RBH and JTIM and granting, approving and declaring the settlements, compromises and releases, as applicable, contemplated by the CCAA Plans.

“Section 5.1(2) Claims” means any Claims against the directors of ITCAN, ITCO, RBH or JTIM that:

- (a) arose before the commencement of the CCAA Proceeding;
- (b) relate to the obligations of ITCAN, ITCO, RBH or JTIM where the directors are by law liable in their capacity as directors for the payment of such obligations; and
- (c) either relate to contractual rights of one or more creditors, or are based on allegations of misrepresentations made by directors to creditors, or of wrongful or oppressive conduct by directors.

“Section 19(2) Claims” means any Claims against ITCAN, ITCO, RBH or JTIM that relate to any of the following debts or liabilities, present or future, to which ITCAN, ITCO, RBH or JTIM is subject on the day on which the CCAA Proceeding commenced, or to which ITCAN, ITCO, RBH or JTIM may become subject before the compromise or arrangement is sanctioned by reason of any obligation incurred by ITCAN, ITCO, RBH or JTIM before the day on which the CCAA Proceeding commenced, unless the compromise or arrangement in respect of ITCAN, ITCO, RBH or JTIM explicitly provides for the Claim’s compromise, and the creditor in relation to that debt has voted for the acceptance of the compromise or arrangement:

- (a) any fine, penalty, restitution order or other order similar in nature to a fine, penalty or restitution order, imposed by a court in respect of an offence;
- (b) any award of damages by a court in civil proceedings in respect of:
 - (i) bodily harm intentionally inflicted, or sexual assault, or

- (ii) wrongful death resulting from an act referred to in subparagraph (i);
- (c) any debt or liability arising out of fraud, embezzlement, misappropriation or defalcation while acting in a fiduciary capacity or, in Quebec, as a trustee or an administrator of the property of others;
- (d) any debt or liability resulting from obtaining property or services by false pretences or fraudulent misrepresentation, other than a debt or liability of the company that arises from an equity claim; or
- (e) any debt for interest owed in relation to an amount referred to in any of paragraphs (a) to (d).

“Smoking History” means the number of pack-years smoked by a PCC-Claimant between January 1, 1950 and November 20, 1998.

“Submitted PCC-Claims” means the claims made by the PCC-Claimants by submitting Claim Packages to the Claims Administrator, and **“Submitted PCC-Claim”** means any one of them.

“Subsidiary” has the meaning attributed thereto in Section 2(5) of the *Canada Business Corporations Act*, R.S.C. 1985, c. C-44, as amended.

“Succession Claim” means the QCAP Claim of a Succession Claimant which is submitted to the Claims Administrator using the Succession Claim Form.

“Succession Claim Form” means the form attached as **Appendix “E”** to the Quebec Administration Plan which a Succession Claimant is required to complete and submit to the Claims Administrator in order to make a Succession Claim pursuant to the Quebec Administration Plan.

“Succession Claimant” means a person who asserts a Succession Claim pursuant to the Quebec Administration Plan.

“Surviving Family Members” means, collectively, the Individuals who are eligible to recover damages for loss of guidance, care and companionship pursuant to the applicable legislation in each jurisdiction which governs surviving family members’ claims for damages, namely: *Family Compensation Act*, RSBC 1996, c. 126; *Fatal Accidents Act*, RSA 2000, c. F-8; *The Fatal Accidents Act*, RSS 1978, c. F-11; *The Fatal Accidents Act*, CCSM, c. F50; *Family Law Act*, RSO 1990, c. F.3; *Civil Code of Quebec*, chapter CCQ-1991; *Fatal Accidents Act*, RSNB 2012, c.104; *Fatal Injuries Act*, RSNS 1989, c. 163; amended 2000, c. 29, ss. 9-12 ; *Fatal Accidents Act*, RSPEI 1988, c. F-5; *Fatal Accidents Act*, RSNL 1990, c F-6; *Fatal Accidents Act*, RSY 2002, c 86; and *Fatal Accidents Act*, RSNWT (Nu) 1988, c F-3. For greater certainty, “Surviving Family Members” does not include the estates of Individuals who fulfill the criteria to receive compensation as a Pan-Canadian Claimant.

“Tax Refund Cash Payments” has the meaning given in Article 5, Section 5.6 of the CCAA Plans.

“Territories” means for the purpose of the PCC Compensation Plan, collectively, the geographic regions of Yukon, Northwest Territories and Nunavut, and **“Territory”** means any one of these geographic regions.

“Throat Cancer” means primary cancer (squamous cell carcinoma) of the Larynx, Oropharynx or Hypopharynx.

“Tobacco Companies” means, collectively, ITCAN, ITCO, RBH and JTIM, and **“Tobacco Company”** means any one of them.

“Tobacco Company Group” means, in respect of a Tobacco Company, the applicable Parent and all other current or former Affiliates, direct or indirect Subsidiaries or parents, of such Tobacco Company, and their respective indemnitees.

“Tobacco Producers” means, collectively, the Ontario Flue-Cured Tobacco Growers’ Marketing Board, Andy J. Jacko, Brian Baswick, Ron Kichler, Arpad Dobrentey and all other tobacco growers and producers who sold their tobacco through the Ontario Flue-cured Tobacco Growers’

Marketing Board pursuant to the annual Heads of Agreement made by the Ontario Flue-cured Tobacco Growers' Board with ITCAN, RBH and JTIM from January 1, 1986 to December 31, 1996, and **"Tobacco Producer"** means any one of them.

"Tobacco Product" means any product made in whole or in part of tobacco that is intended for human consumption or use, including any component, part, or accessory of or used in connection with a tobacco product, including cigarettes, tobacco sticks (intended for smoking and requiring further preparation before they are smoked), loose tobacco intended for incorporation into cigarettes, cigars, cigarillos, pipe tobacco, kreteks, bidis and smokeless tobacco (including chewing tobacco, nasal snuff and oral snuff), but does not include any Alternative Product.

"Tobacco-related Disease" means a disease or other illness or harm caused or contributed to by the use of or exposure (whether directly or indirectly) to a Tobacco Product.

"Tobacco-Victim" means any Individual who suffers or suffered from a Tobacco-related Disease.

"Tobacco-Victim Claim" is the QCAP Claim of a Tobacco-Victim which is submitted to the Claims Administrator using the Tobacco-Victim Claim Form.

"Tobacco-Victim Claim Form" means the form which a Tobacco-Victim Claimant is required to complete and submit to the Claims Administrator in order to make a Tobacco-Victim Claim pursuant to the Quebec Administration Plan.

"Tobacco-Victim Claimant" means a person who asserts a Tobacco-Victim Claim pursuant to the Quebec Administration Plan.

"Twelve Pack-Years" means the equivalent of a minimum of 87,600 cigarettes, namely any combination of the number of cigarettes smoked in a day multiplied by the number of days of consumption insofar as the total is equal to or greater than 87,600 cigarettes. For example, Twelve Pack-Years equals:

- (a) 20 cigarettes a day for 12 years ($20 \times 365 \times 12 = 87,600$); or

- (b) 30 cigarettes a day for 8 years ($30 \times 365 \times 8 = 87,600$); or
- (c) 10 cigarettes a day for 24 years ($10 \times 365 \times 24 = 87,600$).

"**Upfront Contributions**" has the meaning given in Article 5, Section 5.4 of the CCAA Plans, and "**Upfront Contribution**" means any one of them.

2. No Admission of Liability

- 2.1 This document shall not be construed as an admission of liability by the Tobacco Companies or any member of their respective Tobacco Company Group.

3. Form of Documents

- 3.1 Any reference in this document to a notice, form, statutory declaration, acknowledgement, checklist, agreement, application or other document being in a particular form means that such document shall be substantially in such form.

4. Headings

- 4.1 The division of this document into "Sections" and "paragraphs", the insertion of a table of contents and headings, and the appending of Appendices are for the convenience of reference only and do not affect the construction or interpretation of the provisions herein governing the PCC Compensation Plan.

5. Extended Meanings

- 5.1 In this document, the use of words in the singular or plural, or with a particular gender, including a definition, will not limit the scope or exclude the application of any provision of the CCAA Plan or a schedule thereto to such Person (or Persons) or circumstances as the context otherwise permits.

6. Terms of Inclusion

- 6.1 In this document, the words “includes” and “including” and similar terms of inclusion shall not, unless expressly modified by the words “only” or “solely”, be construed as terms of limitation, but rather shall mean “includes but is not limited to” and “including but not limited to”, so that references to included matters shall be regarded as illustrative without being either characterizing or exhaustive.

7. Acts to Occur on Next Business Day

- 7.1 Where any payment, distribution or act pursuant to this document is required to be made or performed on a date that is not a Business Day, then the making of such payment or distribution, or the performance of the act, may be completed on the next succeeding Business Day, but shall be deemed to have been completed as of the required date.

8. Changes to PCC Compensation Plan

- 8.1 No changes, modifications or revisions shall be made to the PCC Compensation Plan without the approval of the CCAA Court as set out in an Order issued by the CCAA Court. The CCAA Plan Administrators, Claims Administrator and PCC Representative Counsel are the only persons who are entitled to apply to the CCAA Court to seek a revision to the terms of the PCC Compensation Plan.
- 8.2 Notwithstanding paragraph 8.1 herein, the Claims Administrator may make revisions to the Claim Forms and PCC Notices which are Schedules to the PCC Compensation Plan provided that (i) the proposed revisions are not substantive and are consistent with the terms of PCC Compensation Plan, (ii) the Claims Administrator has first reviewed the proposed non-substantive revisions with the Administrative Coordinator, and (iii) the Administrative Coordinator has approved such revisions. The Administrative Coordinator shall advise the CCAA Plan Administrators and the PCC Representative Counsel in writing of any revisions made to the Claim Forms.

9. Currency

- 9.1 All monetary amounts referenced in this document are expressed in the lawful currency of Canada.

10. No Other Obligations of Tobacco Companies

- 10.1 As more particularly set forth in Article 18, Sections 18.1.1, 18.1.2, 18.1.3, 18.1.8, 18.1.9 and 18.1.10 of the CCAA Plans and the Claimant Contractual Releases which are Schedule “T” to Imperial’s CCAA Plan and Schedule “W” to the CCAA Plans of RBH and JTIM, at the Effective Time all PCC Claims shall be deemed to be fully, finally, irrevocably and unconditionally released and forever discharged against the Released Parties, and the Released Parties shall have no further liability to the Pan-Canadian Claimants except as set out in the Definitive Documents and this document which gives effect to the PCC Compensation Plan.
- 10.2 For greater certainty, the terms of the CCAA Plans and the Claimant Contractual Releases, and not paragraph 10.1 herein, govern the scope of the release provided to the Released Parties.

11. Appendices

- 11.1 The following Appendices regarding the PCC Compensation Plan are incorporated into this document and form part of it as fully as if contained in the body of this document and must be read in conjunction therewith. In the event of a contradiction between the content of the body of this document and the content of the body of one of the Appendices below, the language of the body of this document shall govern:

Appendix “A”: First Notice to Prospective PCC-Claimants

Appendix “B”: Notice of Rejection of PCC Claim

Appendix “C”: Claim Form for PCC-Claimant

- Appendix “D”: Claim Form for the Legal Representative of a PCC-Claimant
- Appendix “E”: Physician Form
- Appendix “F”: Decision Tree entitled “Determination of whether Canadian Residents qualify to receive Compensation either pursuant to *Blais* Judgment or from Pan-Canadian Claimants’ Compensation Plan”
- Appendix “G”: Acknowledgement of Receipt of Claim Package
- Appendix “H”: Checklist for Claims Administrator
- Appendix “I”: Notice of Acceptance of PCC-Claim
- Appendix “J”: Request for Review
- Appendix “K”: Acknowledgement of Receipt of Request for Review
- Appendix “L”: Brands of Cigarettes sold by Canadian Tobacco Companies in Canada between January 1, 1950 and November 20, 1998

SECTION II – ROLES OF CCAA COURT, ADMINISTRATIVE COORDINATOR AND CLAIMS ADMINISTRATOR

12. Role of CCAA Court

- 12.1 The CCAA Court shall have an ongoing supervisory role in respect of the administration of the CCAA Plans, including the PCC Compensation Plan.
- 12.2 As described in paragraphs 12.2.1 and 12.2.2 herein, the CCAA Court’s oversight of the PCC Compensation Plan shall include the following:
- 12.2.1 The CCAA Court shall determine issues that are specifically referred for resolution to the CCAA Court by the CCAA Plan Administrators. In resolving such referred matters, the CCAA Court may, in its discretion, issue orders and/or provide such directions as are appropriate to facilitate the fair, efficient and timely administration of the PCC Compensation Plan;
- 12.2.2 The CCAA Court shall hear and determine proceedings addressing the following matters:

- 12.2.2.1 A motion by the Court-Appointed Mediator and the Monitors for orders approving and sanctioning the CCAA Plans, which shall include the approval of both the PCC Compensation Plan (Schedule “P” to Imperial’s CCAA Plan and Schedule “S” to RBH’s and JTIM’s CCAA Plans) and the Quebec Administration Plan (Schedule “K” to Imperial’s CCAA Plan and Schedule “N” to RBH’s and JTIM’s CCAA Plans);
- 12.2.2.2 The approval and appointment of the Claims Administrator;
- 12.2.2.3 The approval and appointment of the Administrative Coordinator;
- 12.2.2.4 The approval of the PCC Notice Plan;
- 12.2.2.5 The approval of the budget prepared and submitted by the Claims Administrator for the claims administration of the PCC Compensation Plan; and
- 12.2.2.6 Any matters which are referred for determination by the CCAA Court.

13. Role of Administrative Coordinator

- 13.1 The Administrative Coordinator’s role in regard to the administration of the PCC Compensation Plan and the administration of the Quebec Administration Plan is as follows:
 - 13.1.1 The Administrative Coordinator will coordinate and serve as a liaison and conduit to facilitate the flow of information between the Claims Administrator and the CCAA Plan Administrators in regard to both the PCC Compensation Plan and the Quebec Administration Plan. Where the Claims Administrator requires directions from either the CCAA Plan Administrators directly, or from the CCAA Court through the CCAA Plan Administrators in regard to the PCC Compensation Plan, the Administrative Coordinator will bring the Claims

Administrator's request to the CCAA Plan Administrators and notify the PCC Representative Counsel;

- 13.1.2 The Administrative Coordinator may also assist the Claims Administrator to address issues that may arise from time to time in the interpretation, implementation and ongoing administration of the PCC Compensation Plan and that, in the opinion of the Administrative Coordinator, (i) are possible of resolution short of obtaining direction from the CCAA Court, (ii) where such an approach is appropriate in the circumstances, and (iii) where the resolution of the issue does not require the sanction of either the CCAA Plan Administrators or the CCAA Court, as the case may be; and
- 13.1.3 If the Administrative Coordinator and the Claims Administrator are unable to resolve an issue relating to the PCC Compensation Plan, then the Administrative Coordinator will refer the matter to the CCAA Plan Administrators who may, in their discretion, refer the matter to the CCAA Court for resolution or directions in accordance with paragraph 12.2 herein. The CCAA Plan Administrators will advise the PCC Representative Counsel of all such matters that they refer jointly to the CCAA Court; and
- 13.1.4 The Administrative Coordinator may also work with the Claims Administrator to coordinate the harmonization of the claims administration of the PCC Compensation Plan and the claims administration of the *Blais* Judgment under the Quebec Administration Plan in accordance with the harmonization principles set out in Section VII herein.

14. Costs of Administrative Coordinator

- 14.1 All fees, costs, disbursements, expenses and other expenditures of the Administrative Coordinator, including for the services of any legal or other advisors, shall be paid directly by the Tobacco Companies and shall not be deducted from the PCC Compensation Plan Amount or the QCAP Settlement Amount.

15. Appointment and Court Approval of Claims Administrator

- 15.1 The Court-Appointed Mediator and the Monitors recommend that Epiq be approved by the CCAA Court, and appointed by Order of the CCAA Court at the Sanction Hearing, as the Claims Administrator to manage the administration of the claims processes for both the Quebec Administration Plan and the PCC Compensation Plan.
- 15.2 The Claims Administrator shall be neutral and independent from the Quebec Class Action Plaintiffs (including the *Blais* Class Members and the *Létourneau* Class Members), Quebec Class Counsel, Raymond Chabot, Pan-Canadian Claimants, PCC Representative Counsel, Tobacco Companies, Claimants, CCAA Plan Administrators, Administrative Coordinator and Court-Appointed Mediator. The Claims Administrator may, in its discretion, retain its own legal or other advisors.
- 15.3 In respect of all decisions regarding the implementation and execution of the PCC Compensation Plan, the Claims Administrator shall not collaborate or consult with or seek any advice, instructions or directions from the PCC Representative Counsel. Notwithstanding the foregoing, the PCC Representative Counsel may communicate with the Claims Administrator to the full extent necessary for the PCC Representative Counsel to carry out their duties and responsibilities to the PCCs.

16. Provision of Services in English and French

- 16.1 The Claims Administrator shall provide services including the forms and documents that are Appendix “A” through Appendix “L” hereto, in both English and French. All communications between the Claims Administrator and the PCC-Claimants shall be in the official language chosen by the PCC-Claimants.

17. Costs of Claims Administrator

- 17.1 All fees, costs, disbursements, expenses and other expenditures of the Claims Administrator, including for the services of any legal or other advisors, shall be paid

directly by the Tobacco Companies and shall not be deducted from the PCC Compensation Plan Amount.

- 17.2 The costs, fees and disbursements incurred by the Claims Administrator in respect of the administration of the PCC Compensation Plan shall not exceed the amount which is allocated for the budget of the Claims Administrator set out in the written agreement to be entered into between the CCAA Plan Administrators and the Claims Administrator.

18. Role and Costs of PCC Representative Counsel

- 18.1 The PCC Representative Counsel has a traditional solicitor-client relationship with the Pan-Canadian Claimants and a duty to act in the best interests of all Pan-Canadian Claimants in regard to the Claims Process.
- 18.2 The PCC Representative Counsel may assist PCC-Claimants to complete and submit their Claim Package to the Claims Administrator.
- 18.3 Epiq will perform the role of agent for the PCC Representative Counsel.
- 18.4 Subject to the approval of the CCAA Plan Administrators, all fees, costs, disbursements, expenses and other expenditures of the PCC Representative Counsel relating to the administration of the Claims Process, including any amounts expended for the services of any advisors or agents, including Epiq, shall be paid directly by the Tobacco Companies and shall not be deducted from the PCC Compensation Plan Amount. The PCC Representative Counsel shall not charge any PCC-Claimant for services that they provide relating to the processing of the PCC-Claimant's Claim.
- 18.5 While no appeals, requests for review, or requests for direction to the CCAA Court shall be permitted to be brought in respect of individual PCC Claims under the PCC Compensation Plan, in the event an issue arises that is of significant general application to the Claims Process for PCC-Claimants as a whole, the PCC Representative Counsel shall in the first instance attempt to resolve the issue informally with the Administrative Co-

ordinator and Claims Administrator. If the issue cannot be resolved informally, then, subject to section 8.1, the PCC Representative Counsel may bring a request for direction to the CCAA Court for determination.

- 18.6 The PCC Representative Counsel may liaise with the Claims Administrator and/or the Administrative Coordinator regarding matters relating to the PCC Compensation Plan and its implementation, including informing them of any difficulties faced by PCC-Claimants as a whole in connection with the Claims Process and making suggestions in that regard.

PART B: PAN-CANADIAN CLAIMANTS' COMPENSATION PLAN

SECTION I – NOTICE OF PCC COMPENSATION PLAN

19. Duties and Responsibilities of Claims Administrator

- 19.1 The Claims Administrator will design the PCC Notice Plan which must effectively reach prospective PCC-Claimants and capture their attention with notices communicated in clear, concise, plain language so that they fully understand their rights and options (“**PCC Notices**”). The PCC Notice Plan may include communications in newspapers, other print media, television, radio, social media, other digital media and direct communications where appropriate in order to reach as many prospective PCC-Claimants across Canada as possible. The PCC Notice Plan shall be subject to CCAA Court approval.
- 19.2 The Claims Administrator shall implement and manage the PCC Notice Plan pursuant to which prospective PCC-Claimants will be informed about the PCC Compensation Plan and be provided with ongoing notice throughout the PCC Claims Submission Period.
- 19.3 The PCC Notices shall:
- 19.3.1 Provide a description of the PCC Compensation Plan to prospective PCC-Claimants, including the PCC Eligibility Criteria;

- 19.3.2 Provide prospective PCC-Claimants with notice of the date upon which the PCC Claims Submission Period commences, as well as the PCC Claims Application Deadline;
- 19.3.3 Explain the Claims Process and invite prospective PCC-Claimants to submit a completed Claim Package to the Claims Administrator; and
- 19.3.4 Provide contact information for the Claims Administrator, including the URL for the Claims Administrator's website which will contain links to the forms comprising the Claim Package, and the telephone number for the Call Centre.

20. Form and Content of PCC Notices

- 20.1 All PCC Notices shall be published in both English and French.
- 20.2 The **First Notice** to prospective PCC-Claimants notifying them of the CCAA Court's approval of the PCC Compensation Plan, the commencement of the PCC Claims Submission Period, the Claims Process and the PCC Claims Application Deadline for PCC-Claimants to submit their completed Claim Package to the Claims Administrator is subject to the approval of the CCAA Court as part of the approval of the Notice Plan. Attached hereto as **Appendix "A"** is a version of the First Notice that is provided for guidance only to assist the understanding of the Claims Administrator which shall be responsible for designing, implementing and managing the PCC Notice Plan pursuant to which prospective PCC-Claimants will be informed about the PCC Compensation Plan and be provided with ongoing notice throughout the PCC Claims Submission Period.

21. Costs of PCC Notice Plan

- 21.1 The PCC Notice Plan shall include the budget for all services to be rendered by the Claims Administrator in connection with the PCC Notice Plan, as well as the costs to publish notice to prospective PCC-Claimants in all Provinces and Territories through communications in newspapers, other print media, television, radio, social media, other digital media and direct

communications where appropriate. The budget for the PCC Notice Plan shall be subject to the approval of the CCAA Court.

- 21.2 All fees, disbursements, costs and other expenses associated with the PCC Notice Plan shall be paid directly by the Tobacco Companies and shall not be deducted from the PCC Compensation Plan Amount.
- 21.3 The costs, fees and disbursements incurred by the Claims Administrator in connection with the PCC Notice Plan shall not exceed the amount which is allocated for the PCC Notice Plan in the budget of the Claims Administrator set out in the written agreement to be entered into between the CCAA Plan Administrators and the Claims Administrator.

SECTION II – COMMUNICATIONS BY CLAIMS ADMINISTRATOR

22. Duties and Responsibilities of Claims Administrator

- 22.1 The Claims Administrator shall establish and operate a toll-free Call Centre providing services in English and French to respond to inquiries from and provide information to PCC-Claimants and prospective PCC-Claimants, and their Legal Representatives as applicable, regarding the PCC Compensation Plan and the Claims Process. The Call Centre shall operate from 9:00 a.m. to 9:00 p.m. Eastern Time, Monday to Friday, or such further extended hours as may be determined by the Claims Administrator to be necessary for the efficient administration of the PCC Compensation Plan.
- 22.2 The Claims Administrator shall develop, host, maintain and manage an accessible website where PCC-Claimants and prospective PCC-Claimants, and their Legal Representatives as applicable, may access:
 - 22.2.1 Information, documents, and Frequently Asked Questions and Answers regarding the PCC Compensation Plan and the Claims Process;

- 22.2.2 Updates regarding the Claims Administrator's progress in administering the PCC Compensation Plan and an explanation for any delays in processing the PCC-Claims;
- 22.2.3 Information regarding the status of their PCC Claim; and
- 22.2.4 Contact information for the Claims Administrator.

SECTION III – PCC CLAIMS SUBMISSION PERIOD AND PCC CLAIMS APPLICATION DEADLINE

23. PCC Claims Submission Period and PCC Claims Application Deadline

- 23.1 The PCC Claims Submission Period shall commence on the First Notice Date and run for twenty-four months until the PCC Claims Application Deadline. The PCC Claims Submission Period may be extended by the CCAA Court if it is deemed necessary and expedient to do so as the implementation of the PCC Compensation Plan unfolds.
- 23.2 All Claim Packages must be submitted to the Claims Administrator:
 - 23.2.1 Online at [\[insert URL for website of Claims Administrator\]](#) by no later than 5:00 p.m. Pacific Time on the PCC Claims Application Deadline;
 - 23.2.2 By email to [\[insert Claims Administrator's email address\]](#) by no later than 5:00 p.m. Pacific Time on the PCC Claims Application Deadline;
 - 23.2.3 By facsimile transmission to [\[insert fax number of Claims Administrator\]](#) by no later than 5:00 p.m. Pacific Time on the PCC Claims Application Deadline;
or
 - 23.2.4 If sent by registered mail to the following address [\[insert address of Claims Administrator\]](#), postmarked by no later than the PCC Claims Application Deadline.

- 23.3 Any Claim Packages, or forms or documents comprising parts of Claim Packages, submitted to the Claims Administrator after 5:00 p.m. Pacific Time on the PCC Claims Application Deadline shall not be accepted by the Claims Administrator which shall send to the PCC-Claimant a **Notice of Rejection of Claim** in the form set out in **Appendix “B”**.

SECTION IV – SUBMISSION OF PCC CLAIMS

24. Claim Package required to be submitted to Claims Administrator by PCC-Claimants

- 24.1 The Claims Administrator will contribute to the design and customization of the Claims Process that will be used to administer the PCC Claims of prospective PCC-Claimants under the PCC Compensation Plan, which shall be subject to CCAA Court approval.
- 24.2 To make a PCC Claim to the PCC Compensation Plan, a PCC-Claimant shall be required to submit to the Claims Administrator by the PCC Claims Application Deadline a Claim Package comprised of all the following fully completed documents:
- 24.2.1 The **Claim Form for PCC-Claimant** in the form set out in **Appendix “C”** or, if a Legal Representative of the PCC-Claimant is assisting the PCC-Claimant to submit their PCC Claim, the **Claim Form for the Legal Representative of a PCC-Claimant** in the form set out in **Appendix “D”** with all requested documents attached to establish that the Legal Representative has the right and is duly authorized to make a PCC Claim on behalf of the PCC-Claimant; and
- 24.2.2 As applicable, the proof of diagnosis during the PCC Claims Period of Lung Cancer or Throat Cancer which meets the requirements of paragraphs 35.1 or 35.2 herein, or the proof of diagnosis during the PCC Claims Period of Emphysema/COPD (GOLD Grade III or IV) which meets the requirements of paragraphs 36.1 or 36.2 herein.
- 24.3 PCC-Claimants may submit their Claim Package:

- 24.3.1 Online on the website of the Claims Administrator at [\[insert URL for website of Claims Administrator\]](#) by no later than 5:00 p.m. Pacific Time on the PCC Claims Application Deadline;
 - 24.3.2 By email to [\[insert Claims Administrator's email address\]](#) by no later than 5:00 p.m. Pacific Time on the PCC Claims Application Deadline;
 - 24.3.3 By facsimile transmission to [\[insert fax number of Claims Administrator\]](#) by no later than 5:00 p.m. Pacific Time on the PCC Claims Application Deadline;
or
 - 24.3.4 By registered mail, to the following address [\[insert address of Claims Administrator\]](#), postmarked by no later than 5:00 p.m. Pacific Time on the PCC Claims Application Deadline.
- 24.4 The Claims Administrator shall develop a process to receive and manage Claim Packages submitted by PCC-Claimants in writing by registered mail, by fax, via fillable pdf or other online format, or via scanned email at the choice of the PCC-Claimants.
- 24.5 Any Claim Packages, or forms or documents comprising parts of Claim Packages, submitted to the Claims Administrator after 5:00 p.m. Pacific Time on the PCC Claims Application Deadline shall not be accepted by the Claims Administrator which shall send to the PCC-Claimant or their Legal Representative, as applicable, a **Notice of Rejection of Claim** in the form set out in **Appendix “B”**.

SECTION V – PROCESSING OF CLAIMS

25. Decision Tree for Claims Administrator

- 25.1 **Appendix “F” is the Decision Tree entitled “Determination of whether Canadian Residents qualify to receive Compensation either pursuant to *Blais* Judgment or from Pan-Canadian Claimants’ Compensation Plan” that will guide the Claims**

Administrator in the determination of whether (i) a PCC-Claimant meets the PCC Eligibility Criteria to be an Eligible PCC-Claimant who will receive an Individual Payment, or (ii) a Tobacco-Victim Claimant or Succession Claimant meets the *Blais* Eligibility Criteria to be an Eligible *Blais* Class Member who will receive a Compensation Payment.

- 25.2 For greater certainty, the Decision Tree is not to be used by the CCAA Court or any Individual in the interpretation of the PCC Compensation Plan or the Quebec Administration Plan in the event of a dispute.

26. Determination of PCC Claims in Writing

- 26.1 The Claims Administrator shall determine whether a PCC-Claimant is eligible to receive an Individual Payment based upon the review of the information provided by the PCC-Claimant in writing in the Claim Package.
- 26.2 In determining the eligibility of a PCC-Claimant to receive an Individual Payment, the Claims Administrator shall not conduct any hearing.

27. Review and Determination of PCC Claims by Claims Administrator

- 27.1 Upon receipt of a Claim Package, the Claims Administrator shall send an **Acknowledgement of Receipt of Claim Package** to the PCC-Claimant in the form set out in **Appendix “G”**.
- 27.2 The Claims Administrator shall use a **Checklist** in the form set out in **Appendix “H”** in order to determine whether a PCC-Claimant meets each of the PCC Eligibility Criteria.
- 27.3 The Claims Administrator shall develop and implement procedures for preventing and identifying duplicate or fraudulent PCC-Claims.

- 27.4 If a Claim Package is incomplete and the missing information is straightforward, the Claims Administrator may contact the PCC-Claimant or Physician, as applicable, verbally or in writing to invite the PCC-Claimant or Physician, as applicable, to provide the missing information for insertion by the Claims Administrator on the applicable form in the Claim Package within a specified time period which shall not extend past the PCC Claims Application Deadline.
- 27.5 If the Claims Administrator determines that a PCC-Claimant meets all the PCC Eligibility Criteria, the Claims Administrator shall issue a **Notice of Acceptance of PCC Claim**, in the form set out in **Appendix “I”**, which advises that the PCC Claim has been accepted. The Notice of Acceptance of PCC Claim shall: (i) indicate the maximum amount of the Individual Payment that may be payable; (ii) advise that the actual quantum of the Individual Payment that will be paid to the PCC-Claimant will be determined on a *pro rata* basis between all PCC-Claimants based on the number of PCC Claims approved and the amount available for distribution to PCC-Claimants after all claims have been received, reviewed and processed by the Claims Administrator; and (iii) advise that it is anticipated that the distribution of Individual Payments to PCC-Claimants will commence after the PCC Claims Application Deadline.
- 27.6 If a PCC-Claimant does not meet all the PCC Eligibility Criteria, the Claims Administrator shall issue a **Notice of Rejection of PCC Claim** in the form set out in **Appendix “B”** which clearly states the reason for the rejection of the PCC Claim.
- 27.7 The Claims Administrator will advise the PCC Representative Counsel of the decision made in respect of each Claim Package submitted to the Claims Administrator.

28. Death of PCC-Claimant after Submission of Claim Package

- 28.1 If the Claims Administrator receives notice that a PCC-Claimant has died after they submitted their Claim Package to the Claims Administrator but before they received an Individual Payment, the Claims Administrator shall complete the review of the Claim Package. If the Claims Administrator determines that the PCC-Claimant meets the PCC

Eligibility Criteria, then the Claims Administrator shall make the Individual Payment payable to the estate of the PCC-Claimant.

29. Review of Rejected PCC Claims by Review Officer

- 29.1 When the Claims Administrator issues a Notice of Rejection of PCC Claim, the PCC-Claimant shall also be sent a **Request for Review** in the form set out in **Appendix “J”**.
- 29.2 A PCC-Claimant who has received a Notice of Rejection of PCC Claim shall have sixty days from the date that the Claims Administrator issues the Notice of Rejection of PCC Claim to submit a completed Request for Review and any supporting documents to the Claims Administrator. The PCC-Claimant’s Request for Review shall contain a statement clearly identifying the error which they allege was made by the Claims Administrator in the review of their PCC Claim. If the PCC-Claimant fails to identify the alleged error, the PCC Claim will not be reviewed by the Review Officer.
- 29.3 Upon receipt of a Request for Review, the Claims Administrator shall send an **Acknowledgement of Receipt of Request for Review** to the PCC-Claimant in the form set out in **Appendix “K”**.
- 29.4 The Claims Administrator shall designate a Review Officer to conduct an independent review of (i) the Claim Package submitted by a PCC-Claimant, or the Legal Representative of a PCC-Claimant, who has requested a review of the Claims Administrator’s decision, and (ii) the Request for Review and any supporting documents submitted by the PCC-Claimant, or the Legal Representative of a PCC-Claimant. The Review Officer shall either confirm, reverse or vary the Claims Administrator’s decision and issue a Notice of Rejection of PCC Claim or Notice of Acceptance of PCC Claim to the PCC-Claimant or the Legal Representative of a PCC-Claimant, as applicable.

30. Finality of Decisions of Claims Administrator and Review Officer

- 30.1 The decisions of the Claims Administrator and the Review Officer shall be final and binding without recourse to any Court or other forum or tribunal. For greater certainty, there is no right of appeal, judicial review, judicial recourse or other access to the CCAA Court or any other court in any Province or Territory from any decision of the Claims Administrator or the Review Officer.

SECTION VI – ELIGIBILITY CRITERIA AND AMOUNT OF COMPENSATION PAYABLE TO PCC-CLAIMANTS

31. Criteria for Entitlement to Compensation

- 31.1 To be eligible to receive compensation under the PCC Compensation Plan, the PCC-Claimant must meet all of the following criteria (“**PCC Eligibility Criteria**”):

- 31.1.1 On the date that a PCC-Claimant submits their Claim Package:

31.1.1.1 If the PCC-Claimant is alive, they must reside in a Province or Territory in Canada, or

31.1.1.2 If the PCC-Claimant is deceased, they must have resided in a Province or Territory in Canada on the date of their death;

- 31.1.2 The PCC-Claimant was alive on March 8, 2019;

- 31.1.3 Between January 1, 1950 and November 20, 1998, the PCC-Claimant smoked a minimum of Twelve Pack-Years of cigarettes sold by the Tobacco Companies:

Twelve Pack-Years of cigarettes is the equivalent of 87,600 cigarettes which is calculated as any combination of the number of cigarettes smoked in a day multiplied by the number of days of consumption. For example, Twelve Pack-Years equals:

10 cigarettes smoked per day for 24 years ($10 \times 365 \times 24$) = 87,600 cigarettes,
or

20 cigarettes smoked per day for 12 years ($20 \times 365 \times 12$) = 87,600 cigarettes,
or

30 cigarettes smoked per day for 8 years ($30 \times 365 \times 8$) = 87,600 cigarettes;

31.1.4 Between March 8, 2015 and March 8, 2019 (inclusive of those dates), the PCC-Claimant was diagnosed with:

31.1.4.1 Lung Cancer, or

31.1.4.2 Throat Cancer, or

31.1.4.3 Emphysema/COPD (GOLD Grade III or IV) (collectively, the “**PCC Compensable Diseases**”);

and

31.1.5 On the date of the diagnosis with a PCC Compensable Disease the PCC-Claimant resided in a Province or Territory in Canada.

31.2 The brands of cigarettes sold by the Tobacco Companies in Canada between January 1, 1950 and November 20, 1998 include the brands and sub-brands listed in **Appendix “L”** hereto.

32. Individuals who do not meet PCC Eligibility Criteria

32.1 The estates of Individuals who died prior to March 8, 2019 are not eligible to receive direct compensation under the PCC Compensation Plan.

32.2 The estate of an Individual who died on or after March 8, 2019 would qualify to receive direct compensation under the PCC Compensation Plan subject to the terms hereof.

- 32.3 Surviving Family Members in their own capacity are not eligible to submit a PCC Claim or receive direct compensation under the PCC Compensation Plan.

33. Proof that PCC-Claimant meets PCC Eligibility Criteria

- 33.1 To establish eligibility to receive an Individual Payment under the PCC Compensation Plan, the Smoking History and Diagnosis of the PCC-Claimant must be proven.

34. Proof of Smoking History

- 34.1 The Smoking History of a PCC-Claimant shall be proven by the statements made in the Claim Form for PCC-Claimant or the Claim Form for the Legal Representative of a PCC-Claimant, as applicable, stating when the PCC-Claimant started smoking cigarettes, providing an estimate of the number of cigarettes the PCC-Claimant smoked per day per year, and identifying which of the brands of cigarettes sold by the Tobacco Companies in Canada the PCC-Claimant smoked between January 1, 1950 and November 20, 1998, the complete list of which (including all sub-brands) is set out in **Appendix “L”**.

35. Proof of Diagnosis of Lung Cancer or Throat Cancer

- 35.1 A PCC-Claimant’s Diagnosis of Lung Cancer or Throat Cancer shall be proven by the submission to the Claims Administrator of a copy of a pathology report which confirms that the PCC-Claimant was diagnosed with Lung Cancer or Throat Cancer, as applicable, between March 8, 2015 and March 8, 2019 (inclusive of those dates).
- 35.2 If the PCC-Claimant is unable to provide a pathology report as specified in paragraph 35.1 herein, then they must submit to the Claims Administrator one of the following documents to prove the Diagnosis of Lung Cancer or Throat Cancer:
- 35.2.1 A copy of an extract from a medical file of the PCC-Claimant confirming the diagnosis of Lung Cancer or Throat Cancer between March 8, 2015 and March 8, 2019;

- 35.2.2 A completed Physician Form in the form attached hereto as **Appendix “E”**; or
- 35.2.3 A written statement, in a form and content acceptable to the Claims Administrator, from a Physician of the PCC-Claimant, or another physician having access to the medical record, confirming the diagnosis of Lung Cancer or Throat Cancer between March 8, 2015 and March 8, 2019 and providing at least one of the following records to verify the diagnosis and date of diagnosis: pathology report, operative report, biopsy report, MRI report, CT scan report, PET scan report, x-ray report and/or sputum cytology report.

36. Proof of Diagnosis of Emphysema/COPD (GOLD Grade III or IV)

- 36.1 A PCC-Claimant’s diagnosis of Emphysema/COPD (GOLD Grade III or IV) between March 8, 2015 and March 8, 2019 (inclusive of those dates) shall be proven by the submission to the Claims Administrator of a copy of a report of a spirometry test performed on the PCC-Claimant between March 8, 2015 and March 8, 2019, that first demonstrated a FEV1 (non-reversible) of less than 50% of the predicted value.
- 36.2 If the PCC-Claimant is unable to provide a spirometry test report as specified in paragraph 36.1 herein, then they must submit to the Claims Administrator one of the following documents to prove the Diagnosis of Emphysema/COPD (GOLD Grade III or IV):
 - 36.2.1 A copy of an extract from a medical file of the PCC-Claimant confirming the diagnosis of Emphysema/COPD (GOLD Grade III or IV) between March 8, 2015 and March 8, 2019;
 - 36.2.2 A completed Physician Form in the form attached hereto as **Appendix “E”**; or
 - 36.2.3 A written statement, in a form and content acceptable to the Claims Administrator, from Physician of the PCC-Claimant, or another physician having access to the medical record, confirming the diagnosis of Emphysema/COPD (GOLD Grade III or IV) between March 8, 2015 and March 8, 2019 providing at least one of

the following records to verify the diagnosis and date of diagnosis: spirometry report or CT scan report.

37. Proof of Status of Legal Representative of a PCC-Claimant

- 37.1 The Legal Representative for a PCC-Claimant shall prove their status to make a PCC Claim on behalf of the PCC-Claimant by the information contained in the Claim Form for the Legal Representative of PCC-Claimant and the documents attached thereto.

38. Reduction for Contributory Negligence

- 38.1 The quantum of the Individual Payment (see **Table 1** in paragraph 40.1 below) payable to a PCC-Claimant who meets all the PCC Eligibility Criteria will depend upon the date on which the PCC-Claimant started smoking the Tobacco Companies' cigarettes as follows:

38.1.1 A PCC-Claimant who started to smoke the Tobacco Companies' cigarettes *before* January 1, 1976 will be eligible to receive 100% of the compensation available under the PCC Compensation Plan, or such prorated amount as may be payable pursuant to paragraph 40.1 herein; and

38.1.2 A PCC-Claimant who started to smoke the Tobacco Companies' cigarettes *on or after* January 1, 1976 will be designated as being 20% contributorily negligent and eligible to receive 80% of the compensation available under the PCC Compensation Plan, or such prorated amount as may be payable pursuant to paragraph 40.1 herein.

39. Where PCC-Claimant diagnosed with more than one PCC Compensable Disease

- 39.1 Where a PCC-Claimant meets all of the PCC Eligibility Criteria but has been diagnosed with more than one PCC Compensable Disease, they shall be paid for the single PCC Compensable Disease with which they have been diagnosed that will provide them with the highest amount of compensation under the PCC Compensation Plan. No "double

recovery” or overlapping recovery will be permitted if a PCC-Claimant has been diagnosed with more than one PCC Compensable Disease.

40. Quantum of Compensation payable to PCC-Claimants

40.1 The Claims Administrator shall review the Claim Packages and will decide whether the PCC-Claimants fulfill the PCC Eligibility Criteria such that they are eligible to receive an Individual Payment as set out in the Compensation Grid in **Table 1** below. An Individual who meets all the PCC Eligibility Criteria shall be paid for the single PCC Compensable Disease with which they have been diagnosed that will provide them with the highest amount of compensation from the PCC Compensation Plan. No “double recovery” or overlapping recovery will be permitted if a PCC-Claimant has been diagnosed with more than one PCC Compensable Disease. The quantum of the payments indicated in subparagraphs 40.1.1 through 40.1.3 and **Table 1** may be reduced on a *pro rata* basis based upon the actual take-up rate and other factors:

40.1.1 If the PCC-Claimant was diagnosed with Emphysema/COPD (GOLD Grade III or IV), they will be paid \$14,400 or \$18,000, or such pro-rated amount as may be payable pursuant to paragraph 52.1 herein;

40.1.2 If the PCC-Claimant was diagnosed with Lung Cancer, they will be paid \$48,000 or \$60,000, or such pro-rated amount as may be payable pursuant to paragraph 52.1 herein; and

40.1.3 If the PCC-Claimant was diagnosed with Throat Cancer, they will be paid \$48,000 or \$60,000, or such pro-rated amount as may be payable pursuant to paragraph 52.1 herein.

Table 1

Disease(s) with which PCC-Claimant was diagnosed	Individual Payment (or such lesser amount as may be determined by the Claims Administrator to be available for the subclass of PCC-Claimants; quantum will vary based upon the actual take-up rate and other factors and shall not exceed the maximum amounts specified in this table)	
	Compensation for PCC-Claimants who started smoking before January 1, 1976	Compensation for PCC-Claimants who started smoking on or after January 1, 1976
Emphysema/COPD (GOLD Grade III or IV)	\$18,000	\$14,400
Lung Cancer	\$60,000	\$48,000
Throat Cancer	\$60,000	\$48,000

- 40.2 The amounts of the Individual Payments to Eligible PCC-Claimants shall not exceed the maximum amounts specified in **Table 1** above.
- 40.3 The amounts payable to Eligible PCC-Claimants under the PCC Compensation Plan are inclusive of any prejudgment interest, postjudgment interest and any other amounts that may be claimed by Eligible PCC-Claimants.

SECTION VII – HARMONIZATION OF PCC COMPENSATION PLAN WITH CLAIMS PROCESS FOR *BLAIS* CLASS MEMBERS

41. Claims Administrator is responsible for Harmonization

- 41.1 The Claims Administrator shall harmonize the claims administration of the *Blais* Judgment and the claims administration of the PCC Compensation Plan in accordance with the harmonization principles set out in this Section for the purpose of ensuring that a resident of Quebec is not paid a Compensation Payment under the Quebec Administration Plan

pursuant to the *Blais* Judgment as well as an Individual Payment from the PCC Compensation Plan. An individual resident in Quebec is only permitted to make one claim for compensation either as a *Blais* Class Member under the Quebec Administration Plan or as a PCC-Claimant under the PCC Compensation Plan. A Quebec resident is not permitted to make a claim to both Claims Processes.

42. Determination of Residency

42.1 For the purpose of the administration of the Tobacco-Victim Claims and Succession Claims under the Quebec Administration Plan pursuant to the *Blais* Judgment and the PCC Claims under the PCC Compensation Plan:

42.1.1 If an Individual does not reside in Canada both on the date of their diagnosis with a PCC Compensable Disease and on the date on which they submit their PCC Claim to the Claims Administrator, then they are not eligible to receive compensation from the PCC Compensation Plan;

42.1.2 If an Individual does not reside in Quebec on the date on which they submit their Tobacco-Victim Claim or Succession Claim to the Quebec Administration Plan, then they are not eligible to receive a Compensation Payment pursuant to the *Blais* Judgment;

42.1.3 In respect of an Individual resident in Canada, their “**Place of Residence**” shall be deemed to be the Province or Territory which issued their health insurance card and/or their driver’s licence;

42.1.4 If an Individual’s answers to the questions on the Tobacco-Victim Claim Form, Succession Claim Form, or Claim Form for PCC-Claimant, as applicable, establish that, between January 1, 1950 and November 20, 1998, they smoked a minimum of Twelve Pack-Years of cigarettes (equivalent of 87,600 cigarettes) sold by the Canadian Tobacco Companies, then they will be considered to have resided in Canada between January 1, 1950 and November 20, 1998; and

- 42.1.5 In order to qualify to receive a Compensation Payment under the Quebec Administration Plan pursuant to the *Blais* Judgment, an Individual's Place of Residence must have been Quebec on the date that they were diagnosed with Emphysema/COPD (GOLD Grade III or IV), Lung Cancer and/or Throat Cancer before March 12, 2012.

43. Quantum of Compensation for *Blais* Class Members

- 43.1 In accordance with the terms of the Quebec Administration Plan, upon review of the Proofs of Claim by the Claims Administrator, Tobacco-Victims who fulfill the *Blais* Eligibility Criteria may be determined to be eligible to receive a Compensation Payment as set out in the Compensation Grid in **Table 2** below. An Individual who meets all the criteria to receive compensation as a *Blais* Class Member shall be paid for the single compensable disease with which they have been diagnosed that will provide them with the highest amount of compensation pursuant to the *Blais* Judgment. No "double recovery" or overlapping recovery will be permitted if a *Blais* Class Member has been diagnosed with more than one compensable disease. The quantum of the payments indicated in subparagraphs 43.1.1 through 43.1.3 and **Table 2** below will vary based upon the actual take-up rate and other factors:

- 43.1.1 If the *Blais* Class Member was diagnosed with Emphysema/COPD (GOLD Grade III or IV), they will be paid \$24,000 or \$30,000, or such other amount as may be determined by the Claims Administrator to be available for that subclass of *Blais* Class Members;

- 43.1.2 If the *Blais* Class Member was diagnosed with Lung Cancer, they will be paid \$80,000 or \$100,000, or such other amount as may be determined by the Claims Administrator to be available for that subclass of *Blais* Class Members; and

- 43.1.3 If the *Blais* Class Member was diagnosed with Throat Cancer, they will be paid \$80,000 or \$100,000, or such other amount as may be determined by the Claims Administrator to be available for that subclass of *Blais* Class Members.

Table 2

Disease(s) with which <i>Blais</i> Class Member was diagnosed	Quantum of Compensation (or such lesser amount as may be determined by the Claims Administrator to be available for the subclass of <i>Blais</i> Class Members; quantum will vary based upon the actual take-up rate and other factors and shall not exceed the maximum amounts specified in this table)	
	Compensation for <i>Blais</i> Class Members who started smoking before January 1, 1976	Compensation for <i>Blais</i> Class Members who started smoking on or after January 1, 1976
Emphysema/COPD (GOLD Grade III or IV)	\$30,000	\$24,000
Lung Cancer	\$100,000	\$80,000
Throat Cancer	\$100,000	\$80,000

- 43.2 The amounts of the compensation payments to *Blais* Class Members shall not exceed the maximum amounts specified in **Table 2** above.
- 43.3 The amounts payable to *Blais* Class Members pursuant to the *Blais* Judgment are inclusive of any prejudgment interest, postjudgment interest and any other amounts that may be claimed by *Blais* Class Members.
- 44. Claims Administrator's Determination of Compensation payable to Quebec Residents who may qualify as both a *Blais* Class Member and a PCC-Claimant**
- 44.1 Depending upon the disease(s) with which they are diagnosed and the timing of the diagnoses, there are four possible cases in which a Quebec resident may meet both the PCC Eligibility Criteria and the *Blais* Eligibility Criteria . The four cases are described in **Table 3** below. However, since the *Blais* Class Members and the PCC-Claimants shall only be paid for the single compensable disease with which they have been diagnosed that will

provide them with the highest amount of compensation pursuant to either the *Blais* Judgment or the PCC Compensation Plan, as applicable, **Table 3** indicates whether the compensation would be paid pursuant to the *Blais* Judgment under the Quebec Administration Plan or pursuant to the terms of the PCC Compensation Plan. The questions on the Claim Form for PCC-Claimant (Appendix “C”) and Claim Form for the Legal Representative of a PCC-Claimant (Appendix “D”) will elicit responses from the individual submitting the claim that will enable the Claims Administrator to determine whether the Quebec resident meets either the PCC Eligibility Criteria or the *Blais* Eligibility Criteria:

Table 3

Case	Diseases with which Quebec Residents were diagnosed and Timing of Diagnoses	How Compensation will be paid (Amounts shown are for illustrative purposes only. The actual quantum will be determined by the Claims Administrator. The quantum will vary based upon the actual take-up rate and other factors and shall not exceed the maximum amounts specified in this table)	
		Compensation for <i>Blais</i> Class Members who started smoking before January 1, 1976	Compensation for <i>Blais</i> Class Members who started smoking on or after January 1, 1976
1.	Quebec resident was:	<i>Blais</i> Judgment: \$0	<i>Blais</i> Judgment: \$0
	(a) diagnosed with Emphysema/COPD (GOLD Grade III or IV) before March 12, 2012;	PCC Compensation Plan: \$60,000	PCC Compensation Plan: \$48,000
	(b) diagnosed with either Lung Cancer or Throat Cancer between March 8, 2015 and March 8, 2019; and	Total: \$60,000	Total: \$48,000
	(c) alive on March 8, 2019.		

Case	Diseases with which Quebec Residents were diagnosed and Timing of Diagnoses	How Compensation will be paid (Amounts shown are for illustrative purposes only. The actual quantum will be determined by the Claims Administrator. The quantum will vary based upon the actual take-up rate and other factors and shall not exceed the maximum amounts specified in this table)	
		Compensation for <i>Blais</i> Class Members who started smoking before January 1, 1976	Compensation for <i>Blais</i> Class Members who started smoking on or after January 1, 1976
2.	Quebec resident was: (a) diagnosed with Lung Cancer or Throat Cancer before March 12, 2012; (b) diagnosed with Emphysema/COPD (GOLD Grade III or IV) between March 8, 2015 and March 8, 2019; and (c) alive on March 8, 2019.	<i>Blais</i> Judgment: \$100,000 PCC Compensation Plan: \$0 Total: \$100,000	<i>Blais</i> Judgment: \$80,000 PCC Compensation Plan: \$0 Total: \$80,000
3.	Quebec resident was: (a) diagnosed with Lung Cancer before March 12, 2012; (b) diagnosed with Throat Cancer between March 8, 2015 and March 8, 2019; and (c) alive on March 8, 2019.	<i>Blais</i> Judgment: \$100,000 PCC Compensation Plan: \$0 Total: \$100,000	<i>Blais</i> Judgment: \$80,000 PCC Compensation Plan: \$0 Total: \$80,000
4.	Quebec resident was: (a) diagnosed with Throat Cancer before March 12, 2012;	<i>Blais</i> Judgment: \$100,000 PCC Compensation Plan: \$0	<i>Blais</i> Judgment: \$80,000 PCC Compensation Plan: \$0

Case	Diseases with which Quebec Residents were diagnosed and Timing of Diagnoses	How Compensation will be paid (Amounts shown are for illustrative purposes only. The actual quantum will be determined by the Claims Administrator. The quantum will vary based upon the actual take-up rate and other factors and shall not exceed the maximum amounts specified in this table)	
		Compensation for <i>Blais</i> Class Members who started smoking before January 1, 1976	Compensation for <i>Blais</i> Class Members who started smoking on or after January 1, 1976
	(b) diagnosed with Lung Cancer between March 8, 2015 and March 8, 2019; and (c) alive on March 8, 2019.	Total: \$100,000	Total: \$80,000

- 44.2 The amounts of the compensation payments to Quebec residents shall not exceed the maximum amounts specified in **Table 3** above.
- 44.3 The amounts payable to Quebec residents are inclusive of any prejudgment interest, postjudgment interest and any other amounts that may be claimed by Quebec residents.

SECTION VIII – ROLE OF CCAA PLAN ADMINISTRATORS IN PCC COMPENSATION PLAN

45. Appointment of CCAA Plan Administrators

- 45.1 The CCAA Court shall be requested to approve the appointment of the three CCAA Plan Administrators in the manner contemplated by the CCAA Plans and other Definitive Documents.
- 45.2 Subject to the approval of the CCAA Court, the following three firms shall be appointed to serve as the CCAA Plan Administrators until such time as such firms may be replaced with the further approval of the CCAA Court: Ernst & Young Inc.; FTI Consulting Canada Inc.; and Deloitte Restructuring Inc.

- 45.3 In the CCAA Court's discretion, when the CCAA Court approves the Tobacco Companies' CCAA Plans, and whether at that time or at some future date or as otherwise set out in the CCAA Plans, the CCAA Court may abridge, suspend or otherwise deal with the CCAA proceedings as the CCAA Court may see fit, and Ernst & Young Inc., FTI Consulting Canada Inc. and Deloitte Restructuring Inc. shall be discharged and relieved of any further duties and obligations in regard to their capacities as Monitors, but shall continue without interruption in their capacities as CCAA Plan Administrators until such time as they may be replaced with the approval of the CCAA Court.

46. Advisors to CCAA Plan Administrators

- 46.1 The CCAA Plan Administrators, in their discretion, may retain any advisors, including legal, financial, investment or other advisors, to advise and assist them to carry out their duties in relation to the administration of the PCC Compensation Plan.

47. Payment for Services provided by CCAA Plan Administrators

- 47.1 All professional fees, other fees, costs, disbursements, expenses, court costs and other expenditures, and all applicable sales taxes thereon (collectively, "**Costs**"), incurred in respect of the services provided by the CCAA Plan Administrators in relation to the administration of the PCC Compensation Plan, and the services provided by all legal, financial, investment or other advisors with whom the CCAA Plan Administrators in their discretion may consult regarding the administration of the PCC Compensation Plan, shall be paid biweekly directly by the Tobacco Companies, and such amounts shall not be deducted from the PCC Compensation Plan Amount. All such Costs shall be subject to the approval of the CCAA Court.

48. Investment of PCC Compensation Plan Amount

- 48.1 In accordance with the terms of the CCAA Plans, the PCC Compensation Plan Amount shall be paid from the Global Settlement Trust Account and deposited into the PCC Trust Account for the benefit of the Pan-Canadian Claimants.

48.2 The CCAA Plan Administrators shall ensure that the amounts from time to time in the PCC Trust Account are invested in accordance with approved investment guidelines pending disbursement to the PCC-Claimants.

48.3 The CCAA Plan Administrators shall provide to the PCC Representative Counsel a monthly report of the receipts and disbursements for the PCC Trust Account.

49. Advancement of Funds to Claims Administrator for Payments to Eligible PCC-Claimants

49.1 From time to time, the Claims Administrator shall submit to the CCAA Plan Administrators a requisition with sufficiently detailed information and supporting data requesting the advancement of a specified sum of money from the PCC Compensation Plan Amount to be used by the Claims Administrator for the purpose of making Individual Payments to Eligible PCC-Claimants.

49.2 Upon receipt of each such requisition and supporting information and data from the Claims Administrator, the CCAA Plan Administrators will verify the calculation of the sum requisitioned by the Claims Administrator. In their discretion, the CCAA Plan Administrators may request further information from the Claims Administrator before they authorize the advancement of an instalment of funds from the PCC Compensation Plan Amount held in the PCC Trust Account to the Claims Administrator to enable it to make Individual Payments to Eligible PCC-Claimants.

50. Reporting by CCAA Plan Administrators

50.1 On an annual basis, and as circumstances warrant at any other times in the CCAA Plan Administrators' discretion or as the CCAA Court directs, the CCAA Plan Administrators shall report to the CCAA Court regarding the progress of the administration of the PCC Compensation Plan including the publication of notices, the PCC Claims Application Deadline to file PCC Claims, PCC Claims approved, PCC Claims rejected, any delays in the Claims Process, amounts distributed, fees charged and disbursements made and any

other matter which the CCAA Plan Administrators in their discretion deem to be appropriate.

SECTION IX – DISTRIBUTION OF INDIVIDUAL PAYMENTS

51. Determination of Quantum of Individual Payments to Eligible PCC-Claimants

- 51.1 Upon the completion of the processing of the PCC Claims, the CCAA Plan Administrators, in consultation with the Claims Administrator, shall determine the quantum of the Individual Payments which may be made from the amount in the PCC Trust Account based upon several factors, including: the timing of the payment of the total PCC Compensation Plan Amount by the Tobacco Companies; the amount in the PCC Trust Account available for distribution; the numbers of PCC Claims accepted in respect of each of the diagnoses of Lung Cancer, Throat Cancer and Emphysema/COPD (GOLD Grade III or IV); and the numbers of Eligible PCC-Claimants who started smoking before and on or after January 1, 1976.

52. *Pro rata* Reduction if Aggregate of Individual Payments exceeds PCC Compensation Plan Amount

- 52.1 If the PCC Compensation Plan Amount plus any interest accrued thereon in the PCC Trust Account is not sufficient to pay the aggregate of the Individual Payments determined to be payable by the CCAA Plan Administrators, in consultation with the Claims Administrator, then the Individual Payments owing to the PCC-Claimants shall be divided on a *pro rata* basis among the Eligible PCC-Claimants so that the aggregate amount of the Individual Payments otherwise payable to the Eligible PCC-Claimants does not exceed the PCC Compensation Plan Amount plus any interest accrued thereon in the PCC Trust Account.

53. Payment of Individual Payments to Eligible PCC-Claimants

- 53.1 Once the CCAA Plan Administrators have finally determined the quanta of the Individual Payments which may be made from the PCC Compensation Plan Amount plus any interest accrued thereon in the PCC Trust Account, at the direction of the CCAA Plan Administrators, the Claims Administrator shall be responsible for making the Individual Payments to the Eligible PCC-Claimants.
- 53.2 The Claims Administrator shall make payment of the Individual Payments by either cheque or direct deposit as designated on the Claim Form by the PCC-Claimant or the Claim Form for the Legal Representative of the PCC-Claimant, as applicable.
- 53.3 Cheques for Individual Payments shall be issued in the name of each Eligible PCC-Claimant or in the name of the estate of the Eligible PCC-Claimant as applicable. Cheques shall not be issued in the name of any heir or beneficiary of the estate of an Eligible PCC-Claimant. Cheques will be mailed to the address of the Eligible PCC-Claimant or the Legal Representative of the Eligible PCC-Claimant, as applicable, that was provided on the Claim Form.
- 53.4 An Eligible PCC-Claimant or the Legal Representative of the Eligible PCC-Claimant, as applicable, who receives an Individual Payment by cheque shall have 180 days from the date inscribed on the cheque to present it for payment. After 180 days, any amount not deposited shall be returned to the PCC Compensation Plan Amount.
- 53.5 Individual Payments made by direct deposit shall be deposited into a bank account in the name of the PCC-Claimant or the estate of the PCC-Claimant. The Claims Administrator shall not deposit an Individual Payment into a bank account in the name of any heir or beneficiary of the estate of an Eligible PCC-Claimant.

54. Distribution of any Residual Funds from PCC Compensation Plan Amount

- 54.1 Three years after the Claims Administrator commenced its review and processing of the PCC-Claims, or at such other time as the CCAA Plan Administrators are of the view that the administration of the PCC-Claims has been substantially completed, to the extent that there remains any Residual Funds in the PCC Compensation Plan, any such Residual Funds shall be allocated to the Provinces and Territories Settlement Amount and apportioned among the Provinces and Territories in accordance with the percentages set out in the table in Article 16, Section 16.3 of the CCAA Plan.

55. No Assignment or Direction to Pay

- 55.1 No amount payable under the PCC Compensation Plan may be assigned, and any such assignment shall be null and void.
- 55.2 No amount payable under the PCC Compensation Plan may be subject to a direction to pay, and any such direction to pay shall be null and void.

SECTION X – REPORTING OBLIGATIONS OF CLAIMS ADMINISTRATOR

56. Engagement with Administrative Coordinator and reporting to CCAA Plan Administrators and CCAA Court

- 56.1 The Claims Administrator shall bring to the attention of and work with the Administrative Coordinator to address and resolve issues that may arise from time to time in the interpretation, implementation and ongoing administration of the PCC Compensation Plan. If the Administrative Coordinator and the Claims Administrator are unable to resolve an issue relating to the PCC Compensation Plan, then the Administrative Coordinator shall refer the matter to the CCAA Plan Administrators who, in their discretion, may bring the matter jointly before the CCAA Court for resolution or directions.
- 56.2 The Claims Administrator shall keep accurate and complete records to allow for verification, audit or review as required by the CCAA Plan Administrators and, as

circumstances warrant, by the CCAA Court which shall hear and determine matters relating to the ongoing supervision of the PCC Compensation Plan.

- 56.3 Annually, the Claims Administrator shall prepare and submit the budget for the claims administration to the Administrative Coordinator who shall forward the budget to the CCAA Plan Administrators for the approval by the CCAA Plan Administrators, who shall submit the budget for final approval by the CCAA Court.
- 56.4 The Claims Administrator shall manage and track the budget for the administration of the PCC Compensation Plan.
- 56.5 Annually and as circumstances warrant at any other times as requested by the CCAA Plan Administrators in their discretion or as the CCAA Court directs, the Claims Administrator shall report through the Administrative Coordinator to the CCAA Plan Administrators regarding the progress of the administration of the PCC Compensation Plan including the publication of notices, the PCC Claims Application Deadline to file PCC Claims, PCC Claims approved, PCC Claims rejected, any delays in the Claims Process, amounts distributed, fees charged and disbursements made.
- 56.6 Annually and as circumstances warrant at any other times as requested by the CCAA Plan Administrators in their discretion or as the CCAA Court directs, the Claims Administrator shall provide through the Administrative Coordinator to the CCAA Plan Administrators which, in turn, shall report to the CCAA Court, an accounting of the fees charged, disbursements made and, after the PCC Claims Application Deadline, the distributions made to Eligible PCC-Claimants for approval by the CCAA Court.
- 56.7 The Claims Administrator shall provide an Exit Report through the Administrative Coordinator to the CCAA Plan Administrators within six months, or as soon as is practicable, following the termination of the administration of the PCC Compensation Plan.
- 56.8 The Administrative Coordinator shall provide to the PCC Representative Counsel copies of the budget, reports, accounting of fees and Exit Report that the Claims Administrator

submits through the Administrative Coordinator to the CCAA Plan Administrators pursuant to paragraphs 56.3, 56.5, 56.6 and 56.7 herein.

SECTION XI – CONFIDENTIALITY AND INFORMATION MANAGEMENT

57. Confidentiality

- 57.1 The Claims Administrator shall develop a privacy policy which shall be posted on the website maintained by the Claims Administrator. The privacy policy shall include a description of how the Claims Administrator will collect Personal Information regarding the PCC-Claimants and the PCC-Claimants' Legal Representatives, and how the Personal Information may be used, shared, stored, safeguarded and destroyed by the Claims Administrator.
- 57.2 The Claims Administrator shall develop, host, maintain and manage an electronic database of all PCC Claims submitted by PCC-Claimants and maintain the confidentiality of the Personal Information and data regarding the PCC-Claimants and the PCC-Claimants' Legal Representatives in the database through security measures which include: the training of staff regarding their privacy obligations; administrative controls to restrict access to Personal Information on a "need to know basis"; and technological security measures such as firewalls, multi-factor authentication, encryption and anti-virus software.
- 57.3 Any Personal Information and data regarding a PCC-Claimant and/or a PCC-Claimant's Legal Representative that is provided, created or obtained in the course of the claims administration, whether written or oral, shall be kept confidential by the Claims Administrator, the Review Officer, the Administrative Coordinator and the CCAA Plan Administrators and shall not be disclosed, shared or used for any purpose other than the determination of the PCC Claims, without the consent of the PCC-Claimant or the PCC-Claimant's Legal Representative, as applicable, or as required by law.
- 57.4 The Personal Information and data regarding the PCC-Claimants and the PCC-Claimants' Legal Representatives that is collected by the Claims Administrator shall not be used for

any research or any other purpose that is not related to the administration of PCC Claims made pursuant to the PCC Compensation Plan.

57.5 The Claims Administrator shall obtain from all its employees, officers, contractors, subcontractors, agents and representatives who are engaged in the administration of PCC Claims under the PCC Compensation Plan, an executed non-disclosure agreement in a form approved by the CCAA Plan Administrators.

57.6 The Claims Administrator shall store all Personal Information and data regarding the PCC-Claimants and the PCC-Claimants' Legal Representatives in a secure location and only permit authorized Individuals who have executed a non-disclosure agreement to have access to the Personal Information.

58. Retention and Destruction of PCC-Claimant Information and Records

58.1 The Claims Administrator shall retain all Personal Information and documentation in its possession provided in connection with the Claim Packages submitted by the PCC-Claimants and the PCC-Claimants' Legal Representatives for two years following the completion of the distribution of the Individual Payments ("**Retention Period**"). The Personal Information and documents provided in respect of a PCC-Claimant, or the fact that a Claim Package has been submitted in respect of a PCC-Claimant, shall not be disclosed by the Claims Administrator to anyone, except with the consent of the PCC-Claimant or the PCC-Claimant's Legal Representative, as applicable, or as required by law.

58.2 Subject to the prior approval of the CCAA Court, the Claims Administrator shall conduct the secure destruction of all electronic Personal Information, including all data and metadata, and all Personal Information in document form in the Claims Administrator's possession that was provided as part of the Claim Packages, with the exception of the Claims Administrator's reports and administrative records, as soon as reasonably practicable after the expiry of the Retention Period, and shall provide certification of such destruction to the CCAA Court.

PART C: GENERAL

SECTION I – GENERAL PROVISIONS APPLICABLE TO PCC COMPENSATION PLAN

59. Effective in Entirety

- 59.1 None of the terms herein regarding the PCC Compensation Plan shall become effective unless and until all the terms of the PCC Compensation Plan have been finally approved by the CCAA Court. If such CCAA Court approval is not granted, the PCC Compensation Plan will thereupon be terminated, and none of the Tobacco Companies or the PCC-Claimants will be liable for such termination.

60. Termination of PCC Compensation Plan

- 60.1 The PCC Compensation Plan will continue in full force and effect until all obligations under the PCC Compensation Plan are fulfilled.

61. Governing Law

- 61.1 The PCC Compensation Plan shall be governed and construed in accordance with the laws of the Province of Ontario and the applicable laws of Canada.

62. Entire Agreement

- 62.1 The terms and conditions set forth in Part B regarding the PCC Compensation Plan constitute the entire Agreement between the Tobacco Companies and the PCC-Claimants with respect to the PCC Compensation Plan, and cancel and supersede any prior or other understandings and agreements between the Tobacco Companies and the PCC-Claimants. There are no representations, warranties, terms, conditions, undertakings, covenants or collateral agreements, express, implied or statutory between the Tobacco Companies and the PCC-Claimants with respect to the PCC Compensation Plan other than as expressly set forth or referred to in Part B of this document.

63. Benefit of the PCC Compensation Plan

- 63.1 The terms and conditions set forth in Part B regarding the PCC Compensation Plan shall enure to the benefit of and be binding upon the Tobacco Companies and the PCC-Claimants who are alive and deceased, and their successors, heirs, administrators and estate trustees.

64. Official Languages

- 64.1 The Tobacco Companies shall pay for the cost to prepare a French translation of this document and all Notices and Forms regarding the PCC Compensation Plan that are attached to this document as Appendices. To the extent that there are any inconsistencies between the English and the French versions of this document, the Notices or the Appendices, the English version shall be authoritative and shall govern and prevail in all respects.

DATED as of the 5th day of December, 2024.

APPENDIX “A”

Note: Appendix “A” is a version of the First Notice that is provided for guidance only to assist the understanding of the Claims Administrator which shall be responsible for designing, implementing and managing the PCC Notice Plan pursuant to which prospective PCC-Claimants will be informed about the PCC Compensation Plan and be provided with ongoing notice throughout the PCC Claims Submission Period.

Pan-Canadian Claimants’ Compensation Plan

FIRST NOTICE

To all individuals resident in Canada who smoked Twelve Pack-Years of cigarettes sold in Canada by Imperial Tobacco Canada Limited, Rothmans, Benson & Hedges Inc. and JTI-Macdonald Corp. during the period from January 1, 1950 to November 20, 1998, and were diagnosed between March 8, 2015 and March 8, 2019 with Lung Cancer, Throat Cancer or Emphysema/COPD (GOLD Grade III or IV) attributable to smoking cigarettes.

You may be eligible to receive compensation.

A person smoked Twelve Pack-Years of cigarettes if they smoked the equivalent of a minimum of 87,600 cigarettes calculated as any combination of the number of cigarettes smoked in a day multiplied by the number of days of consumption (for example, 20 cigarettes a day for 12 years; 30 cigarettes a day for 8 years; or 10 cigarettes a day for 24 years).

Please read this Notice carefully.

To learn more about the Pan-Canadian Claimants’ Compensation Plan go to [\[URL for website of Claims Administrator\]](#) or contact the Call Centre by telephone at [\[Call Centre toll-free number\]](#) or by email at [\[Call Centre email address\]](#).

The Ontario Superior Court of Justice (Commercial List) (“**Court**”) authorized this Notice. It is not a solicitation from a lawyer.

On **[date]**, the Court approved the plans of compromise and arrangement (“**CCAA Plans**”) pursuant to the *Companies’ Creditors Arrangement Act* (“**CCAA**”) of three Canadian Tobacco Companies, Imperial Tobacco Canada Limited, Rothmans, Benson & Hedges Inc. and JTI-Macdonald Corp. (“**Tobacco Companies**”). The CCAA Plans include compensation to be provided through the establishment of the Pan-Canadian Claimants’ Compensation Plan (“**PCC**”).

Compensation Plan”) for Canadians (“**Pan-Canadian Claimants**”) suffering from certain tobacco-related diseases who meet prescribed criteria.

The CCAA Plans also provide funding to establish the Cy-près Foundation (the “**Foundation**”), a public charitable foundation that will provide indirect benefits to Canadians through the funding of research focused on improving outcomes in Tobacco-related Diseases the purposes and benefits of which are rationally connected to tobacco-related diseases and the varying circumstances of the diverse group of PCCs. The benefits that will be provided through the Foundation are not part of the PCC Compensation Plan. To learn more about the Foundation go to: [\[URL for website to be maintained by the Foundation\]](#)

The PCC Compensation Plan approved by the Court is not to be construed as an admission of liability on the part of the Tobacco Companies.

What is the PCC Compensation Plan?

In March, 2019, the Tobacco Companies commenced proceedings in the Court for protection from their creditors under the CCAA. The Tobacco Companies participated in a comprehensive Court-supervised mediation with the Provinces, Territories, Quebec Class Action Plaintiffs and other persons with claims and potential claims against them to negotiate a global settlement of all claims arising from the development, design, manufacture, production, marketing, advertising, distribution, purchase or sale of tobacco products, including the historical or ongoing use of or exposure to tobacco products or their emissions and the development of any resulting disease or condition in Canada.

If you are a resident of Canada, regularly smoked cigarettes sold by any of the Tobacco Companies between January 1, 1950 and November 20, 1998, and were diagnosed with lung cancer, throat cancer, or Emphysema/COPD (GOLD Grade III or IV) attributable to smoking cigarettes between March 8, 2015 and March 8, 2019 (inclusive of those dates), you may be eligible to receive compensation from the PCC Compensation Plan.

Who can receive money from the PCC Compensation Plan?

You are a Pan-Canadian Claimant and may be entitled to receive compensation in the form of a monetary payment if you fulfill the following criteria (“**PCC Eligibility Criteria**”):

- (a) You were alive on March 8, 2019;
- (b) You reside in one of the Provinces or Territories;
- (c) Between January 1, 1950 and November 20, 1998, you smoked a minimum of twelve pack-years of cigarettes sold by the Tobacco Companies;

- (d) Between March 8, 2015 and March 8, 2019 (inclusive of those dates), you were diagnosed with:
 - (i) Lung Cancer,
 - (ii) Throat Cancer, or
 - (iii) Emphysema/COPD (GOLD Grade III or IV); and
- (e) On the date of your diagnosis, you resided in one of the Provinces or Territories.

If an individual was alive on March 8, 2019 but is now deceased and resided in a Province or Territory on the date of their death, their estate may be entitled to receive compensation from the PCC Compensation Plan if they meet the PCC Eligibility Criteria.

“Lung Cancer” has been defined to mean primary cancer of the lungs.

“Throat Cancer” has been defined to mean primary cancer (squamous cell carcinoma) of the larynx, the oropharynx or the hypopharynx.

“Larynx” has been defined to mean the upper part of the respiratory passage that is bounded above by the glottis and is continuous below with the trachea.

“Oropharynx” has been defined to mean the part of the pharynx that is below the soft palate and above the epiglottis and is continuous with the mouth. It includes the back third of the tongue, the soft palate, the side and back walls of the throat, and the tonsils.

“Hypopharynx” has been defined to mean the laryngeal part of the pharynx extending from the hyoid bone to the lower margin of the cricoid cartilage.

“Emphysema” has been defined to mean the condition of the lung that is marked by distension and eventual rupture of the alveoli with progressive loss of pulmonary elasticity, that is accompanied by shortness of breath with or without cough, and that may lead to impairment of heart action. For the purpose of the PCC Compensation Plan, “Emphysema” includes COPD (GOLD Grades III and IV).

“COPD” has been defined to mean chronic obstructive pulmonary disease (GOLD Grade III or IV). The Global Initiative for Chronic Obstructive Lung Disease (**“GOLD”**) developed a four grade classification system based upon severity of airflow limitation and other diagnostic parameters. The GOLD Grade III (severe) and GOLD Grade IV (very severe) classifications represent the two most severe categories of disease.

“Twelve Pack-Years of cigarettes” has been defined to mean the minimum amount of the Tobacco Companies’ cigarettes that a Pan-Canadian Claimant is required to have smoked between January 1, 1950 and November 20, 1998. One pack-year is the number of cigarettes smoked daily and is equivalent to 7,300 cigarettes. Twelve pack-years of cigarettes is the equivalent of 87,600

cigarettes which is calculated as any combination of the number of cigarettes smoked in a day multiplied by the number of days of consumption. For example, twelve pack-years equals:

10 cigarettes smoked per day for 24 years ($10 \times 365 \times 24$) = 87,600 cigarettes

or

20 cigarettes smoked per day for 12 years ($20 \times 365 \times 12$) = 87,600 cigarettes

or

30 cigarettes smoked per day for 8 years ($30 \times 365 \times 8$) = 87,600 cigarettes

“Cigarettes sold by the Tobacco Companies” has been defined to mean the following brands and sub-brands of cigarettes:

Accord	Craven “A”	Mark Ten	Number 7
B&H	Craven “M”	Matinee	Peter Jackson
Belmont	du Maurier	Medallion	Players
Belvedere	Dunhill	Macdonald	Rothmans
Camel	Export	More	Vantage
Cameo	LD	North American Spirit	Viscount
Winston	Other Brands [link to document listing sub-brands]		

What compensation may you be eligible to receive from the PCC Compensation Plan?

The PCC Compensation Plan provides financial compensation for Pan-Canadian Claimants who fulfill the PCC Eligibility Criteria. The amount of compensation for which a Pan-Canadian Claimant will be assessed to be eligible will depend upon several factors including the number of individuals in Canada who fulfill the PCC Eligibility Criteria, the number of individuals diagnosed with each of Lung Cancer, Throat Cancer and Emphysema/COPD (GOLD Grade III or IV), and whether each Pan-Canadian Claimant started smoking the Tobacco Companies’ cigarettes before January 1, 1976, or on or after January 1, 1976. **An Eligible PCC-Claimant shall be paid for the single compensable disease with which they have been diagnosed that will provide them with the highest amount of compensation from the PCC Compensation Plan. The amounts of the Individual Payments to Eligible PCC-Claimants shall not exceed and may be less than the maximum amounts specified in the table below:**

Disease(s) with which you were diagnosed	Maximum Amount of Compensation (CAD)	
	If you started smoking before January 1, 1976	If you started smoking on or after January 1, 1976
Emphysema/COPD (GOLD Grade III or IV)	Up to \$18,000	Up to \$14,400
Lung cancer	Up to \$60,000	Up to \$48,000
Throat cancer	Up to \$60,000	Up to \$48,000

How do I submit a Claim?

To make a Claim to the PCC Compensation Plan, **by no later than [the PCC Claims Application Deadline which is TBD]** you must submit to the Claims Administrator a **Claim Form** together with one of the following forms of proof of your diagnosis:

- (a) a copy of a pathology report which confirms that you were diagnosed with Lung Cancer or Throat Cancer, as applicable, between March 8, 2015 and March 8, 2019 (inclusive of those dates); or
- (b) a copy of a report of a spirometry test performed on you between March 8, 2015 and March 8, 2019 (inclusive of those dates), that first demonstrated a FEV1 (non-reversible) of less than 50% of the predicted value to first establish a diagnosis of Emphysema/COPD (GOLD Grade III or IV) between March 8, 2015 and March 8, 2019 (inclusive of those dates); or
- (c) A copy of an extract from your medical file confirming the diagnosis of Lung Cancer, Throat Cancer or Emphysema/COPD (GOLD Grade III or IV) between March 8, 2015 and March 8, 2019 (inclusive of those dates); or
- (d) A completed **Physician Form**; or
- (e) A written statement from your Physician, or another physician having access to your medical record, confirming the diagnosis of Lung Cancer or Throat Cancer between March 8, 2015 and March 8, 2019 (inclusive of those dates) and providing at least one of the following records to verify the diagnosis and date of diagnosis: pathology report, operative report, biopsy report, MRI report, CT scan report, PET scan report, x-ray report and/or sputum cytology report.

The Claim Form for PCC-Claimant and the Physician Form can be found [here](#) [link to forms on Claims Administrator's website] on the website for the PCC Compensation Plan.

If you are the Legal Representative for an individual who is currently alive, or is now deceased, and who may fulfill the PCC Eligibility Criteria, you must provide the Claims Administrator with a document proving that you have the right and are authorized to make a Claim on behalf of the individual. You must also submit a Claim Form together with all supporting medical and other documentation to the Claims Administrator **by no later than [the PCC Claims Application Deadline which is TBD]**.

The Claim Form to be completed by Legal Representatives can be found [here](#) [link to forms on Claims Administrator's website] on the website for the PCC Compensation Plan.

You may submit your Claim to the Claims Administrator by:

By Registered Mail to: [\[Address of Claims Administrator\]](#)

Online at: [\[URL for website of Claims Administrator\]](#)

By email to: [\[Email address of Claims Administrator\]](#)

By fax to: [\[Fax Number of Claims Administrator\]](#)

We recommend that you take a few minutes to review the [FAQ section on the website of the Claims Administrator](#) [\[link to Claims Administrator's website\]](#) for further details about the PCC Compensation Plan and the financial compensation that may be available to you. If you have any questions about the PCC Compensation Plan, you may contact the Claims Administrator at: [\[insert URL for website of Claims Administrator and Call Centre toll-free number and email address\]](#).

WHAT IS THE DEADLINE FOR SUBMITTING A CLAIM?

The deadline to file your Claim Form together with all supporting medical and other documentation with the Claims Administrator is **[the PCC Claims Application Deadline which is TBD]**.

**IF YOU DO NOT FILE YOUR COMPLETE CLAIM ON TIME,
YOUR CLAIM WILL NOT BE ALLOWED.**

APPENDIX “B”

Pan-Canadian Claimants’ Compensation Plan**NOTICE OF REJECTION OF CLAIM**

[on Claims Administrator’s Letterhead]

BY [MAIL/EMAIL/FAX]

Name of PCC-Claimant or Legal Representative of PCC-Claimant

Address of PCC-Claimant or Legal Representative of PCC-Claimant

Dear [Full name of PCC-Claimant or Legal Representative of PCC-Claimant]:

Re: Your Claim Number: _____
Notice of Rejection of Claim

By this Notice, we are advising you that [your/PCC-Claimant’s full name] Claim to the Pan-Canadian Claimants’ Compensation Plan (“**Compensation Plan**”) has been rejected for the following reason(s): [\[Select the applicable reasons or add additional reasons:](#)

- The Claim Package submitted to the Claims Administrator was incomplete and missing the following forms and/or documents: [\[Select the applicable form\(s\) and/or document\(s\):](#)
 - Claim Form for PCC-Claimant;
 - Claim Form for the Legal Representative of a PCC-Claimant;
 - Document proving that the PCC-Claimant’s Legal Representative is authorized to submit a Claim on behalf of the PCC-Claimant;
 - Document proving that the PCC-Claimant is deceased and providing the date of death;
 - Medical record which verifies the PCC-Claimant’s diagnosis and date of diagnosis with lung cancer, throat cancer or Emphysema/COPD (GOLD Grade III or IV);]
- The PCC-Claimant’s Legal Representative has not established that they are authorized to submit a Claim on behalf of the PCC-Claimant;

- The PCC-Claimant does not reside in Canada [OR, if the PCC-Claimant is deceased, the PCC-Claimant did not reside in Canada on the date of their death];
- The PCC-Claimant was not alive on March 8, 2019;
- Between January 1, 1950 and November 20, 1998, the PCC-Claimant did not smoke a minimum of twelve pack-years of cigarettes sold by Imperial Tobacco Canada Limited, Imperial Tobacco Company Limited, Rothmans, Benson & Hedges Inc. and JTI-Macdonald Corp.;
- The amount of the cigarettes which the PCC-Claimant smoked could not be confirmed;
- The PCC-Claimant was not diagnosed with lung cancer, throat cancer or Emphysema/COPD (GOLD Grade III or IV) between March 8, 2015 and March 8, 2019;
- The date of the PCC-Claimant's diagnosis with lung cancer, throat cancer or Emphysema/COPD (GOLD Grade III or IV) could not be confirmed.

The Claims Administrator has determined that [you/ PCC-Claimant's full name are/is] not eligible to receive a compensation payment from the PCC Compensation Plan.

If you believe that [your/ PCC-Claimant's full name] Claim has been improperly rejected, you may submit your Claim for review by the Review Officer. To do so, **you must fully complete and submit the attached Request for Review form and any supporting documents to the Claims Administrator by no later than 5:00 p.m. Pacific Time sixty days from the date of the Notice.** The Claims Administrator will not accept and review your Request for Review unless it has been submitted by this deadline by one of the following methods:

SUBMIT YOUR REQUEST FOR REVIEW BY REGISTERED MAIL TO: [Address of Claims Administrator];

OR

SUBMIT YOUR REQUEST FOR REVIEW ONLINE AT: [URL for website of Claims Administrator];

OR

SUBMIT YOUR REQUEST FOR REVIEW BY EMAIL TO: [\[Email address for Claims Administrator\]](#);

OR

SUBMIT YOUR REQUEST FOR REVIEW BY FAX TO: [Fax Number of Claims Administrator].

In accordance with the terms of the PCC Compensation Plan, the decision of the Claims Administrator, and the decision of the Review Officer if you chose to submit a Request for Review, are final and binding without any recourse to any Court, forum or tribunal.

If you have any questions regarding the rejection of your Claim, or the process for submitting a Request for Review, please contact our Call Centre by telephone at [\[Call Centre toll-free number\]](#), or visit the website for the PCC Compensation Plan at [\[URL for Claims Administrator's website\]](#).

Dated this _____ day of _____, 20____.

[\[Name of Claims Administrator\]](#)

APPENDIX “C”

Pan-Canadian Claimants’ Compensation Plan**CLAIM FORM TO BE COMPLETED BY PCC-CLAIMANT**

This Claim Form is required to be completed by any person, referred to in this Claim Form as the “PCC-Claimant”, who may be entitled to receive payment of financial compensation from the Pan-Canadian Claimants’ Compensation Plan, referred to in this Form as the “PCC Compensation Plan”.

To be eligible to receive payment of financial compensation from the PCC Compensation Plan, you must meet all of the following PCC Eligibility Criteria:

1. You reside in any Province or any Territory;
2. You were alive on March 8, 2019;
3. Between January 1, 1950 and November 20, 1998, you smoked a minimum of twelve pack-years of cigarettes sold by the Canadian Tobacco Companies;

Note: The calculator at this link [\[insert link to Pack-Years Calculator\]](#) will assist you to calculate the number of pack-years that you smoked.

4. Between March 8, 2015 and March 8, 2019 (inclusive of those dates), you were diagnosed with:
 - (a) Primary lung cancer, or
 - (b) Primary cancer (squamous cell carcinoma) of the larynx, the oropharynx or the hypopharynx (throat cancer), or
 - (c) Emphysema/COPD (GOLD Grade III or IV);

AND

5. On the date of your diagnosis with lung cancer, throat cancer or Emphysema/COPD (GOLD Grade III or IV) you resided in any Province or any Territory.

If you reside in Quebec and do not meet the above PCC Eligibility Criteria, you may be eligible to receive compensation as a *Blais* Class Member in accordance with the judgments of the Superior Court of Quebec in *Létourneau v. JTI-Macdonald Corp.*, 2015 QCCS 2382, and the judgment of the Court of Appeal of Quebec in *Imperial Tobacco*

Canada ltée c. Conseil québécois sur le tabac et la santé et al., 2019 QCCA 358, if you meet all of the following criteria :

1. You reside in Quebec;
2. Between January 1, 1950 and November 20, 1998, you smoked a minimum of twelve pack-years of cigarettes sold by the Canadian Tobacco Companies.

Note: The calculator at this link [\[insert link to Pack-Years Calculator\]](#) will assist you to calculate the number of pack-years that the PCC-Claimant smoked.
3. Before March 12, 2012, you were diagnosed with:
 - (a) Primary lung cancer, or
 - (b) Primary cancer (squamous cell carcinoma) of the larynx, the oropharynx or the hypopharynx (throat cancer), or
 - (c) Emphysema/COPD (GOLD Grade III or IV).
4. On the date of your diagnosis with lung cancer, throat cancer or Emphysema/COPD (GOLD Grade III or IV) you resided in Quebec.

AND

5. The *Blais* Class Members include the heirs of all persons who died after November 20, 1998 and satisfied the above criteria.

You are only permitted to make one claim for compensation as either a *Blais* Class Member or a PCC-Claimant under the PCC Compensation Plan. You cannot make a claim to both Claims Processes. You may determine whether you are eligible to receive compensation as a *Blais* Class member at [\[link to QCAPs' section of Claims Administrator's website\]](#).

You do not need a lawyer to complete this Claim Form.

To make a Claim to the PCC Compensation Plan, you must submit all of the following fully completed documents to the Claims Administrator:

- ☐ This Claim Form which you have completed with all requested documents attached. If your Legal Representative is assisting you to submit your claim, they must complete the Claim Form for the Legal Representative of a PCC-Claimant instead of this Claim Form with all requested documents attached. You are required to sign the Statutory Declaration in Section XI of the Claim Form in the presence of a Commissioner of Oaths if you are submitting your Claim on your own. If your Legal Representative is assisting you to submit your Claim, they must complete the Statutory Declaration in Section XII of the Claim Form for the Legal

Representative of a PCC-Claimant which they must sign in the presence of a Commissioner of Oaths; and

- ☐ One of the following documents to prove your diagnosis:
- ☐ A copy of a pathology report which confirms that you were diagnosed with Lung Cancer or Throat Cancer, as applicable, between March 8, 2015 and March 8, 2019 (inclusive of those dates); or
 - ☐ A copy of a report of a spirometry test performed on you between March 8, 2015 and March 8, 2019 (inclusive of those dates), that first demonstrated a FEV1 (non-reversible) of less than 50% of the predicted value to first establish a diagnosis of Emphysema/COPD (GOLD Grade III or IV); or
 - ☐ A copy of an extract from your medical file confirming the diagnosis of Lung Cancer, Throat Cancer or Emphysema/COPD (GOLD Grade III or IV) between March 8, 2015 and March 8, 2019 (inclusive of those dates); or
 - ☐ A completed Physician Form; or
 - ☐ A written statement from your Physician, or another physician having access to your medical record, confirming the diagnosis of Lung Cancer or Throat Cancer between March 8, 2015 and March 8, 2019 (inclusive of those dates) and providing at least one of the following records to verify the diagnosis and date of diagnosis: pathology report, operative report, biopsy report, MRI report, CT scan report, PET scan report, x-ray report and/or sputum cytology report.

Deadline to submit all of your completed Claim Forms and documents: This Claim Form and all requested medical documents supporting your Claim must be submitted to the Claims Administrator as a complete package by no later than [the PCC Claims Application Deadline which is TBD].

The Claims Administrator will not accept and review your Claim to determine whether you are eligible to receive compensation under the PCC Compensation Plan unless ALL of your fully completed Claim Form and ALL requested medical documents have been submitted either online or postmarked by the deadline of [the PCC Claims Application Deadline which is TBD].

For this reason, you should take immediate steps to obtain all of the requested documents as soon as possible in order not to miss the deadline of [the PCC Claims Application Deadline which is TBD].

SUBMIT YOUR CLAIM BY REGISTERED MAIL: All Forms and documents must be postmarked no later than _____, 20____ and mailed to: [Address of Claims Administrator].

OR

SUBMIT YOUR CLAIM ONLINE: All Forms and documents must be submitted online and all documents must be uploaded online at [URL for website of Claims Administrator] by no later than 5:00 p.m. Pacific Time on _____, 20__.

OR

SUBMIT YOUR CLAIM BY EMAIL: All Forms and documents must be emailed to the Claims Administrator to [Email address of Claims Administrator] by no later than 5:00 p.m. Pacific Time on _____, 20__.

OR

SUBMIT YOUR CLAIM BY FAX: All Forms and documents must be faxed to the Claims Administrator to [Fax Number of Claims Administrator] by no later than 5:00 p.m. Pacific Time on _____, 20__.

Section I: Choice of Claim Form

Are you making a claim on your own behalf?

Yes ☐

Please complete the rest of this Claim Form.

No ☐

If you are making a claim as the Legal Representative on behalf of a PCC-Claimant or the estate of a PCC-Claimant, please complete the Claim Form for the Legal Representative of a PCC-Claimant.

Section II: Name, Contact Information and Provincial/Territorial Health Insurance Number of PCC-Claimant

Any communications from the Claims Administrator and any cheque for compensation will be made payable to you and sent to you in accordance with the contact information you provide below.

Full Name (First Name, Middle Name and Last Name):

Date of Birth:

Date: _____
(DD/MM/YYYY)

Provincial/Territorial Health Insurance Number that you use in the Province or Territory in which you currently live:	_____	
Between March 8, 2015 and March 8, 2019, did you live in a different Province or Territory?	Yes ☐	Province or Territory in which you lived between March 8, 2015 and March 8, 2019: _____ Please provide the Provincial/Territorial Health Insurance Number that you used while living in a different Province or Territory between March 8, 2015 to March 8, 2019: _____
	No ☐	
Street Address of Current Residence:		
Unit/Apartment Number:		
City/Town:		
Province/Territory:		
Postal Code:		
Country:		
Home Phone:		
Work Phone:		
Cell Phone:		
Email Address:		
Preferred Method of Contact:	☐ Telephone ☐ Email	

	☐ Mail
Preferred Language of Communication:	☐ English ☐ French
Section III: Place of Residence If you live in Canada, your place of residence is the Province or Territory which issued your health insurance card and/or your driver's licence.	
1.	Between January 1, 1950 and November 20, 1998, did you reside in Canada? Note: If you answer "No" to Question 1, then you are <u>not</u> eligible to receive compensation from the PCC Compensation Plan. Your application to make a claim to the PCC Compensation Plan is <u>terminated</u> at this point, and you may not complete and submit this Claim Form to the Claims Administrator. Yes ☐ No ☐
2.	Do you currently reside in Quebec? Note: If you answer "Yes" to Question 2, please proceed to complete Sections IV, V, VII, VIII, IX, X and XI. <u>Do not complete Section VI (which is for non-Quebec residents) and do not complete Question 3 below.</u> Yes ☐ No ☐
3.	Do you currently reside in one of the Provinces other than Quebec, Yes ☐

	or in one of the Territories in Canada? Note: If you answer “Yes” to Question 3, please proceed to complete Sections IV, VI, VII, VIII, IX, X and XI. <u>Do not complete Section V (which is for Quebec residents only).</u> If you answer “No” to Question 3, then you are <u>not</u> eligible to receive compensation from the PCC Compensation Plan. Your application to make a claim to the PCC Compensation Plan is <u>terminated</u> at this point, and you may not complete and submit this Claim Form to the Claims Administrator.	Province or Territory of current residence: _____ No ☐ Current _____ country _____ of _____ residence: _____
Section IV: Smoking History To be eligible to receive compensation under the PCC Compensation Plan, between January 1, 1950 and November 20, 1998, you must have smoked a minimum of twelve pack-years of cigarettes (equivalent to 87,600 cigarettes) sold by the Canadian Tobacco Companies which are: Imperial Tobacco Canada Limited; Rothmans, Benson & Hedges Inc.; and JTI-Macdonald Corp. Based upon your answers to Questions 5, 6 and 7, the Claims Administrator will calculate the number of pack-years of cigarettes that you smoked between January 1, 1950 and November 20, 1998, to determine your eligibility to receive compensation under the PCC Compensation Plan.		
4.	When did you start smoking cigarettes?	☐ Before January 1, 1976 ☐ On or after January 1, 1976
5.	Between January 1, 1950 and November 20, 1998, for how many years did you smoke?	_____ years

6.	During the years that you smoked between January 1, 1950 and November 20, 1998, how many cigarettes did you smoke per day? Please indicate the <u>number of cigarettes smoked</u> per day, not the number of packs smoked. If the number of cigarettes you smoked per day varied, please proceed to answer Question 7.	I smoked approximately _____ cigarettes per day during the years that I smoked between January 1, 1950 and November 20, 1998.
7.	If the number of cigarettes that you smoked between January 1, 1950 and November 20, 1998 varied, provide a summary of the number of cigarettes that you smoked during that period of time. Please express your summary in terms of the <u>number of cigarettes smoked</u>, not the number of packs smoked. [Note to Draft: The Claims Administrator will be requested to add an auto calculator to the online Claim Form that would calculate the number of pack-years based on the data provided by the PCC-Claimant. If the auto calculator determines that the PCC-Claimant did not smoke twelve pack-years, then the following Note would appear to the PCC-Claimant: <u>Note:</u> You did not smoke a minimum of twelve pack-years of cigarettes between January 1, 1950 and November 20, 1998. As a result, you are <u>not</u>	(a) I smoked approximately _____ cigarettes per day between _____ (DD/MM/YYYY) and _____ (DD/MM/YYYY). (b) I smoked approximately _____ cigarettes per day between _____ (DD/MM/YYYY) and _____ (DD/MM/YYYY). (c) I smoked approximately _____ cigarettes per day between _____ (DD/MM/YYYY) and _____ (DD/MM/YYYY). (d) I smoked approximately _____ cigarettes per day between _____ (DD/MM/YYYY) and _____ (DD/MM/YYYY).

	eligible to receive compensation from the PCC Compensation Plan. Your application to make a claim to the PCC Compensation Plan is <u>terminated</u> at this point, and you may not complete and submit this Claim Form to the Claims Administrator.]	
8.	Check all of the brands of cigarettes that you regularly smoked between January 1, 1950 and November 20, 1998. <u>Note:</u> If you did not smoke any of the brands of cigarettes listed in Question 8 or on the attached list of sub-brands [link to document listing sub-brands], then you are <u>not</u> eligible to receive compensation from the PCC Compensation Plan. Your application to make a claim to the PCC Compensation Plan is <u>terminated</u> at this point, and you are not entitled to proceed to complete and submit this Claim Form to the Claims Administrator.	☐ Accord ☐ B&H ☐ Belmont ☐ Belvedere ☐ Camel ☐ Cameo ☐ Craven "A" ☐ Craven "M" ☐ du Maurier ☐ Dunhill ☐ Export ☐ LD ☐ Macdonald ☐ Mark Ten ☐ Matinee ☐ Medallion ☐ More

		☐ North American Spirit ☐ Number 7 ☐ Peter Jackson ☐ Players ☐ Rothmans ☐ Vantage ☐ Viscount ☐ Winston ☐ Record any other brands smoked from this list: [link to document listing sub-brands]

Section V: Eligibility of Residents of Quebec to receive Compensation

Complete this section only if you live in Quebec. If you live in a Province other than Quebec or in one of the Territories, please proceed to Section VI.

PLEASE READ CAREFULLY:

Depending on the disease with which you have been diagnosed and the date of your diagnosis, as a resident of Quebec you may be eligible to receive compensation either from the PCC Compensation Plan, or as a *Blais Class Member* in accordance with the judgments of the Superior Court of Quebec in *Létourneau v. JTI-Macdonald Corp.*, 2015 QCCS 2382, and the judgment of the Court of Appeal of Quebec in *Imperial Tobacco Canada ltée c. Conseil québécois sur le tabac et la santé et al.*, 2019 QCCA 358.

You are only permitted to make one claim for compensation either as a *Blais Class Member* or as a PCC-Claimant under the PCC Compensation Plan. You cannot make a claim to both Claims Processes.

Your answers to Questions 9 through 17 will assist you to determine whether you may be able to make a claim as a *Blais* Class Member or as a PCC-Claimant under the PCC Compensation Plan.

To be eligible to receive compensation as a *Blais* Class Member, you must meet all of the following criteria:

1. You reside in Quebec;
2. Between January 1, 1950 and November 20, 1998, you smoked a minimum of twelve pack-years of cigarettes sold by the Canadian Tobacco Companies which are: Imperial Tobacco Canada Limited; Rothmans, Benson & Hedges Inc.; and JTI-Macdonald Corp. The Canadian Tobacco Companies sold the brands of cigarettes listed in Question 8 on this Claim Form.

Twelve pack-years of cigarettes is the equivalent of 87,600 cigarettes which is calculated as any combination of the number of cigarettes smoked in a day multiplied by the number of days of consumption. For example, twelve pack-years equals:

10 cigarettes smoked per day for 24 years ($10 \times 365 \times 24$) = 87,600 cigarettes, or

20 cigarettes smoked per day for 12 years ($20 \times 365 \times 12$) = 87,600 cigarettes, or

30 cigarettes smoked per day for 8 years ($30 \times 365 \times 8$) = 87,600 cigarettes;

Note: The calculator at this link [\[insert link to Pack-Years Calculator\]](#) will assist you to calculate the number of pack-years that you smoked.

3. Before March 12, 2012, you were diagnosed with:
 - (a) Primary lung cancer, or
 - (b) Primary cancer (squamous cell carcinoma) of the larynx, the oropharynx or the hypopharynx (throat cancer), or
 - (c) Emphysema/COPD (GOLD Grade III or IV).

AND

4. On the date of your diagnosis, you resided in Quebec.
5. The *Blais* Class Members include the heirs of all persons who died after November 20, 1998 and satisfied the above criteria.

To be eligible to receive compensation under the PCC Compensation Plan, you must meet all of the following criteria:

1. You reside in any Province or any Territory;

2. You were alive on March 8, 2019;
3. Between January 1, 1950 and November 20, 1998, you smoked a minimum of twelve pack-years of cigarettes sold by the Canadian Tobacco Companies;
- Note:** The calculator at this link [\[insert link to Pack-Years Calculator\]](#) will assist you to calculate the number of pack-years that you smoked.
4. Between March 8, 2015 and March 8, 2019 (inclusive of those dates), you were diagnosed with:
- (a) Primary lung cancer, or
 - (b) Primary cancer (squamous cell carcinoma) of the larynx, the oropharynx or the hypopharynx (throat cancer), or
 - (c) Emphysema/COPD (GOLD Grade III or IV);

AND

5. On the date of your diagnosis with lung cancer, throat cancer or Emphysema/COPD (GOLD Grade III or IV) you resided in any Province or any Territory.

If you have been diagnosed with Emphysema/COPD (GOLD Grade III or IV) and either primary lung cancer or primary throat cancer, and you meet all other criteria to be eligible to receive compensation, you will only receive compensation for the single most serious disease with which you have been diagnosed that will provide you with the highest amount of compensation.

9.	Have you, or anyone on your behalf, submitted a claim to receive compensation as a <i>Blais</i> Class Member?	Yes ☐ No ☐
10.	Have you, or anyone on your behalf, already received compensation as a <i>Blais</i> Class Member? Note: If you answer “Yes” to Question 10, then you are <u>not</u> eligible to receive compensation from the PCC Compensation Plan. Your application to make a claim to the PCC Compensation	Yes ☐ No ☐

	Plan is <u>terminated</u> at this point, and you are not entitled to proceed to complete and submit this Claim Form to the Claims Administrator.	
11.	Are you the heir of a person who died after November 20, 1998 and satisfied the criteria to be eligible to receive compensation as a <i>Blais</i> Class Member? [link to Q&As definition of “heir” on the Claims Administrator’s website]. <u>Note:</u> If you answer “Yes” to Question 11, then you are <u>not</u> eligible to receive compensation from the PCC Compensation Plan. Your application to make a claim to the PCC Compensation Plan is <u>terminated</u> at this point, and you are not entitled to proceed to complete and submit this Claim Form to the Claims Administrator. You may determine whether you are eligible to receive compensation as a <i>Blais</i> Class Member at [link to QCAPs’ section of Claims Administrator’s website].	Yes ☐ No ☐
12.	Were you diagnosed with primary lung cancer before March 12, 2012? [link to FAQs definition of “Primary Lung Cancer”] <u>Note:</u> If you answer “Yes” to Question 12, then you are <u>not</u> eligible to	Yes ☐ Date of diagnosis of lung cancer: _____ (DD/MM/YYYY)

	receive compensation from the PCC Compensation Plan. Your application to make a claim to the PCC Compensation Plan is <u>terminated</u> at this point, and you are not entitled to proceed to complete and submit this Claim Form to the Claims Administrator. You may determine whether you are eligible to receive compensation as a <i>Blais</i> Class Member at [link to QCAPs' section of Claims Administrator's website].	No ☐
13.	Were you diagnosed with primary squamous cell carcinoma of the larynx, the oropharynx or the hypopharynx (throat cancer) before March 12, 2012? [link to FAQs definitions of "Larynx", "Oropharynx" and "Hypopharynx"] Note: If you answer "Yes" to Question 13, then you are <u>not</u> eligible to receive compensation from the PCC Compensation Plan. Your application to make a claim to the PCC Compensation Plan is <u>terminated</u> at this point, and you are not entitled to proceed to complete and submit this Claim Form to the Claims Administrator.	Yes ☐ Date of diagnosis of throat cancer: (DD/MM/YYYY) No ☐

	You may determine whether you are eligible to receive compensation as a <i>Blais</i> Class Member at [link to QCAPs' Claims Administrator's website].	
14.	Were you diagnosed with Emphysema/COPD (GOLD Grade III or IV) before March 12, 2012? [link to FAQs definitions of "Emphysema" and "COPD"] <u>Note:</u> If you answer "Yes" to Question 14, <u>and</u> you were not diagnosed with either primary lung cancer or primary squamous cell carcinoma of the larynx, the oropharynx or the hypopharynx (throat cancer) between March 8, 2015 and March 8, 2019, then you are <u>not</u> eligible to receive compensation from the PCC Compensation Plan. Your application to make a claim to the PCC Compensation Plan is <u>terminated</u> at this point, and you are not entitled to proceed to complete and submit this Claim Form to the Claims Administrator. You may determine whether you are eligible to receive compensation as a <i>Blais</i> Class Member at [link to QCAPs' Claims Administrator's website].	Yes ☐ Date of diagnosis of Emphysema/COPD (GOLD Grade III or IV): _____ (DD/MM/YYYY) No ☐

15.	Were you diagnosed with primary lung cancer between March 8, 2015 and March 8, 2019? Note: If you answer “Yes” to Question 15, then you may be eligible to receive compensation from the PCC Compensation Plan. Please proceed to Section VI.	Yes ☐ Date of diagnosis of lung cancer: _____ (DD/MM/YYYY) No ☐
16.	Were you diagnosed with primary squamous cell carcinoma of the larynx, the oropharynx or the hypopharynx (throat cancer) between March 8, 2015 and March 8, 2019? Note: If you answer “Yes” to Question 16, then you may be eligible to receive compensation from the PCC Compensation Plan. Please proceed to Section VI.	Yes ☐ Date of diagnosis of throat cancer: _____ (DD/MM/YYYY) No ☐
17.	Were you diagnosed with Emphysema/COPD (GOLD Grade III or IV) between March 8, 2015 and March 8, 2019? Note: If you answer “Yes” to Question 17, then you may be eligible to receive compensation from the PCC Compensation Plan. Please proceed to Section VI.	Yes ☐ Date of diagnosis of Emphysema/COPD (GOLD Grade III or Grade IV): _____ (DD/MM/YYYY) No ☐

Section VI: Eligibility of Residents of the Provinces other than Quebec and Residents of the Territories to receive Compensation

Complete this section only if you live in a Province other than Quebec, or in one of the Territories. If you live in Quebec, please answer the Questions in Section V above.

PLEASE READ CAREFULLY:

To be eligible to receive compensation under the PCC Compensation Plan, you must meet all of the following criteria:

1. You reside in any Province or any Territory;
2. You were alive on March 8, 2019;
3. Between January 1, 1950 and November 20, 1998, you smoked a minimum of twelve pack-years of cigarettes sold by the Canadian Tobacco Companies;

Note: The calculator at this link [\[insert link to Pack-Years Calculator\]](#) will assist you to calculate the number of pack-years which you smoked.

4. Between March 8, 2015 and March 8, 2019 (inclusive of those dates), you were diagnosed with:
 - (a) Primary lung cancer, or
 - (b) Primary cancer (squamous cell carcinoma) of the larynx, the oropharynx or the hypopharynx (throat cancer), or
 - (c) Emphysema/COPD (GOLD Grade III or IV);

AND

5. On the date of your diagnosis with lung cancer, throat cancer or Emphysema/COPD GOLD Grade III or IV you resided in any Province or any Territory.

If you have been diagnosed with Emphysema/COPD (GOLD Grade III or IV) and either primary lung cancer or primary throat cancer, and you meet all other criteria to be eligible to receive compensation, you will only receive compensation for the most serious disease with which you have been diagnosed that will provide you with the highest amount of compensation.

Note: If you answer “No” to all of Questions 18, 19 and 20, then you are not eligible to receive compensation from the PCC Compensation Plan. Your application to make a claim to the PCC Compensation Plan is terminated at this point, and you may not complete and submit this Claim Form to the Claims Administrator.

18.	Were you diagnosed with primary lung cancer between March 8, 2015 and March 8, 2019? [link to FAQs definition of “Primary Lung Cancer”]	Yes ☐ Date of diagnosis of lung cancer: _____ (DD/MM/YYYY) No ☐
19.	Were you diagnosed with primary squamous cell carcinoma of the larynx, the oropharynx or the hypopharynx (throat cancer) between March 8, 2015 and March 8, 2019? [link to FAQs definitions of “Larynx”, “Oropharynx” and “Hypopharynx”]	Yes ☐ Date of diagnosis of throat cancer: _____ (DD/MM/YYYY) No ☐
20.	Were you diagnosed with Emphysema/COPD (GOLD Grade III or IV) between March 8, 2015 and March 8, 2019? [link to FAQs definitions of “Emphysema” and “COPD”]	Yes ☐ Date of diagnosis of Emphysema/COPD (GOLD Grade III or Grade IV): _____ (DD/MM/YYYY) No ☐
21.	Did you reside in Canada on the date on which you were diagnosed with primary lung cancer, primary squamous cell carcinoma of the larynx, the oropharynx or the hypopharynx (throat cancer), or Emphysema/COPD (GOLD Grade III or IV)? <u>Note:</u> If you answer “No” to Question 21, then you are <u>not</u> eligible to receive compensation from the PCC Compensation Plan. Your application to	Yes ☐ Province or Territory in which you resided on the date of your diagnosis: _____ No ☐

	make a claim to the PCC Compensation Plan is <u>terminated</u> at this point, and you may not complete and submit this Claim Form to the Claims Administrator.	
Section VII: Payment Method		
22.	If the Claims Administrator determines that you are eligible to receive compensation from the PCC Compensation Plan, how do you wish to receive payment?	By cheque mailed to the address that I provided in Section II of this Claim Form ☐ <u>OR</u> By direct deposit into my bank account ☐ <u>Please attach a “Void” cheque</u> and provide the following information regarding the bank account in your name: Financial Institution: _____ Branch Address: _____ City: _____ Province: _____ Postal Code: _____ Name on Account: _____ Branch Number: _____ Financial Institution Number: _____ Account Number: _____

Section VIII: Contact Authorization (complete this section only if you would like the Claims Administrator to communicate with someone else regarding your PCC Claim).

I authorize the Claims Administrator to speak with _____,
my _____, on my behalf. (Name)
(Relationship)

Section IX: Consent to Disclosure and Release of Records

I understand that in order to process my Claim it will be necessary for my personal information that is in the possession of physicians, health care professionals, hospitals, clinics, or other third parties to be disclosed to the Claims Administrator. I also understand that by signing this Claim Form and submitting it to the Claims Process I am consenting to the disclosure to the Claims Administrator of my personal information by physicians and health care professionals from whom I have received care, to be used and disclosed by the Claims Administrator in accordance with the CCAA Plans.

Yes ☐

No ☐

Section X: Privacy Notice

I understand and agree that the Claims Administrator may collect, use and disclose my personal information, including personal health information, related to my Claim in accordance with its Privacy Policy found at ([link to Privacy Policy on Claims Administrator's website](#)) in order to provide its claims management services on my behalf. The Claims Administrator may share my personal information with any subsequent Court-appointed Claims Administrator, if required, in connection with the processing and administration of my Claim. My personal information may not be used or disclosed for purposes other than those for

Yes ☐

No ☐

which it was collected, except with my consent or as required by law.	

Section XI: Statutory Declaration

INSTRUCTIONS TO COMPLETE STATUTORY DECLARATION

You must sign the Statutory Declaration below in the presence of a Commissioner of Oaths, sometimes referred to as a Commissioner for taking Affidavits.

A Commissioner of Oaths is a person who is authorized to take affidavits or declarations by asking you to swear or affirm that the statements in a document are true. Every lawyer and some paralegals are Commissioners of Oaths. A notary public for the Province or Territory where the Declaration is made has all the powers of a Commissioner of Oaths.

If you need assistance, you may contact the Agent, Epiq, at [insert link to Agent's website] which can arrange for a Commissioner of Oaths to commission your signing of your Statutory Declaration before you submit your Claim to the Claims Administrator.

The Commissioner of Oaths must complete Sections XI and XII, and if applicable, Section XIII.

The interpreter, if any, must complete Sections XIV and XV.

I, _____, make this solemn Declaration conscientiously believing it to be true, and knowing that it is of the same force and effect as if made under oath.

The information that I have provided on this Claim Form is true and correct and the documents submitted in support of my claim are authentic and have not been modified in any way whatsoever.

Where someone has helped me with this Claim Form, or where an interpreter was used, that person has read to me everything they wrote and included with this Claim Form, if necessary to allow me to understand the content of this completed Claim Form and any attachments to it, and I confirm that this information is true and correct.

I am not making any false or exaggerated Claims to obtain compensation that I am not entitled to receive.

Declared before me

at _____ (Town/City/Municipality)

in _____ (Province/Territory)

this _____ day of _____, 20____

Signature of PCC-Claimant

Signature of Commissioner of Oaths/Notary Public

Commissioner of Oaths/Notary Public: please sign above and complete Section XII below. If applicable, complete Section XIII.

Please place Commissioner of Oath's stamp/Notarial Seal here, if applicable.

Section XII: Commissioner of Oaths/Notary Public Information

Full Name (First Name, Middle Name and Last Name):

Address:

Business Phone:	
Email:	
Section XIII: Certification by Commissioner of Oaths/Notary Public when an Interpreter is used (only complete this Section if it is applicable).	
I certify that this Declaration Form was read or interpreted in my presence to the declarant, the declarant appeared to understand it, and the declarant signed the Declaration or placed their mark on it in my presence.	
_____ Signature of Commissioner of Oaths/Notary Public	_____ Print Name of Commissioner of Oaths/Notary Public
Section XIV: Interpreter Information (only complete this Section if it is applicable).	
Full Name (First Name, Middle Name and Last Name):	
Address:	
Business Phone:	
Email:	
Section XV: Certification by Interpreter if used (only complete this Section if it is applicable).	
I certify that I correctly interpreted this Claim Form in _____ (specify language) to the declarant, and the declarant appeared to understand it.	
_____ Signature of Interpreter	_____ Print Name of Interpreter
_____ Date Signed	

APPENDIX “D”

Pan-Canadian Claimants’ Compensation Plan

**CLAIM FORM TO BE COMPLETED BY
LEGAL REPRESENTATIVE ON BEHALF OF PCC-CLAIMANT
OR ESTATE OF PCC-CLAIMANT**

This Claim Form is required to be completed by the Legal Representative of any person, referred to in this Form as the “PCC-Claimant”, or the Legal Representative of the estate of a PCC-Claimant, who may be entitled to receive payment of financial compensation from the Pan-Canadian Claimants’ Compensation Plan, referred to in this Form as the “PCC Compensation Plan”.

Complete this Claim Form if the PCC-Claimant is either deceased, or alive but not capable of making decisions regarding their financial affairs.

To be eligible to receive payment of financial compensation from the PCC Compensation Plan, the PCC-Claimant or the estate of the PCC-Claimant must meet all of the following PCC Eligibility Criteria:

- 1. If the PCC-Claimant is alive, they must reside in a Province or Territory in Canada. If the PCC-Claimant is deceased, they must have resided in a Province or Territory in Canada on the date of their death;**
- 2. The PCC-Claimant was alive on March 8, 2019;**
- 3. Between January 1, 1950 and November 20, 1998, the PCC-Claimant smoked a minimum of twelve pack-years of cigarettes sold by the Canadian Tobacco Companies;**

Note: The calculator at this link [\[insert link to Pack-Years Calculator\]](#) will assist you to calculate the number of pack-years that the PCC-Claimant smoked.

- 4. Between March 8, 2015 and March 8, 2019 (inclusive of those dates), the PCC-Claimant was diagnosed with:**
 - (d) Primary lung cancer, or**
 - (e) Primary cancer (squamous cell carcinoma) of the larynx, the oropharynx or the hypopharynx (throat cancer), or**
 - (f) Emphysema/COPD (GOLD Grade III or IV);**

AND

5. On the date of the PCC-Claimant's diagnosis with lung cancer, throat cancer or Emphysema/COPD GOLD Grade III or IV the PCC-Claimant resided in any Province or any Territory.

If the PCC-Claimant is or, if deceased was, a resident of Quebec and does not meet the above PCC Eligibility Criteria, the PCC-Claimant or their estate, as applicable, may be eligible to receive compensation as a *Blais* Class Member in accordance with the judgments of the Superior Court of Quebec in *Létourneau v. JTI-Macdonald Corp.*, 2015 QCCS 2382, and the judgment of the Court of Appeal of Quebec in *Imperial Tobacco Canada ltée c. Conseil québécois sur le tabac et la santé et al.*, 2019 QCCA 358, if they meet all of the following criteria:

1. They reside or, if deceased resided, in Quebec;
2. Between January 1, 1950 and November 20, 1998, they smoked a minimum of twelve pack-years of cigarettes sold by the Canadian Tobacco Companies.

Note: The calculator at this link [\[insert link to Pack-Years Calculator\]](#) will assist you to calculate the number of pack-years that they smoked.

3. Before March 12, 2012, they were diagnosed with:
 - (d) Primary lung cancer, or
 - (e) Primary cancer (squamous cell carcinoma) of the larynx, the oropharynx or the hypopharynx (throat cancer), or
 - (f) Emphysema/COPD (GOLD Grade III or IV).
4. On the date of their diagnosis with lung cancer, throat cancer or Emphysema/COPD (GOLD Grade III or IV), they resided in Quebec.

AND

5. The *Blais* Class Members include the heirs of all persons who died after November 20, 1998 and satisfied the above criteria.

You are only permitted to make one claim for compensation on behalf of either a *Blais* Class Member or a PCC-Claimant under the PCC Compensation Plan. You cannot make a claim to both Claims Processes. You may determine whether the person or estate on whose behalf you are acting is eligible to receive compensation as a *Blais* Class Member at [\[link to QCAPs' section of Claims Administrator's website\]](#).

You do not need a lawyer to complete this Claim Form.

Only a person who has the right and is authorized by one of the documents listed in Section IV to act on behalf of the PCC-Claimant may complete this Claim Form as the PCC-Claimant's Legal Representative. If you do not have one of the documents listed in Section IV, then any

Claim Form or other documents which you complete will not be accepted by the Claims Administrator.

To make a Claim to the PCC Compensation Plan, you must submit all of the following fully completed documents to the Claims Administrator:

- ☐ **This Claim Form which you have completed as the Legal Representative of the PCC-Claimant or the estate of the PCC-Claimant with all requested documents attached. If you are the PCC-Claimant and are submitting a claim on your own behalf, you must complete the Claim Form to be completed by the PCC-Claimant instead of this Claim Form with all requested documents attached. You are required to sign the Statutory Declaration in Section XII of the Claim Form in the presence of a Commissioner of Oaths;**
- ☐ **One of the following documents to prove the PCC-Claimant's diagnosis:**
 - ☐ **A copy of a pathology report which confirms that the PCC-Claimant was diagnosed with Lung Cancer or Throat Cancer, as applicable, between March 8, 2015 and March 8, 2019 (inclusive of those dates); or**
 - ☐ **A copy of a report of a spirometry test performed on the PCC-Claimant between March 8, 2015 and March 8, 2019 (inclusive of those dates), that first demonstrated a FEV1 (non-reversible) of less than 50% of the predicted value to first establish a diagnosis of Emphysema/COPD (GOLD Grade III or IV); or**
 - ☐ **A copy of an extract from the PCC-Claimant's medical file confirming the diagnosis of Lung Cancer, Throat Cancer or Emphysema/COPD (GOLD Grade III or IV) between March 8, 2015 and March 8, 2019 (inclusive of those dates); or**
 - ☐ **A completed Physician Form; or**
 - ☐ **A written statement from the PCC-Claimant's Physician, or another physician having access to their medical record, confirming the diagnosis of Lung Cancer or Throat Cancer between March 8, 2015 and March 8, 2019 (inclusive of those dates) and providing at least one of the following records to verify the diagnosis and date of diagnosis: pathology report, operative report, biopsy report, MRI report, CT scan report, PET scan report, x-ray report and/or sputum cytology report.**

Deadline to submit all of your completed Claim Forms and documents: This Claim Form and all requested documents supporting the Claim must be submitted to the Claims Administrator as a complete package by no later than [the PCC Claims Application Deadline which is TBD].

The Claims Administrator will not accept and review the Claim to determine whether the PCC-Claimant or, if the PCC-Claimant is deceased, the PCC-Claimant's estate, is eligible to receive

compensation under the PCC Compensation Plan unless ALL of the fully completed Claim Form and ALL requested medical and other documents have been submitted either online or postmarked by the deadline of [the PCC Claims Application Deadline which is TBD].

For this reason, you should take immediate steps to obtain all of the requested documents as soon as possible in order not to miss the deadline of [the PCC Claims Application Deadline which is TBD].

SUBMIT YOUR CLAIM BY REGISTERED MAIL: All Forms and documents must be postmarked no later than _____, 20____ and mailed to: [Address of Claims Administrator].

OR

SUBMIT YOUR CLAIM ONLINE: All Forms must be submitted online and all documents must be uploaded online at [URL for website of Claims Administrator] by no later than 5:00 p.m. Pacific Time on _____, 20____.

OR

SUBMIT YOUR CLAIM BY EMAIL: All Forms and documents must be emailed to the Claims Administrator to [Email address of Claims Administrator] by no later than 5:00 p.m. Pacific Time on _____, 20____.

OR

SUBMIT YOUR CLAIM BY FAX: All Forms and documents must be faxed to the Claims Administrator to [Fax Number of Claims Administrator] by no later than 5:00 p.m. Pacific Time on _____, 20____. ____.

Section I: Choice of Claim Form

Note: If the PCC-Claimant died before March 8, 2019, neither they nor their estate are eligible to receive compensation from the PCC Compensation Plan. Your application to make a claim to the PCC Compensation Plan is terminated at this point, and you may not complete and submit this Claim Form to the Claims Administrator.

Are you making a claim on behalf of a PCC-Claimant or the estate of a PCC-Claimant as their Legal Representative?	Yes ☐	Please complete the rest of this Claim Form.
	No ☐	If you are making a claim on your own behalf, please complete the Claim Form for the PCC-Claimant.
Is the PCC-Claimant deceased?	Yes ☐	Date of Death (DD/MM/YYYY): _____
		Please attach at least one of the following documents (a certified copy, photocopy or certified electronic

	extract of the document will be accepted by the Claims Administrator): ☐ Death Certificate or Certificate of Death ☐ Short Form Death Certificate ☐ Long Form Death Certificate ☐ Registration of Death or Death Registration ☐ Registration of Death or Death Registration with Cause of Death Information ☐ Medical Certificate of Death issued by an attending doctor or a coroner ☐ Interim Medical Certificate of Death issued by an attending doctor or a coroner ☐ Statement of Death issued by a funeral service provider ☐ Memorandum of Notification of Death issued by the Chief of National Defence Staff ☐ Statement of Verification of Death from the Department of Veterans Affairs No ☐
Was the PCC-Claimant alive on March 8, 2019? Note: If you answer “No” to this Question, then the estate of the PCC-Claimant is <u>not</u> eligible to receive compensation from the PCC Compensation Plan. Your application to make a claim to the PCC Compensation Plan is <u>terminated</u>	☐ Yes ☐ No

at this point, and you may not complete and submit this Claim Form to the Claims Administrator.	
If the PCC-Claimant is alive, please explain why you are completing this form as their Legal Representative.	
Section II: Name, Contact Information and Provincial/Territorial Health Insurance Number of PCC-Claimant	
Full Name (First Name, Middle Name and Last Name):	
Date of Birth:	Date: _____ (DD/MM/YYYY)
Provincial/Territorial Health Insurance Number that the PCC-Claimant uses (i) in the Province or Territory in which they currently live or, (ii) if deceased, in the Province or Territory in which they lived at the date of their death:	_____
Between March 8, 2015 and March 8, 2019, did the PCC-Claimant live in a different Province or Territory?	Yes ☐ Province or Territory in which the PCC-Claimant lived between March 8, 2015 and March 8, 2019: _____ Please provide the Provincial/Territorial Health Insurance Number that the PCC-Claimant used while living in a different Province or Territory between March 8, 2015 to March 8, 2019: _____ No ☐

Street Address of Current Residence or, if the PCC-Claimant is deceased, Street Address at Date of Death:	
Unit/Apartment Number:	
City/Town:	
Province/Territory	
Postal Code:	
Country:	
Home Phone (If the PCC-Claimant is alive):	
Work Phone (If the PCC-Claimant is alive):	
Cell Phone (If the PCC-Claimant is alive):	
Email Address (If the PCC-Claimant is alive):	
Section III: Name and Contact Information of Legal Representative Any communications from the Claims Administrator and any cheque for compensation will be <u>made payable to the PCC-Claimant or the estate of the PCC-Claimant</u> , as applicable, and sent to you as their Legal Representative in accordance with the contact information you provide below. Any cheque for compensation will not be made payable directly to you as the Legal Representative for the PCC-Claimant or the estate of the PCC-Claimant.	
Legal Representative's Full Name (First Name, Middle Name and Last Name):	
Legal Representative's Street Address:	
Legal Representative's Unit/Apartment Number:	

Legal Representative's City/Town:	
Legal Representative's Province/Territory	
Legal Representative's Postal Code:	
Legal Representative's Country:	
Legal Representative's Home Phone:	
Legal Representative's Work Phone:	
Legal Representative's Cell Phone:	
Legal Representative's Email address:	
Legal Representative's Preferred Method of Contact:	☐ Telephone ☐ Email ☐ Mail
Preferred Language of Communication:	☐ English ☐ French
Section IV: Proof of Entitlement to act as Legal Representative of a PCC-Claimant or the estate of a PCC-Claimant	
If at the time you complete this Claim Form the <u>PCC-Claimant is alive</u> and resides in any Province <u>other than Quebec</u> or in any Territory, you <u>must attach</u> one of the following documents to verify that you have the right and are	☐ Not applicable ☐ If the PCC-Claimant has Indian Status and resides on a reserve or on Crown lands: ☐ Document showing you have been appointed as the PCC-Claimant's Administrator of Property

authorized to make a claim on behalf of the PCC-Claimant (a certified copy, photocopy or certified electronic extract of the document will be accepted by the Claims Administrator):

Note: If you are not able to provide the Claims Administrator with one of the documents listed in this Question, your application to make a claim to the PCC Compensation Plan on behalf of a PCC-Claimant is terminated at this point, and you may not complete and submit this Claim Form to the Claims Administrator.

- ☐ **If the PCC-Claimant resides in British Columbia:**
 - ☐ Power of Attorney
 - ☐ Enduring Power of Attorney
 - ☐ Representation Agreement for financial and legal affairs
 - ☐ Statutory Property Guardianship
 - ☐ Document showing that you have been appointed as the Private Committee of the Estate of the PCC-Claimant
 - ☐ Document showing that the Public Guardian and Trustee has been appointed as the Committee of the Estate of the PCC-Claimant
- ☐ **If the PCC-Claimant resides in Alberta:**
 - ☐ Enduring Power of Attorney
 - ☐ Document showing that you have been appointed as the trustee for the PCC-Claimant
 - ☐ Supported Decision-making Authorization
 - ☐ Document showing that the Public Guardian and Trustee has been appointed as the trustee for the PCC-Claimant
- ☐ **If the PCC-Claimant resides in Saskatchewan:**
 - ☐ Property Power of Attorney
 - ☐ Enduring Property Power of Attorney
 - ☐ Springing Property Power of Attorney
 - ☐ Contingent Enduring Property Power of Attorney
 - ☐ Document showing that you have been appointed as the PCC-Claimant's Property Co-decision-maker by the Court
 - ☐ Document showing that you have been appointed as the PCC-Claimant's Temporary Property Guardian by the Court

	☐ Document showing that you have been appointed as the PCC-Claimant's Property Guardian by the Court ☐ If the PCC-Claimant resides in Manitoba: ☐ Power of Attorney ☐ Enduring Power of Attorney ☐ Springing Power of Attorney ☐ Document showing that you have been appointed as the Private Committee of Property for the PCC-Claimant (Order of Committeeship) ☐ Document showing that you have been appointed as the Private Committee of Property and Personal Care for the PCC-Claimant (Order of Committeeship) ☐ Document showing that the Public Guardian and Trustee has been appointed as the Committee for the PCC-Claimant ☐ If the PCC-Claimant resides in Ontario: ☐ Power of Attorney for Property ☐ Continuing Power of Attorney for Property ☐ Document showing that you have been appointed as the PCC-Claimant's Guardian of Property by the Office of the Public Guardian and Trustee ☐ Document showing that you have been appointed as the PCC-Claimant's Guardian of Property by the Court ☐ Document showing that the Public Guardian and Trustee has been appointed as the Committee for the PCC-Claimant ☐ If the PCC-Claimant resides in New Brunswick: ☐ Power of Attorney for Property ☐ Enduring Power of Attorney for Property

	☐ Enduring Power of Attorney for Property and Personal Care ☐ Document showing that you have been appointed as the Committee of the Estate of the PCC-Claimant ☐ If the PCC-Claimant resides in Nova Scotia: ☐ Power of Attorney authorizing your management of the PCC-Claimant's estate ☐ Enduring Power of Attorney authorizing your management of the PCC-Claimant's estate ☐ Document showing that you have been appointed as the PCC-Claimant's Guardian by the Court ☐ Document showing that you have been appointed as the PCC-Claimant's Representative by the Court (Representation Order) ☐ If the PCC-Claimant resides in Prince Edward Island: ☐ Specific Power of Attorney ☐ General Power of Attorney ☐ Enduring Power of Attorney ☐ Continuing Power of Attorney ☐ Document showing that you have been appointed as the Guardian of the PCC-Claimant ☐ Document showing that you have been appointed as the Committee of the Estate of the PCC-Claimant ☐ If the PCC-Claimant resides in Newfoundland and Labrador: ☐ Enduring Power of Attorney ☐ Document showing that Letters of Guardianship of the Estate of the PCC-Claimant have been granted to you by the Court

	☐ If the PCC-Claimant resides in Yukon: ☐ Enduring Power of Attorney ☐ Document showing that you have been appointed as the Temporary Guardian or Permanent Guardian for the PCC-Claimant ☐ Guardianship Order appointing the Public Guardian and Trustee as Guardian for the PCC-Claimant ☐ If the PCC-Claimant resides in Northwest Territories: ☐ Power of Attorney ☐ Enduring Power of Attorney ☐ Springing Power of Attorney ☐ Document showing that you have been appointed as the Guardian of the PCC-Claimant with power over legal or financial matters ☐ Document showing that you have been appointed as the Trustee of the PCC-Claimant ☐ Order of Trusteeship appointing the Public Trustee as Trustee of the PCC-Claimant's Estate ☐ If the PCC-Claimant resides in Nunavut: ☐ Power of Attorney ☐ Enduring Power of Attorney ☐ Springing Power of Attorney ☐ Order appointing you as Trustee for the PCC-Claimant ☐ Order appointing you as Guardian for the PCC-Claimant with a power over their estate ☐ Order appointing the Public Guardian as Guardian for the PCC-Claimant

If at the time you complete this Claim Form the **PCC-Claimant is deceased** and, at the time of the PCC-Claimant's death, the PCC-Claimant resided in any Province **other than Quebec** or in any Territory at the time of their death, you **must attach** one of the following documents to verify that you have the right and are authorized to make a claim on behalf of the PCC-Claimant's estate (a certified copy, photocopy or certified electronic extract of the document will be accepted by the Claims Administrator):

Note: If you are not able to provide the Claims Administrator with one of the documents listed in this Question, your application to make a claim to the PCC Compensation Plan on behalf of a PCC-Claimant's estate is **terminated at this point**, and you may not complete and submit this Claim Form to the Claims Administrator.

- ☐ Not applicable
- ☐ **If the PCC-Claimant had Indian Status and resided on a reserve or on Crown lands:**
 - ☐ Notice of Appointment as Estate Administrator
 - ☐ Notice of Appointment as Estate Executor
 - ☐ Document showing Indigenous Services Canada or Crown-Indigenous Relations and Northern Affairs Canada is acting as the Estate Administrator
- ☐ **If the PCC-Claimant died in British Columbia:**
 - ☐ Representation Grant (Estate Grant)
 - ☐ Grant of Probate (issued by a Court when a person dies with a will)
 - ☐ Grant of Administration (issued by a Court when a person dies without a will)
- ☐ **If the PCC-Claimant died in Alberta:**
 - ☐ Grant of Probate (issued by a Court when a person dies with a will)
 - ☐ Grant of Double Probate (issued by a Court when a person dies with a will and the personal representative had previously reserved their right to apply later for probate, or when the named alternate personal representative needs to complete the administration)
 - ☐ Grant of Administration or Letters of Administration (issued by a Court when a person dies without a will)
 - ☐ Grant of Administration with Will Annexed or Letters of Administration with Will Annexed (where the personal representative appointed under the will has died, or is otherwise unwilling or unable to take on the responsibilities, or the will does not appoint a personal representative, the Court may appoint a personal representative to administer a person's estate)

	☐ If the PCC-Claimant died in Saskatchewan: ☐ Letters Probate or Grant of Probate (issued by a Court when a person dies with a will) ☐ Letters of Administration or Grant of Administration (issued by a Court when a person dies without a will) ☐ Letters of Administration with Will Annexed (where the personal representative appointed under the will has died, or is otherwise unwilling or unable to take on the responsibilities, or the will does not appoint a personal representative, the Court may appoint a personal representative to administer a person's estate) ☐ If the PCC-Claimant died in Manitoba: ☐ Grant of Probate (issued by a Court when a person dies with a will) ☐ Letters of Administration (estates over \$10,000) ☐ Letters of Administration with Will Annexed (where the personal representative appointed under the will has died, or is otherwise unwilling or unable to take on the responsibilities, or the will does not appoint a personal representative, the Court may appoint a personal representative to administer a person's estate) ☐ Administration Order (estates under \$10,000) ☐ If the PCC-Claimant died in Ontario: ☐ Certificate of Appointment of Estate Trustee without a Will ☐ Certificate of Appointment of Estate Trustee with a Will ☐ Small Estate Certificate ☐ Probate Certificate ☐ If the PCC-Claimant died in New Brunswick:

	☐ Letters of Administration (issued by a Court when a person dies without a will)
	☐ Letters Probate (issued by a Court when a person dies with a will)
	☐ Letters of Administration with Will Annexed (where the personal representative appointed under the will has died, or is otherwise unwilling or unable to take on the responsibilities, or the will does not appoint a personal representative, the Court may appoint a personal representative to administer a person's estate)
	☐ If the PCC-Claimant died in Nova Scotia:
	☐ Grant of Administration (issued by a Court when a person dies without a will)
	☐ Grant of Probate (issued by a Court when a person dies with a will)
	☐ Grant of Administration with Will Annexed (where the personal representative appointed under the will has died, or is otherwise unwilling or unable to take on the responsibilities, or the will does not appoint a personal representative, the Court may appoint a personal representative to administer a person's estate)
	☐ If the PCC-Claimant died in Prince Edward Island:
	☐ Letters of Administration (issued by a Court when a person dies without a will)
	☐ Letters Probate (issued by a Court when a person dies with a will)
	☐ Letters of Administration with the Will Annexed (where the personal representative appointed under the will has died, or is otherwise unwilling or unable to take on the responsibilities, or the will does not appoint a personal representative, the Court may appoint a personal representative to administer a person's estate)
	☐ If the PCC-Claimant died in Newfoundland and Labrador:

	☐ Grant of Probate (issued by a Court when a person dies with a will) ☐ Letters of Administration (issued by a Court when a person dies without a will) ☐ Letters of Administration, CTA (cum testamento annexo) (With Will Annexed) - issued where there is a will but there is no executor named, or when the executor is unable or unwilling to apply for the grant ☐ Letters of Administration, DBN (De Bonis Non) - issued where an administrator of an estate dies or becomes incapable of continuing with his or her duties after a grant is made, but prior to the completion of the administration ☐ Letters of Administration CTA DBN - issued where there is a will but the executor or administrator CTA dies or becomes incapacitated and therefore is unable to continue with his or her duties after a grant is made, but prior to the completion of the administration (and there is no other person to step into that position according to the terms of any will) ☐ If the PCC-Claimant died in Yukon: ☐ Grant of Probate or Letters of Probate (issued by a Court when a person dies with a will) ☐ Letter of Administration (issued by a Court when a person dies without a will) ☐ Grant of Administration with Will Annexed or Letters of Administration with Will Annexed (where the personal representative appointed under the will has died, or is otherwise unwilling or unable to take on the responsibilities, or the will does not appoint a personal representative, the Court may appoint a personal representative to administer a person's estate) ☐ If the PCC-Claimant died in Northwest Territories: ☐ Declaration of Small Estate (issued by a Court if the net value of the estate of the deceased reasonably appears to be less than \$35,000)

	☐ Grant of Probate (issued by a Court when a person dies with a will) ☐ Grant of Administration (issued by a Court when a person dies without a will) ☐ Grant of Administration with Will Annexed (where the personal representative appointed under the will has died, or is otherwise unwilling or unable to take on the responsibilities, or the will does not appoint a personal representative, the Court may appoint a personal representative to administer a person's estate) ☐ Grant of Double Probate (issued by a Court when a person dies with a will and the personal representative had previously reserved their right to apply later for probate, or when the named alternate personal representative needs to complete the administration) ☐ If the PCC-Claimant died in Nunavut: ☐ Certificate of Appointment of Estate Trustee with a Will (issued by a Court when a person dies with a will) ☐ Letters of Administration (issued by a Court when a person dies without a will)
If at the time you complete this Claim Form the <u>PCC-Claimant is alive</u> and <u>resides in Quebec</u>, you <u>must attach</u> one of the following documents to verify that you have the right and are authorized to make a claim on behalf of the PCC-Claimant (a certified copy, photocopy or certified electronic extract of the document will be accepted by the Claims Administrator): <u>Note:</u> If you are not able to provide the Claims Administrator with	☐ Power of Attorney ☐ Mandate in case of incapacity ☐ Tutorship to persons of full age ☐ Curatorship to persons of full age ☐ Detailed Mandate ☐ Not applicable

one of the documents listed in this Question, your application to make a claim to the PCC Compensation Plan on behalf of a PCC-Claimant is <u>terminated</u> at this point, and you may not complete and submit this Claim Form to the Claims Administrator.	
If at the time you complete this Claim Form the <u>PCC-Claimant is deceased</u> and, at the time of the PCC-Claimant's death, they <u>resided in Quebec</u>, you <u>must attach</u> one of the following documents to verify that you have the right and are authorized to make a claim on behalf of the PCC-Claimant's estate (a certified copy, photocopy or certified electronic extract of the document will be accepted by the Claims Administrator): <u>Note:</u> If you are not able to provide the Claims Administrator with one of the documents listed in this Question, your application to make a claim to the PCC Compensation Plan on behalf of a PCC-Claimant's estate is <u>terminated</u> at this point, and you may	☐ The deceased PCC-Claimant <u>had a written will</u> and I have attached copies of the following documents: ☐ The PCC-Claimant's Death Certificate; ☐ A will search from the Chambre des notaires on the deceased PCC-Claimant; ☐ A will search from the Bar of Quebec on the deceased PCC-Claimant; and ☐ One of the following documents: ☐ A copy of the notarial will of the deceased PCC-Claimant, appointing me as the executor/liquidator of the deceased PCC-Claimant's estate; ☐ A copy of the judgment probating the will of the deceased PCC-Claimant, confirming my appointment as the executor/liquidator of the deceased PCC-Claimant's estate; or ☐ Any other official document confirming my status as the executor/liquidator of the deceased PCC-Claimant's estate. ☐ The deceased PCC-Claimant <u>did not have a written will</u> and I have attached copies of the following documents ☐ The PCC-Claimant's Death Certificate;

not complete and submit this Claim Form to the Claims Administrator.	☐ A will search from the Chambre des notaires on the deceased PCC-Claimant; ☐ A will search from the Bar of Quebec on the deceased PCC-Claimant; or ☐ Any document proving my status to make a claim for compensation in respect of the deceased PCC-Claimant. ☐ Not applicable
What is/was your relationship to the PCC-Claimant?	
How long have you known, or if the PCC-Claimant is deceased how long did you know the PCC-Claimant?	
Section V: PCC-Claimant's Place of Residence If the PCC-Claimant lives in Canada, their place of residence is the Province or Territory which issued their health insurance card and/or their driver's licence.	
1.	Between January 1, 1950 and November 20, 1998, did the PCC-Claimant reside in Canada? Note: If you answer "No" to Question 1, then the PCC-Claimant is <u>not</u> eligible to receive compensation from the PCC Compensation Plan. Your application to make a claim to the PCC Compensation Plan is <u>terminated</u> at this point, and you may not complete and submit this Claim Form to the Claims Administrator. Yes ☐ No ☐
2.	Does the PCC-Claimant currently reside in Quebec? Note: If you answer "Yes" to Question 2, please proceed to complete Sections VI, VII, IX, X, XI and XII. <u>Do not complete Section VIII (which is the form for non-Quebec residents) and do not complete Question 3 below.</u> Yes ☐ No ☐

3.	Does the PCC-Claimant currently reside in one of the Provinces other than Quebec, or in one of the Territories in Canada? Note: If you answer “Yes” to Question 3, please proceed to complete Sections VI, VIII, IX, X, XI and XII. Do not complete Section VII (which is for Quebec residents only). If you answer “No” to Question 3, then the PCC-Claimant is <u>not</u> eligible to receive compensation from the PCC Compensation Plan. Your application to make a claim to the PCC Compensation Plan is <u>terminated</u> at this point, and you may not complete and submit this Claim Form to the Claims Administrator.	Yes ☐ Province or Territory of current residence: _____ No ☐ Current country of residence: _____
Section VI: Smoking History To be eligible to receive compensation under the PCC Compensation Plan, between January 1, 1950 and November 20, 1998, the PCC-Claimant must have smoked a minimum of twelve pack-years of cigarettes (equivalent to 87,600 cigarettes) sold by the Canadian Tobacco Companies which are: Imperial Tobacco Canada Limited; Rothmans, Benson & Hedges Inc.; and JTI-Macdonald Corp. Based upon your answers to Questions 5, 6 and 7, the Claims Administrator will calculate the number of pack-years of cigarettes that the PCC-Claimant smoked between January 1, 1950 and November 20, 1998, to determine the PCC-Claimant’s eligibility to receive compensation under the PCC Compensation Plan.		
4.	When did the PCC-Claimant start smoking cigarettes?	☐ Before January 1, 1976 ☐ On or after January 1, 1976
5.	Between January 1, 1950 and November 20, 1998, for how many years did the PCC-Claimant smoke?	_____ years
6.	During the years that the PCC-Claimant smoked between January 1, 1950 and November 20, 1998, how many cigarettes did the PCC-Claimant smoke per day?	The PCC-Claimant smoked approximately _____ cigarettes per day between January 1, 1950 and November 20, 1998.

	Please indicate the <u>number of cigarettes smoked</u> per day, not the number of packs smoked. If the number of cigarettes the PCC-Claimant smoked per day varied, please proceed to answer Question 7.	
7.	If the number of cigarettes that the PCC-Claimant smoked between January 1, 1950 and November 20, 1998 varied, provide a summary of the number of cigarettes that the PCC-Claimant smoked during that period of time. Please express your summary in terms of the <u>number of cigarettes smoked</u>, not the number of packs smoked. [Note to Draft: The Claims Administrator will be requested to add an auto calculator to the online Claim Form that would calculate the number of pack-years based on the data provided by the PCC-Claimant. If the auto calculator determines that the PCC-Claimant did not smoke twelve pack-years, then the following Note would appear to the PCC-Claimant's Legal Representative: <u>Note:</u> The PCC-Claimant did not smoke a minimum of twelve pack-years of cigarettes between January 1, 1950 and November 20, 1998. As a result, the PCC-Claimant is <u>not</u> eligible to receive compensation from the PCC Compensation Plan. Your application to make a claim to the PCC Compensation Plan is <u>terminated</u> at this point, and you may not complete and submit this Claim Form to the Claims Administrator.]	(a) The PCC-Claimant smoked approximately _____ cigarettes per day between _____ (DD/MM/YYYY) and _____. (DD/MM/YYYY). (b) The PCC-Claimant smoked approximately _____ cigarettes per day between _____ (DD/MM/YYYY) and _____. (DD/MM/YYYY). (c) The PCC-Claimant smoked approximately _____ cigarettes per day between _____ (DD/MM/YYYY) and _____. (DD/MM/YYYY). (d) The PCC-Claimant smoked approximately _____ cigarettes per day between _____ (DD/MM/YYYY) and _____. (DD/MM/YYYY).
8.	Check all of the brands of cigarettes that the PCC-Claimant regularly smoked between January 1, 1950 and November 20, 1998. <u>Note:</u> If the PCC-Claimant did not smoke any of the brands of cigarettes listed in	☐ Accord ☐ B&H

	Question 8 or on the attached list of sub-brands [link to document listing sub-brands], then the PCC-Claimant is <u>not</u> eligible to receive compensation from the PCC Compensation Plan. Your application to make a claim to the PCC Compensation Plan is <u>terminated</u> at this point, and you are not entitled to proceed to complete and submit this Claim Form to the Claims Administrator.	☐ Belmont ☐ Belvedere ☐ Camel ☐ Cameo ☐ Craven “A” ☐ Craven “M” ☐ du Maurier ☐ Dunhill ☐ Export ☐ LD ☐ Macdonald ☐ Mark Ten ☐ Matinee ☐ Medallion ☐ More ☐ North American Spirit ☐ Number 7 ☐ Peter Jackson ☐ Players ☐ Rothmans ☐ Vantage ☐ Viscount ☐ Winston

		☐ Record any other brands smoked from this list: [link to document listing sub-brands]

Section VII: Eligibility of Residents of Quebec to receive Compensation

Complete this section only if the PCC-Claimant lives in Quebec, or if deceased, lived in Quebec at the time of their death. If the PCC-Claimant lives, or if deceased lived, in a Province other than Quebec or in one of the Territories, please proceed to Section VIII.

PLEASE READ CAREFULLY:

Depending on the disease with which the PCC-Claimant has been diagnosed and the date of the PCC-Claimant's diagnosis, as a resident of Quebec the PCC-Claimant may be eligible to receive compensation either from the PCC Compensation Plan, or as a *Blais* Class Member in accordance with the judgments of the Superior Court of Quebec in *Létourneau v. JTI-Macdonald Corp.*, 2015 QCCS 2382, and the judgment of the Court of Appeal of Quebec in *Imperial Tobacco Canada ltée c. Conseil québécois sur le tabac et la santé et al.*, 2019 QCCA 358.

You are only permitted to make one claim for compensation on behalf of the PCC-Claimant either as a *Blais* Class Member or as a PCC-Claimant under the PCC Compensation Plan. You cannot make a claim to both Claims Processes.

Your answers to Questions 9 through 17 will assist you to determine whether you may be able to make a claim as the Legal Representative on behalf of a person who is a *Blais* Class Member or a PCC-Claimant under the PCC Compensation Plan.

To be eligible to receive compensation as a *Blais* Class Member, the PCC-Claimant must meet all of the following criteria:

1. The PCC-Claimant resides in Quebec or, if deceased, resided in Quebec at the time of their death;
2. Between January 1, 1950 and November 20, 1998, the PCC-Claimant smoked a minimum of twelve pack-years of cigarettes sold by the Canadian Tobacco Companies which are: Imperial Tobacco Canada Limited; Rothmans, Benson & Hedges Inc.; and JTI-Macdonald Corp. The

Canadian Tobacco Companies sold the brands of cigarettes listed in Question 8 on this Claim Form.

Twelve pack-years of cigarettes is the equivalent of 87,600 cigarettes which is calculated as any combination of the number of cigarettes smoked in a day multiplied by the number of days of consumption. For example, twelve pack-years equals:

10 cigarettes smoked per day for 24 years ($10 \times 365 \times 24$) = 87,600 cigarettes, or

20 cigarettes smoked per day for 12 years ($20 \times 365 \times 12$) = 87,600 cigarettes, or

30 cigarettes smoked per day for 8 years ($30 \times 365 \times 8$) = 87,600 cigarettes;

Note: The calculator at this link [\[insert link to Pack-Years Calculator\]](#) will assist you to calculate the number of pack-years that the PCC-Claimant smoked.

3. Before March 12, 2012, the PCC-Claimant was diagnosed with:
 - (a) Primary lung cancer, or
 - (b) Primary cancer (squamous cell carcinoma) of the larynx, the oropharynx or the hypopharynx (throat cancer), or
 - (c) Emphysema/COPD (GOLD Grade III or IV).
4. On the date of their diagnosis, the PCC-Claimants resided in Quebec.

AND

5. The *Blais* Class Members include the heirs of all persons who died after November 20, 1998 and satisfied the above criteria.

To be eligible to receive compensation under the PCC Compensation Plan, the PCC-Claimant or the estate of the PCC-Claimant must meet all of the following PCC Eligibility Criteria:

1. If the PCC-Claimant is alive, they must reside in a Province or Territory in Canada. If the PCC-Claimant is deceased, they must have resided in a Province or Territory in Canada on the date of their death;
2. The PCC-Claimant was alive on March 8, 2019;
3. Between January 1, 1950 and November 20, 1998, the PCC-Claimant smoked a minimum of twelve pack-years of cigarettes sold by the Canadian Tobacco Companies;

Note: The calculator at this link [\[insert link to Pack-Years Calculator\]](#) will assist you to calculate the number of pack-years that the PCC-Claimant smoked.

4. Between March 8, 2015 and March 8, 2019 (inclusive of those dates), the PCC-Claimant was diagnosed with:

- (a) Primary lung cancer, or
- (b) Primary cancer (squamous cell carcinoma) of the larynx, the oropharynx or the hypopharynx (throat cancer), or
- (c) Emphysema/COPD (GOLD Grade III or IV);

AND

5. On the date of the PCC-Claimant's diagnosis with lung cancer, throat cancer or Emphysema/COPD (GOLD Grade III or IV) the PCC-Claimant resided in any Province or any Territory.

If the PCC-Claimant has been diagnosed with Emphysema/COPD (GOLD Grade III or IV) and either primary lung cancer or primary throat cancer, and the PCC-Claimant meets all other criteria to be eligible to receive compensation, the PCC-Claimant, or their estate, will only receive compensation for the most serious disease with which the PCC-Claimant has been diagnosed that will provide the highest amount of compensation.

9.	Has the PCC-Claimant, you or anyone else as their Legal Representative, submitted a claim to receive compensation as a <i>Blais</i> Class Member?	Yes ☐ No ☐
10.	Have you or anyone else already received compensation on behalf of the PCC-Claimant as a <i>Blais</i> Class Member? <u>Note:</u> If you answer “Yes” to Question 10, then the PCC-Claimant is <u>not</u> eligible to receive compensation from the PCC Compensation Plan. Your application to make a claim to the PCC Compensation Plan is <u>terminated</u> at this point, and you are not entitled to proceed to complete and submit this Claim Form to the Claims Administrator.	Yes ☐ No ☐
11.	Is the PCC-Claimant the heir of a person who died after November 20, 1998 and satisfied the criteria to be eligible to receive compensation as a <i>Blais</i> Class Member? [link to Q&As definition of “heir” on the Claims Administrator’s website] .	Yes ☐ No ☐

	Note: If you answer “Yes” to Question 11, then the PCC-Claimant is <u>not</u> eligible to receive compensation from the PCC Compensation Plan. Your application to make a claim to the PCC Compensation Plan is <u>terminated</u> at this point, and you are not entitled to proceed to complete and submit this Claim Form to the Claims Administrator. You may determine whether the PCC-Claimant is eligible to receive compensation as a <i>Blais</i> Class Member at [link to QCAPs’ section of the Claims Administrator’s website].	
12.	Was the PCC-Claimant diagnosed with primary lung cancer before March 12, 2012? [link to FAQs definition of “Primary Lung Cancer”] Note: If you answer “Yes” to Question 12, then the PCC-Claimant is <u>not</u> eligible to receive compensation from the PCC Compensation Plan. Your application to make a claim to the PCC Compensation Plan is <u>terminated</u> at this point, and you are not entitled to proceed to complete and submit this Claim Form to the Claims Administrator. You may determine whether the PCC-Claimant is eligible to receive compensation as a <i>Blais</i> Class Member at [link to QCAPs’ section of the Claims Administrator’s website].	Yes ☐ Date of diagnosis of lung cancer: _____ (DD/MM/YYYY) No ☐
13.	Was the PCC-Claimant diagnosed with primary squamous cell carcinoma of the larynx, the oropharynx or the hypopharynx (throat cancer) before March 12, 2012? [link to FAQs definitions of “Larynx”, “Oropharynx” and “Hypopharynx”] Note: If you answer “Yes” to Question 13, then the PCC-Claimant is <u>not</u> eligible to receive compensation from the PCC Compensation Plan. Your application to make a claim to the PCC Compensation	Yes ☐ Date of diagnosis of throat cancer: _____ (DD/MM/YYYY) No ☐

	Plan is <u>terminated</u> at this point, and you are not entitled to proceed to complete and submit this Claim Form to the Claims Administrator. You may determine whether the PCC-Claimant is eligible to receive compensation as a <i>Blais</i> Class Member at [link to QCAPs' section of the Claims Administrator's website].	
14.	Was the PCC-Claimant diagnosed with Emphysema/COPD (GOLD Grade III or IV) before March 12, 2012? [link to FAQs definitions of "Emphysema" and "COPD"] <u>Note:</u> If you answer "Yes" to Question 14, <u>and</u> the PCC-Claimant was not diagnosed with either primary lung cancer or primary squamous cell carcinoma of the larynx, the oropharynx or the hypopharynx (throat cancer) between March 8, 2015 and March 8, 2019, then the PCC-Claimant is <u>not</u> eligible to receive compensation from the PCC Compensation Plan. Your application to make a claim to the PCC Compensation Plan is <u>terminated</u> at this point, and you are not entitled to proceed to complete and submit this Claim Form to the Claims Administrator. You may determine whether the PCC-Claimant or their estate is eligible to receive compensation as a <i>Blais</i> Class Member at [link to QCAPs' section of the Claims Administrator's website].	Yes ☐ Date of diagnosis of Emphysema/COPD (GOLD Grade III or IV): _____ (DD/MM/YYYY) No ☐
15.	Was the PCC-Claimant diagnosed with primary lung cancer between March 8, 2015 and March 8, 2019? <u>Note:</u> If you answer "Yes" to Question 15, then the PCC-Claimant may be eligible to receive compensation from the PCC	Yes ☐ Date of diagnosis of lung cancer: _____ (DD/MM/YYYY)

	Compensation Plan. Please proceed to Section VIII.	No ☐
16.	Was the PCC-Claimant diagnosed with primary squamous cell carcinoma of the larynx, the oropharynx or the hypopharynx (throat cancer) between March 8, 2015 and March 8, 2019? Note: If you answer “Yes” to Question 16, then the PCC-Claimant may be eligible to receive compensation from the PCC Compensation Plan. Please proceed to Section VIII.	Yes ☐ Date of diagnosis of throat cancer: _____ (DD/MM/YYYY) No ☐
17.	Was the PCC-Claimant diagnosed with Emphysema/COPD (GOLD Grade III or IV) between March 8, 2015 and March 8, 2019? Note: If you answer “Yes” to Question 17, then the PCC-Claimant may be eligible to receive compensation from the PCC Compensation Plan. Please proceed to Section VIII.	Yes ☐ Date of diagnosis of Emphysema/COPD (GOLD Grade III or Grade IV): _____ (DD/MM/YYYY) No ☐

Section VIII: Eligibility of Residents of the Provinces other than Quebec and Residents of the Territories to receive Compensation

Complete this section only if the PCC-Claimant lives, or if deceased lived, in a Province other than Quebec, or in one of the Territories. If the PCC-Claimant lives, or if deceased lived, in Quebec, please answer the Questions in Section VII above.

PLEASE READ CAREFULLY:

To be eligible to receive compensation under the PCC Compensation Plan, the PCC-Claimant must meet all of the following criteria:

1. If the PCC-Claimant is alive, they must reside in a Province or a Territory in Canada. If the PCC-Claimant is deceased, they must have resided in a Province or Territory in Canada on the date of their death;
2. The PCC-Claimant was alive on March 8, 2019;
3. Between January 1, 1950 and November 20, 1998, the PCC-Claimant smoked a minimum of twelve pack-years of cigarettes sold by the Canadian Tobacco Companies;

Note: The calculator at this link [\[insert link to Pack-Years Calculator\]](#) will assist you to calculate the number of pack-years which the PCC-Claimant smoked.

4. Between March 8, 2015 and March 8, 2019 (inclusive of those dates), the PCC-Claimant was diagnosed with:
- (a) Primary lung cancer, or
 - (b) Primary cancer (squamous cell carcinoma) of the larynx, the oropharynx or the hypopharynx (throat cancer), or
 - (c) Emphysema/COPD (GOLD Grade III or IV);

AND

5. On the date of the PCC-Claimant's diagnosis with lung cancer, throat cancer or Emphysema/COPD GOLD Grade III or IV the PCC-Claimant resided in any Province or any Territory.

If the PCC-Claimant has been diagnosed with Emphysema/COPD (GOLD Grade III or IV) and either primary lung cancer or primary throat cancer, and the PCC-Claimant meets all other criteria to be eligible to receive compensation, the PCC-Claimant, or their estate, will only receive compensation for the most serious disease with which the PCC-Claimant has been diagnosed that will provide the highest amount of compensation.

Note: If you answer "No" to all of Questions 18, 19 and 20, then the PCC-Claimant is not eligible to receive compensation from the PCC Compensation Plan. Your application to make a claim to the PCC Compensation Plan is terminated at this point, and you may not complete and submit this Claim Form to the Claims Administrator.

18.	Was the PCC-Claimant diagnosed with primary lung cancer between March 8, 2015 and March 8, 2019? [link to FAQs definition of "Primary Lung Cancer"]	Yes ☐ Date of diagnosis of lung cancer: _____ (DD/MM/YYYY) No ☐
19.	Was the PCC-Claimant diagnosed with primary squamous cell carcinoma of the larynx, the oropharynx or the hypopharynx (throat cancer) between March 8, 2015 and March 8, 2019? [link to FAQs definitions of "Larynx", "Oropharynx" and "Hypopharynx"]	Yes ☐ Date of diagnosis of throat cancer: _____ (DD/MM/YYYY)

		No ☐
20.	Was the PCC-Claimant diagnosed with Emphysema/COPD (GOLD Grade III or IV) between March 8, 2015 and March 8, 2019? [link to FAQs definitions of “Emphysema” and “COPD”]	Yes ☐ Date of diagnosis of Emphysema/COPD (GOLD Grade III or Grade IV): (DD/MM/YYYY) No ☐
21.	Did the PCC-Claimant reside in Canada on the date on which they were diagnosed with primary lung cancer, primary squamous cell carcinoma of the larynx, the oropharynx or the hypopharynx (throat cancer), or Emphysema/COPD (GOLD Grade III or IV)? <u>Note:</u> If you answer “No” to Question 21, then the PCC-Claimant is <u>not</u> eligible to receive compensation from the PCC Compensation Plan. Your application to make a claim to the PCC Compensation Plan is <u>terminated</u> at this point, and you may not complete and submit this Claim Form to the Claims Administrator.	Yes ☐ Province or Territory in which the PCC-Claimant resided on the date of their diagnosis: No ☐
Section IX: Payment Method		
22.	If the Claims Administrator determines that the PCC-Claimant is eligible to receive compensation from the PCC Compensation Plan, how do you wish PCC-Claimant to receive payment?	By cheque payable to the PCC-Claimant mailed to the address that I provided in Section III of this Claim Form ☐ <u>OR</u> By direct deposit into a bank account in the name of the PCC-Claimant ☐ <u>Please attach a “Void” cheque</u> and provide the following information

		regarding the bank account in the name of the PCC-Claimant: Financial Institution: _____ Branch Address: _____ City: _____ Province: _____ Postal Code: _____ Name on Account: _____ Branch Number: _____ Financial Institution Number: _____ Account Number: _____
23.	If the Claims Administrator determines that the estate of the PCC-Claimant is eligible to receive compensation from the PCC Compensation Plan, how do you wish the estate of the PCC-Claimant to receive payment?	By cheque payable to the estate of the PCC-Claimant mailed to the address that I provided in Section III of this Claim Form ☐ <u>OR</u> By direct deposit into a bank account in the name of the PCC-Claimant's estate ☐ <u>Please attach a "Void" cheque</u> and provide the following information regarding the bank account in the name of the PCC-Claimant's estate: Financial Institution: _____ Branch Address: _____ City: _____ Province: _____ Postal Code: _____

		Name on Account: _____ Branch Number: _____ Financial Institution Number: _____ Account Number: _____
Section X: Consent to Disclosure and Release of Records		
I understand that in order to process this claim it will be necessary for the personal information of the PCC-Claimant that is in the possession of physicians, health care professionals, hospitals, clinics, or other third parties to be disclosed to the Claims Administrator. I also understand that by signing this Claim Form and submitting it to the Claims Process I am consenting to the disclosure to the Claims Administrator of the personal information of the PCC-Claimant by physicians and health care professionals from whom the PCC-Claimant received care, to be used and disclosed by the Claims Administrator in accordance with the CCAA Plans.	Yes ☐ No ☐	
Section XI: Privacy Notice		
I understand and agree that the Claims Administrator may collect, use and disclose the personal information of the PCC-Claimant, including personal health information, related to their Claim in accordance with its Privacy Policy found at (link to Privacy Policy on Claims Administrator's website) in order to provide its claims management services on their behalf. The Claims Administrator may share the personal information of the PCC-Claimant with any subsequent Court-appointed Claims Administrator, if required, in connection with the processing and administration of their Claim. Their personal information may not be used or disclosed for purposes other than those for which it was collected, except with my consent or as required by law.	Yes ☐ No ☐	
Section XII: Statutory Declaration		
INSTRUCTIONS TO COMPLETE STATUTORY DECLARATION You must sign the Statutory Declaration below <u>in the presence of a Commissioner of Oaths</u>, sometimes referred to as a Commissioner for taking Affidavits.		

A Commissioner of Oaths is a person who is authorized to take affidavits or declarations by asking you to swear or affirm that the statements in a document are true. Every lawyer and some paralegals are Commissioners of Oaths. A notary public for the Province or Territory where the Declaration is made has all the powers of a Commissioner of Oaths.

If you need assistance, you may contact the Agent, Epiq, at [insert link to Agent's website] which can arrange for a Commissioner of Oaths to commission your signing of your Statutory Declaration before you submit your Claim to the Claims Administrator.

The Commissioner of Oaths must complete Sections XII and XIII, and if applicable, Section XIV.

The interpreter, if any, must complete Sections XV and XVI.

I, _____, make this solemn Declaration conscientiously believing it to be true, and knowing that it is of the same force and effect as if made under oath.

The information that I have provided on this Claim Form is true and correct and the documents submitted in support of the claim are authentic and have not been modified in any way whatsoever.

Where someone has helped me with this Claim Form, or where an interpreter was used, that person has read to me everything they wrote and included with this Claim Form, if necessary to allow me to understand the content of this completed Claim Form and any attachments to it, and I confirm that this information is true and correct.

I am not making any false or exaggerated Claims to obtain compensation that the PCC-Claimant or the estate of the PCC-Claimant, as applicable, is not entitled to receive.

Declared before me

at _____ (Town/City/Municipality)

in _____ (Province/Territory)

this _____ day of _____, 20____

Signature of Legal Representative of
PCC-Claimant or estate of PCC-Claimant

Signature of Commissioner of Oaths/Notary Public

Commissioner of Oaths/Notary Public: please sign above and complete Section XIII below. If applicable, complete Section XIV.

Please place Commissioner of Oath's stamp/Notarial Seal here, if applicable.

Section XIII: Commissioner of Oaths/Notary Public Information		
Full Name (First Name, Middle Name and Last Name):		
Address:		
Business Phone:		
Email:		
Section XIV: Certification by Commissioner of Oaths/Notary Public when an Interpreter is used (only complete this Section if it is applicable).		
I certify that this Declaration Form was read or interpreted in my presence to the declarant, the declarant appeared to understand it, and the declarant signed the Declaration or placed their mark on it in my presence.		
_____ Signature of Commissioner of Oaths/Notary Public		_____ Print Name of Commissioner of Oaths/Notary Public
Section XV: Interpreter Information (only complete this Section if it is applicable).		
Full Name (First Name, Middle Name and Last Name):		
Address:		
Business Phone:		
Email:		
Section XVI: Certification by Interpreter if used (only complete this Section if it is applicable).		
I certify that I correctly interpreted this Claim Form in _____ (specify language) to the declarant, and the declarant appeared to understand it.		

Signature of Interpreter

Print Name of Interpreter

Date Signed

APPENDIX “E”

Pan-Canadian Claimants’ Compensation Plan

PHYSICIAN FORM

If the PCC-Claimant or their Legal Representative is unable to provide:

- (i) A copy of a pathology report which confirms that the PCC-Claimant was diagnosed with Lung Cancer or Throat Cancer, as applicable, between March 8, 2015 and March 8, 2019 (inclusive of those dates), or
- (ii) A copy of a report of a spirometry test performed on the PCC-Claimant between March 8, 2015 and March 8, 2019 (inclusive of those dates), that first demonstrated a FEV1 (non-reversible) of less than 50% of the predicted value, as proof of the first diagnosis of Emphysema/COPD (GOLD Grade III or IV) between March 8, 2015 and March 8, 2019 (inclusive of those dates),

then this Physician Form may be used to assist the PCC-Claimant to prove that they were diagnosed with Lung Cancer, Throat Cancer or Emphysema/COPD (GOLD Grade III or IV) during the PCC Claims Period from March 8, 2015 to March 8, 2019 (inclusive of those dates).

Deadline To Submit this Form: This Physician Form and all requested medical documents must be submitted to the Claims Administrator of the Pan-Canadian Claimants’ Compensation Plan, referred to in this Form as the “PCC Compensation Plan”, as a complete package by no later than [the PCC Claims Application Deadline which is TBD].

SUBMIT THIS FORM BY REGISTERED MAIL: This Physician Form and all requested medical documents must be postmarked no later than _____, 20____ and mailed to: [Address of Claims Administrator].

OR

SUBMIT THIS FORM ONLINE: This Physician Form and documents must be submitted online and all documents must be uploaded online at [URL for website of Claims Administrator] by no later than 5:00 p.m. Pacific Time on _____, 20____.

OR

SUBMIT THIS FORM BY EMAIL: This Physician Form must be emailed to the Claims Administrator to [Email address of Claims Administrator] by no later than 5:00 p.m. Pacific Time on _____, 20____.

OR

SUBMIT THIS FORM BY FAX: This Physician Form and documents must be faxed to the Claims Administrator to [Fax Number of Claims Administrator] by no later than 5:00 p.m. Pacific Time on _____, 20__.

Section I: Information regarding PCC-Claimant

The “PCC-Claimant” is the person who may be entitled to receive payment of financial compensation from the PCC Compensation Plan. If the PCC-Claimant is deceased, their estate may be entitled to receive payment of financial compensation from the PCC Compensation Plan.

Full Name (First Name, Middle Name and Last Name):

Date of Birth:

Date: _____
(DD/MM/YYYY)

Provincial/Territorial Health Insurance Number:

Section II: Name and Contact Information of Physician

Full Name:

Address:

Business Phone:

Preferred Language of Correspondence

☐ English

☐ French

Section III: Disease Diagnosis

Please complete this section even if the PCC-Claimant is deceased.

Please attach the requested medical documentation to verify the diagnosis. The request for documentation to confirm the diagnosis is a request for existing clinical records only. It is not a request for you or other physicians to prepare a report at this time.

1.

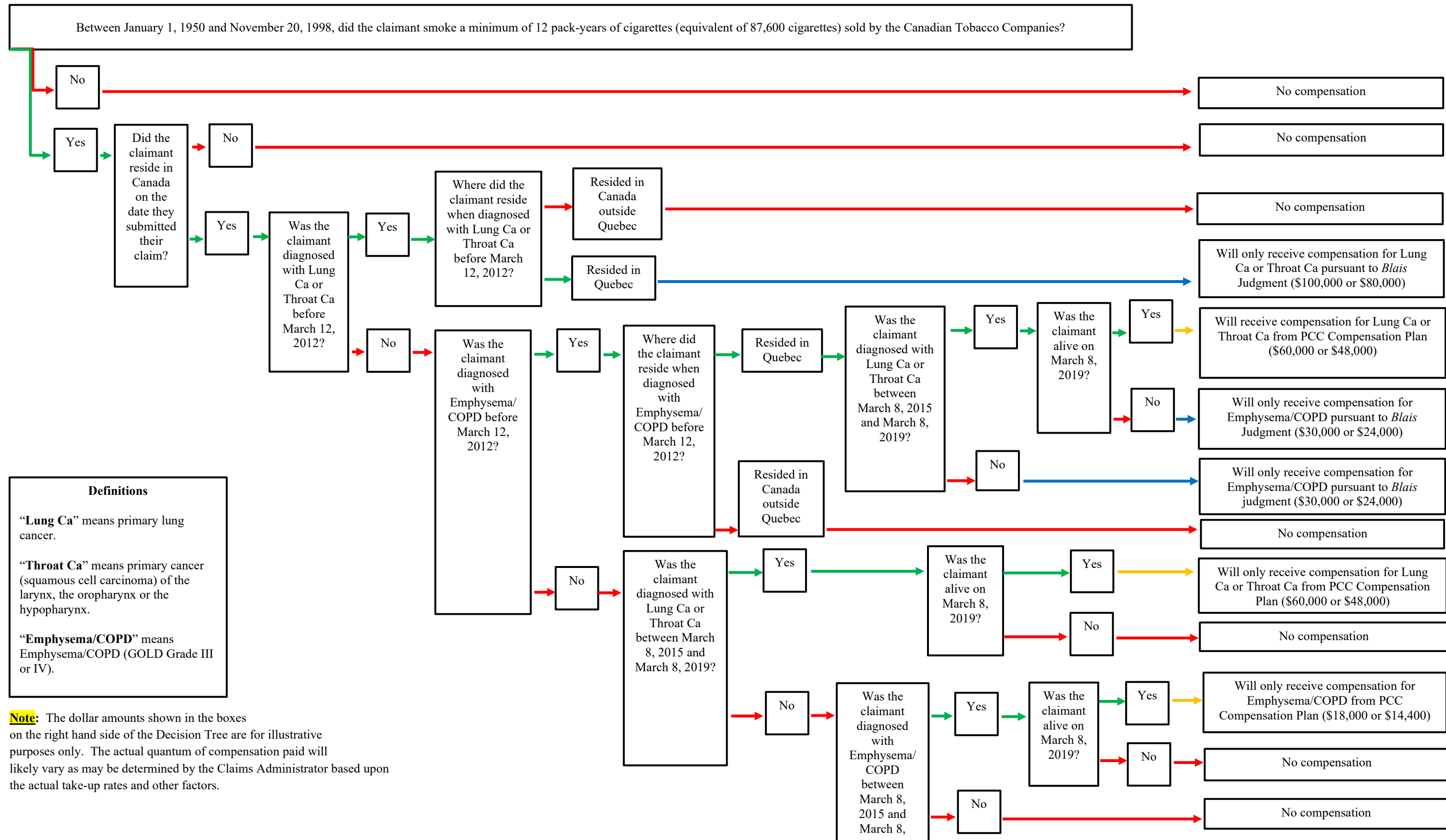
Has the PCC-Claimant been diagnosed with primary Lung Cancer, Throat Cancer (primary squamous cell carcinoma of the larynx, oropharynx, or hypopharynx),

☐ Lung Cancer

☐ Throat Cancer (primary squamous cell carcinoma)

	or Emphysema/COPD (GOLD Grade III or IV)? Check all that apply.	of the larynx, oropharynx, or hypopharynx) ☐ Emphysema/COPD (GOLD Grade III or IV)
2.	On what date was the PCC-Claimant first diagnosed with Lung Cancer, Throat Cancer or Emphysema/COPD (GOLD Grade III or IV)? (If the PCC-Claimant was diagnosed with multiple diseases, please add the date of diagnosis for each disease).	Disease: _____ Date of Diagnosis: _____ (DD/MM/YYYY) Disease: _____ Date of Diagnosis: _____ (DD/MM/YYYY) Disease: _____ Date of Diagnosis: _____ (DD/MM/YYYY)
3.	Please attach <u>at least one</u> of the following records that verify the above-referenced diagnosis and date of diagnosis:	☐ Pathology Report ☐ Operative Report ☐ Biopsy Report ☐ MRI Report ☐ CT Scan Report ☐ PET Scan Report ☐ X-ray Report ☐ Sputum Cytology Report

		☐ Spirometry Report ☐ Extract from medical chart ☐ Any other medical evidence or documentation that establishes the diagnosis and date of diagnosis (list the records attached):
Section IV: Smoking History Please answer Question 4 based upon information available in the clinical notes and records available to you. Question 4 is not a request that you seek information from the PCC-Claimant. The PCC-Claimant is required to respond to questions regarding their smoking history on a separate Claim Form which they will submit to the Claims Administrator.		
4.	To the best of your knowledge, information and belief, does, or if the PCC-Claimant is deceased did, the PCC-Claimant smoke cigarettes?	☐ Yes ☐ No ☐ Do not know
Section V: Certification by Physician		
I certify that the information provided on this Physician Form is true and correct to the best of knowledge, information and belief. _____ Date signed _____ Signature of Physician		



APPENDIX “G”

Pan-Canadian Claimants’ Compensation Plan**ACKNOWLEDGEMENT OF RECEIPT OF CLAIM PACKAGE**

[on Claims Administrator’s Letterhead]

BY [MAIL/EMAIL/FAX]

Name of PCC-Claimant or Legal Representative of PCC-Claimant

Address of PCC-Claimant or Legal Representative of PCC-Claimant

Dear [Full name of PCC-Claimant or Legal Representative of PCC-Claimant]:

Re: Your Claim Number: _____
Acknowledgement of Receipt of Pan-Canadian Claimant Claim Package

This Acknowledgement of Receipt of Claim is your record that [\[Name of Claims Administrator\]](#), the Claims Administrator for the Pan-Canadian Claimants’ Compensation Plan (“**PCC Compensation Plan**”), has received your Claim Package consisting of your Claim Form, the documents which verify the PCC-Claimant’s diagnosis and date of diagnosis with lung cancer, throat cancer or Emphysema/COPD (GOLD Grade III or IV), and any additional documents that you or your Physician, if applicable, submitted supporting your Claim.

You have been assigned the following Claim Number: [Insert Claim Number]

We will review your Claim Package as quickly as possible to determine whether you are eligible to receive a compensation payment from the PCC Compensation Plan.

We will notify you in writing once a decision has been made regarding your Claim.

In the interim, if you have any questions regarding your Claim or the Claims Process, please contact our Call Centre by telephone at [\[Call Centre toll-free number\]](#), or visit the website for the PCC Compensation Plan at [\[URL for Claims Administrator’s website\]](#).

Dated this _____ day of _____, 20____.

[\[Name of Claims Administrator\]](#)

APPENDIX “H”

Pan-Canadian Claimants’ Compensation Plan**CLAIMS ADMINISTRATOR’S CHECKLIST
TO DETERMINE WHETHER A PCC-CLAIMANT MEETS
THE PCC ELIGIBILITY CRITERIA**

The purpose of this Checklist is to identify certain of the material facts which are determinative of whether a PCC-Claimant meets the PCC Eligibility Criteria to qualify to receive a compensation payment from the Pan-Canadian Claimants’ Compensation Plan.

It is important that this Checklist be accurately completed to the fullest extent possible based upon the information provided by the PCC-Claimant or the PCC-Claimant’s Legal Representative in the Claim Form and all supporting medical and other documents submitted to the Claims Administrator.

Claim Number: _____

Name of PCC-Claimant: _____

Name of PCC-Claimant’s Legal Representative: _____

A. PCC ELIGIBILITY CRITERIA

1. Who submitted the Claim?

- ☐ PCC-Claimant
- ☐ Legal Representative of the PCC-Claimant

2. If the Claim has been submitted by a Legal Representative for a PCC-Claimant, has the Legal Representative submitted a document establishing that they are authorized to make a claim on behalf of the PCC-Claimant?

- ☐ Yes

Document submitted to prove legal authority: _____

- ☐ No

If the answer to Question 2 is “No”, then contact Legal Representative to request submission of document establishing their authority by PCC Claims Application Deadline.

3. Was the PCC-Claimant alive on March 8, 2019?

- ☐ Yes
- ☐ No

If the answer to Question 3 is “No”, then issue a Notice of Rejection of Claim.

4. If the PCC-Claimant is currently deceased, did the PCC-Claimant die:

- ☐ Before March 8, 2019?
- ☐ On or after March 8, 2019?

Date of Death (DD/MM/YYYY): _____

If the answer to Question 4 is “Before March 8, 2019”, then issue a Notice of Rejection of Claim.

5. If the PCC-Claimant is currently deceased, has the Legal Representative submitted a document establishing the PCC-Claimant’s date of death?

- ☐ Yes

Document submitted to prove date of death:

- ☐ Death Certificate or Certificate of Death
- ☐ Short Form Death Certificate
- ☐ Long Form Death Certificate
- ☐ Registration of Death or Death Registration
- ☐ Registration of Death or Death Registration with Cause of Death Information
- ☐ Medical Certificate of Death issued by an attending doctor or a coroner
- ☐ Interim Medical Certificate of Death issued by an attending doctor or a coroner
- ☐ Statement of Death issued by a funeral service provider
- ☐ Memorandum of Notification of Death issued by the Chief of National Defence Staff
- ☐ Statement of Verification of Death from the Department of Veterans Affairs
- ☐ No

If the answer to Question 5 is “No”, then contact Legal Representative to request submission of document proving that the PCC-Claimant is deceased by PCC Claims Application Deadline.

6. Did the PCC-Claimant reside in Canada on the date they submitted their Claim Package to the Claims Administrator?

- ☐ Yes
- ☐ No

If the answer to Question 6 is “No”, then issue a Notice of Rejection of Claim.

7. Between January 1, 1950 and November 20, 1998, did the PCC-Claimant reside in Canada?

- ☐ Yes
- ☐ No

If the answer to Question 7 is “No”, then issue a Notice of Rejection of Claim.

8. Between March 8, 2015 and March 8, 2019, the PCC-Claimant lived in:

- ☐ Quebec
- ☐ A Province other than Quebec, or a Territory: _____

9. The PCC-Claimant was diagnosed with:

- ☐ Primary lung cancer (“**Lung Cancer**”)
- ☐ Primary cancer (squamous cell carcinoma) of the Larynx, Oropharynx or Hypopharynx (“**Throat Cancer**”)
- ☐ Emphysema/COPD (GOLD Grade III or IV)
- ☐ Any disease other than Lung Cancer, Throat Cancer or Emphysema/COPD (GOLD Grade III or IV)

If the answer to Question 9 is “Any disease other than Lung Cancer, Throat Cancer or Emphysema/COPD (GOLD Grade III or IV)”, then issue a Notice of Rejection of Claim.

10. (a) The PCC-Claimant’s diagnosis of Lung Cancer or Throat Cancer has been confirmed by a copy of a pathology report which confirms that the PCC-Claimant was diagnosed with Lung Cancer or Throat Cancer, as applicable, between March 8, 2015 and March 8, 2019?

- ☐ Yes ☐ No

(b) The PCC-Claimant’s diagnosis of Emphysema/COPD (GOLD Grade III or IV) has been confirmed by a copy of a report of a spirometry test that first demonstrated a FEV1 (non-reversible) of less than 50% of the predicted value to first establish a diagnosis of Emphysema/COPD (GOLD Grade III or IV) between March 8, 2015 and March 8, 2019?

- ☐ Yes ☐ No

- (c) The PCC-Claimant's diagnosis of Lung Cancer, Throat Cancer or Emphysema/COPD (GOLD Grade III or IV), as applicable, has been confirmed by a copy of an extract from the PCC-Claimant's medical file?

☐ Yes ☐ No

- (d) The PCC-Claimant's diagnosis of Lung Cancer, Throat Cancer or Emphysema/COPD (GOLD Grade III or IV), as applicable, has been confirmed by a completed Physician Form?

☐ Yes ☐ No

- (e) The PCC-Claimant's diagnosis of Lung Cancer, Throat Cancer or Emphysema/COPD (GOLD Grade III or IV), as applicable, has been confirmed by a written statement from the PCC-Claimant's Physician, or another physician having access to their medical record, confirming the diagnosis of Lung Cancer or Throat Cancer between March 8, 2015 and March 8, 2019 and providing at least one of the following records to verify the diagnosis and date of diagnosis: pathology report, operative report, biopsy report, MRI report, CT scan report, PET scan report, x-ray report and/or sputum cytology report?

☐ Yes ☐ No

If the answers to Questions 10(a), (b), (c), (d) and (e) are all "No",
then issue a Notice of Rejection of Claim

11. The date of the PCC-Claimant's diagnosis of Lung Cancer is (DD/MM/YYYY): _____
12. The date of the PCC-Claimant's diagnosis of Throat Cancer is (DD/MM/YYYY): _____
13. The date of the PCC-Claimant's diagnosis of Emphysema/COPD (GOLD Grade III or IV) is (DD/MM/YYYY): _____
14. Was the PCC-Claimant diagnosed with Lung Cancer, Throat Cancer or Emphysema/COPD (GOLD Grade III or IV) before March 12, 2012?

☐ Yes

☐ No

If the answer to Question 14 is "Yes", then issue a Notice of Rejection of Claim.
If the PCC-Claimant is a Quebec resident,
they may qualify for compensation under the *Blais* Judgment.

15. Was the PCC-Claimant diagnosed with Lung Cancer, Throat Cancer or Emphysema/COPD (GOLD Grade III or IV) between March 8, 2015 and March 8, 2019?

☐ Yes

☐ No

If the answer to Question 15 is “No”, then issue a Notice of Rejection of Claim.

16. Calculation of number of pack-years smoked by the PCC-Claimant between January 1, 1950 and November 20, 1998:

Explanatory Note:

One pack-year is the number of cigarettes smoked daily and is equivalent to 7,300 cigarettes.

Twelve pack-years of cigarettes is the equivalent of 87,600 cigarettes (12 years x 7,300 cigarettes) which is calculated as any combination of the number of cigarettes smoked in a day multiplied by the number of days of consumption. For example:

10 cigarettes smoked per day for 24 years ($10 \times 365 \times 24$) = 87,600 cigarettes, or

20 cigarettes smoked per day for 12 years ($20 \times 365 \times 12$) = 87,600 cigarettes, or

30 cigarettes smoked per day for 8 years ($30 \times 365 \times 8$) = 87,600 cigarettes.

Calculation of PCC-Claimant's number of pack-years smoked:

A. _____ cigarettes smoked per day x 365 x _____ years = _____ cigarettes

B. _____ cigarettes smoked per day x 365 x _____ years = _____ cigarettes

C. _____ cigarettes smoked per day x 365 x _____ years = _____ cigarettes

D. _____ cigarettes smoked per day x 365 x _____ years = _____ cigarettes

Total Number of Cigarettes smoked by PCC-Claimant (A + B + C + D) = _____

17. Did the PCC-Claimant smoke a minimum of twelve pack-years of cigarettes (equivalent to 87,600 cigarettes) between January 1, 1950 and November 20, 1998?

☐ Yes

☐ No

If the answer to Question 17 is “No”, then issue a Notice of Rejection of Claim.

18. Did the PCC-Claimant smoke brands of cigarettes sold in Canada by Imperial Tobacco Canada Limited, Rothmans, Benson & Hedges Inc. and JTI-Macdonald Corp. during the period from January 1, 1950 and November 20, 1998?

- ☐ Yes
- ☐ No

If the answer to Question 18 is "No", then issue a Notice of Rejection of Claim.

19. Is the PCC-Claimant's Claim accepted for payment?

- ☐ Yes
- ☐ No

If the answer to Question 19 is "No", then issue a Notice of Rejection of Claim.

B. COMPENSATION AMOUNT

20. Did the PCC-Claimant start to smoke before January 1, 1976?

- ☐ Yes
- ☐ No

21. If the PCC-Claimant started to smoke before January 1, 1976, then the PCC-Claimant is approved to receive the following payment:

- ☐ Prorated amount up to a maximum payment of \$18,000 if the PCC-Claimant was diagnosed with Emphysema/COPD (GOLD Grade III or IV)
- ☐ Prorated amount up to a maximum payment of \$60,000 if the PCC-Claimant was diagnosed with Lung Cancer or Throat Cancer.

Note: If the PCC-Claimant was diagnosed with more than one of Emphysema/COPD (GOLD Grade III or IV), Lung Cancer and Throat Cancer, they are only eligible to be paid for the one disease that will provide them with the highest amount of compensation.

22. Did the PCC-Claimant start to smoke on or after January 1, 1976?
- ☐ Yes
- ☐ No
23. If the PCC-Claimant started to smoke on or after January 1, 1976, then the PCC-Claimant is approved to receive the following payment:
- ☐ Prorated amount up to a maximum payment of \$14,400 if the PCC-Claimant was diagnosed with Emphysema/COPD (GOLD Grade III or IV)
- ☐ Prorated amount up to a maximum payment of \$48,000 if the PCC-Claimant was diagnosed with Lung Cancer or Throat Cancer.
- Note:** If the PCC-Claimant was diagnosed with more than one of Emphysema/COPD (GOLD Grade III or IV), Lung Cancer and Throat Cancer, they are only eligible to be paid for the one disease that will provide them with the highest amount of compensation

C. STATUS OF CLAIM

24. If the Claim is rejected, has a Notice of Rejection of Claim been sent to the PCC-Claimant?
- ☐ Yes
- ☐ No
- ☐ Not applicable
25. If the Claim is rejected, has the PCC-Claimant submitted a Request for Review?
- ☐ Yes
- ☐ No
- ☐ Not applicable
26. If the PCC-Claimant submitted a Request for Review, what was the decision of the Review Officer?
- ☐ Claim accepted
- ☐ Claim rejected

☐ Claim varied as follows: _____

27. If the PCC Claim is accepted, has a Notice of Acceptance of Claim been sent to the PCC-Claimant?

☐ Yes

☐ No

28. The PCC-Claimant is eligible to be paid: \$ _____

29. Has payment been issued to the PCC-Claimant?

☐ Yes

☐ No

30. Date payment was issued to PCC-Claimant (DD/MM/YYYY): _____

APPENDIX “I”

Pan-Canadian Claimants’ Compensation Plan**NOTICE OF ACCEPTANCE OF CLAIM**

[on Claims Administrator’s Letterhead]

BY [MAIL/EMAIL/FAX]

Name of PCC-Claimant or Legal Representative of PCC-Claimant

Address of PCC-Claimant or Legal Representative of PCC-Claimant

Dear [Full name of PCC-Claimant or Legal Representative of PCC-Claimant]:

Re: Your Claim Number: _____
Notice of Acceptance of Claim

We are pleased to advise you that your Claim to the Pan-Canadian Claimants’ Compensation Plan (“**PCC Compensation Plan**”) in respect of [your/ PCC-Claimant’s full name] diagnosis of [Lung Cancer, Throat Cancer or Emphysema/COPD (GOLD Grade III or IV)] has been accepted.

In accordance with the terms of the PCC Compensation Plan, the Claims Administrator has determined that you will receive a compensation payment in the amount of [\$_____].

Please note that the compensation payment that will be paid to you may be less than the amount of the compensation payment indicated above. Compensation will be determined on a *pro rata* basis between all PCC-Claimants based on the number of claims and the amount available for distribution to eligible PCC-Claimants. The actual quantum of the compensation payment that will be paid to the PCC-Claimants will be determined after all claims have been received, reviewed and processed by the Claims Administrator. It is anticipated that the distribution of compensation payments to PCC-Claimants will begin after [insert PCC Claims Application Deadline].

Your payment will be made to you by [a cheque that will be mailed to the address that you provided on your Claim Form, OR direct deposit into the bank account which you identified on your Claim Form].

If you have any questions regarding your Claim, please contact our Call Centre by telephone at [Call Centre toll-free number], or visit the website for the PCC Compensation Plan at [URL for Claims Administrator’s website].

Dated this _____ day of _____, 20____.

 [Name of Claims Administrator]

APPENDIX “J”

Pan-Canadian Claimants’ Compensation Plan

REQUEST FOR REVIEW

This Request for Review is required to be completed by the PCC-Claimant, or the Legal Representative of the PCC-Claimant or the estate of the PCC-Claimant if applicable, if they wish to have the Review Officer review the decision of the Claims Administrator to reject their Claim for compensation from the Pan-Canadian Claimants’ Compensation Plan (“PCC Compensation Plan”).

You do not need a lawyer to complete this Request for Review.

Deadline to submit your completed Request for Review: This Request for Review and any supporting documents must be submitted to the Claims Administrator **by no later than 5:00 p.m. Pacific Time sixty days from the date of the Notice of Rejection of Claim which you received from the Claims Administrator.**

SUBMIT YOUR REQUEST FOR REVIEW BY REGISTERED MAIL: Your Request for Review must be postmarked no later than sixty days from the date of the Notice of Rejection of Claim which you received from the Claims Administrator and mailed to: [Address of Claims Administrator].

OR

SUBMIT YOUR REQUEST FOR REVIEW ONLINE: Your Request for Review must be submitted online and all documents must be uploaded online at [URL for website of Claims Administrator] by no later than 5:00 p.m. Pacific Time sixty days from the date of the Notice of Rejection of Claim which you received from the Claims Administrator.

OR

SUBMIT YOUR REQUEST FOR REVIEW BY EMAIL: Your Request for Review must be emailed to the Claims Administrator to [Email address of Claims Administrator] by no later than 5:00 p.m. Pacific Time sixty days from the date of the Notice of Rejection of Claim which you received from the Claims Administrator.

OR

SUBMIT YOUR REQUEST FOR REVIEW BY FAX: Your Request to Review must be faxed to the Claims Administrator to [Fax Number of Claims Administrator] by no later than 5:00 p.m. Pacific Time sixty days from the date of the Notice of Rejection of Claim which you received from the Claims Administrator.

Section I: PCC-Claimant's Name and Claim Number	
Claim Number:	
Full Name of PCC-Claimant (First Name, Middle Name and Last Name):	
Full Name of Legal Representative of PCC-Claimant (First Name, Middle Name and Last Name), if applicable:	
Section II: Claims Administrator's Decision	
Date of Notice of Rejection of Claim:	
Reason provided on the Notice of Rejection of Claim for the Claim being rejected:	
Section III: Statement of PCC-Claimant or Legal Representative of PCC-Claimant regarding error alleged to have been made by Claims Administrator in determining the Claim	
The Claims Administrator made the following error(s) in the review of the Claim: Note: You must explain why you believe that the Claims Administrator made an error in	

rejecting the Claim. You may submit any document which you believe proves that an error was made.	

Section IV: Certification

I certify that the information provided on the Request to Review is true and correct. Where someone has helped me with this Request to Review, or where an interpreter was used, that person has read to me everything they wrote and included with this Request to Review, if necessary to allow me to understand the content of this completed Request to Review and any attachments to it, and I confirm that this information is true and correct.

I am not making any false or exaggerated Claims to obtain compensation that I / (or if the Request for Review is being signed by the Legal Representative of the PCC-Claimant) the PCC-Claimant or their estate is not entitled to receive.

Date signed

Signature of PCC-Claimant / Legal Representative of PCC-Claimant or estate of PCC-Claimant

Section V: Interpreter Information (only complete this Section if it is applicable).

Full Name (First Name, Middle Name and Last Name):	
Mailing Address:	
Unit/Apartment Number:	

Town/City/Municipality:	
Province/Territory	
Postal Code:	
Occupation:	
Business Phone:	
Email:	

APPENDIX “K”

Pan-Canadian Claimants’ Compensation Plan**ACKNOWLEDGEMENT OF RECEIPT OF REQUEST FOR REVIEW**

[on Claims Administrator’s Letterhead]

BY [MAIL/EMAIL/FAX]

Name of PCC-Claimant or Legal Representative of PCC-Claimant

Address of PCC-Claimant or Legal Representative of PCC-Claimant

Dear [Full name of PCC-Claimant or Legal Representative of PCC-Claimant]:

Re: Your Claim Number: _____
Acknowledgement of Receipt of Request for Review

This Acknowledgement of Receipt of Request for Review is your record that [\[Name of Claims Administrator\]](#), the Claims Administrator for the Pan-Canadian Claimants’ Compensation (“**PCC Compensation Plan**”), has received your Request for Review of the decision of the Claims Administrator to deny [your/ PCC-Claimant’s Full Name] Claim dated _____.

The Review Officer will review your Request for Review as quickly as possible to determine whether the decision of the Claims Administrator regarding [your/PCC-Claimant’s Full Name] Claim will be confirmed, reversed or varied.

We will notify you in writing once a decision has been made regarding your Request for Review.

In the interim, if you have any questions regarding your Request for Review or the review process, please contact our Call Centre by telephone at [\[Call Centre toll-free number\]](#), or visit the website for the PCC Compensation Plan at [\[URL for Claims Administrator’s website\]](#).

Dated this _____ day of _____, 20____.

[\[Name of Claims Administrator\]](#)

APPENDIX “L”

**Brands of Cigarettes sold by Canadian Tobacco Companies in Canada
between January 1, 1950 and November 20, 1998**

Accord

B&H

Belmont

Belvedere

Camel

Cameo

Craven “A”

Craven “M”

du Maurier

Dunhill

Export

LD

Macdonald

Mark Ten

Matinee

Medallion

More

North American Spirit

Number 7

Peter Jackson

Players

Rothmans

Vantage

Viscount

Winston

**Sub-brands of Cigarettes sold by Canadian Tobacco Companies in Canada
between January 1, 1950 and November 20, 1998**

Accord KF
Avanti/Light
B&H 100 Del.UL.LT/MEN
B&H 100 F
B&H 100 F Menthol
B&H Light Menthol
B&H Lights
B&H Special KF
B&H Special Lights KF
Belmont KF
Belvedere Extra Mild
Cameo Extra Mild
Craven "A" Special
Craven "M" KF
Craven "M" Special
Craven "A" Light
Craven "A" Ultra Light/Mild
du Maurier Extra Light
du Maurier Light
du Maurier Special
du Maurier Ultra Light
Dunhill KF
Export "A"
Export "A" Lights
Export "A" Medium
Export "A" Extra Light
Export "A" Special Edition
Export "A" Ultra Light
Export Mild

Export Plain
John Player's Special
Macdonald Menthol
Mark Ten Filter
Matinee Extra Mild
Matinee Slims/Menthol
Matinee Special/Menthol
Number 7 Lights
Peter Jackson Extra Light KF
Player's Extra Light
Player's Filter
Player's Light
Player's Medium
Player's Plain
Rothmans Extra Light
Rothmans KF
Rothmans Light
Rothmans Special
Rothmans UL LT KF
Select Special/Ultra Mild/Menthol
Vantage KF
Vantage Light/Menthol
Viscount #1 KF
Viscount Extra Mild/Menthol

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CANADA
PROVINCE OF QUEBEC DISTRICT OF
MONTREAL

No: 500-06-000076-980

No: 500-06-000070-983

SUPERIOR COURT
(Class Action Division)

**CONSEIL QUÉBÉCOIS SUR LE TABAC
ET LA SANTÉ and JEAN-YVES BLAIS**

Plaintiffs

v.

**JTI-MACDONALD CORP., IMPERIAL
TOBACCO CANADA LIMITED, AND
ROTHMANS, BENSON & HEDGES INC.**

Defendants

QUEBEC CLASS ACTION ADMINISTRATION PLAN

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**GUIDING PRINCIPLES FOR THE
PAN-CANADIAN CLAIMANTS' COMPENSATION PLAN AND
QUEBEC CLASS ACTION ADMINISTRATION PLAN**

The following principles underpin and shall guide the approval, implementation and execution of the Pan-Canadian Claimants' Compensation Plan ("**PCC Compensation Plan**") and the Quebec Class Action Administration Plan ("**Quebec Administration Plan**"):

1. The CCAA Court shall have an ongoing supervisory role in respect of the administration of the CCAA Plans which include the Quebec Administration Plan and the PCC Compensation Plan that are Schedules "K" and "P" thereto.
2. The CCAA Court shall hear and determine the proceedings relating to the approval of the PCC Compensation Plan and the Quebec Administration Plan, including the approval of the retainer agreement respecting fees and disbursements between the Quebec Class Counsel and the representative plaintiffs, and the approval of the Quebec Class Counsel Fee. Matters relating to the ongoing supervision of the Quebec Administration Plan shall be heard and determined jointly by the CCAA Court and the Quebec Superior Court. In performing this function, the CCAA Court and the Quebec Superior Court may communicate with one another in accordance with a protocol to be worked out and established by them. Matters relating to the ongoing supervision of the PCC Compensation Plan shall be heard and determined solely by the CCAA Court.
3. No changes, modifications or revisions shall be made to the Quebec Administration Plan without the joint approval of the CCAA Court and the Quebec Superior Court as set out in an Order issued by the CCAA Court.
4. No changes, modifications or revisions shall be made to the PCC Compensation Plan without the approval of the CCAA Court as set out in an Order issued by the CCAA Court.
5. Upon the recommendation of the Court-Appointed Mediator and the Monitors and subject to the approval of the CCAA Court, Daniel Shapiro, K.C. will be appointed by the CCAA Court to serve as the Court-appointed Administrative Coordinator ("**Administrative**

Coordinator”) and, in that capacity, he will coordinate and serve as a liaison and conduit to facilitate the flow of information between the Claims Administrator and the CCAA Plan Administrators in regard to both the Quebec Administration Plan and the PCC Compensation Plan.

6. Upon the recommendation of the Court-Appointed Mediator and the Monitors and subject to the approval of the CCAA Court, the CCAA Court will appoint one Claims Administrator to administer both the Quebec Administration Plan and the PCC Compensation Plan.
7. The Claims Administrator shall be neutral and independent from the Quebec Class Action Plaintiffs (including the *Blais* Class Members and the *Létourneau* Class Members), Quebec Class Counsel, Raymond Chabot, Pan-Canadian Claimants, PCC Representative Counsel, Tobacco Companies, Claimants, CCAA Plan Administrators, Administrative Coordinator and Court-Appointed Mediator. The Claims Administrator may, in its discretion, retain its own legal or other advisors.
8. The Claims Administrator shall liaise with the Administrative Coordinator who will assist the Claims Administrator to address and resolve issues that may arise from time to time in the interpretation, implementation and ongoing administration of both plans. If the Administrative Coordinator and the Claims Administrator are unable to resolve an issue relating to the Quebec Administration Plan, then the Administrative Coordinator shall refer the matter to the CCAA Plan Administrators who may, in their discretion, refer the matter jointly to the CCAA Court and the Quebec Superior Court for resolution. If the Administrative Coordinator and the Claims Administrator are unable to resolve an issue relating to the PCC Compensation Plan, then the Administrative Coordinator shall refer the matter to the CCAA Plan Administrators who may, in their discretion, refer the matter to the CCAA Court for resolution.
9. In respect of all decisions regarding the implementation and execution of the Quebec Administration Plan, the Claims Administrator shall not collaborate or consult with or seek any advice, instructions or directions from the Quebec Class Counsel. Notwithstanding

the above, the Quebec Class Counsel shall communicate and cooperate with the Claims Administrator and the Administrative Coordinator so as to fulfill their duties and responsibilities to the *Blais* Class Members.

10. In respect of all decisions regarding the implementation and execution of the PCC Compensation Plan, the Claims Administrator shall not collaborate or consult with or seek any advice, instructions or directions from the PCC Representative Counsel. Notwithstanding the above, the PCC Representative Counsel shall communicate and cooperate with the Claims Administrator and the Administrative Coordinator so as to fulfill their duties and responsibilities to the PCCs.
11. The Quebec Class Counsel have a traditional solicitor-client relationship with the *Blais* Class Members and the *Létourneau* Class Members and a duty to act in the best interests of the classes as a whole.
12. The PCC Representative Counsel has a traditional solicitor-client relationship with the Pan-Canadian Claimants and a duty to act in the best interests of all Pan-Canadian Claimants in regard to the claims process for the PCC Compensation Plan.

QUEBEC CLASS ACTION ADMINISTRATION PLAN

INTRODUCTION

The Quebec Class Action Administration Plan, or Quebec Administration Plan, has been prepared to effect the distribution of the compensation ordered in the judgments rendered in the *Blais* Class Action by the Quebec Superior Court and the Quebec Court of Appeal, as compromised in accordance with the CCAA Plans, to be paid to eligible persons resident in Quebec who are suffering from at least one of three tobacco-related diseases caused by smoking cigarettes sold in Canada by three tobacco companies, Imperial Tobacco Canada Limited, Rothmans, Benson & Hedges and JTI-Macdonald Corp. Persons may be eligible to receive a compensation payment if they meet the following requirements of the certified class definition in the *Blais* Class Action:

1. They reside in Quebec and were alive on November 20, 1998.
2. Between January 1, 1950 and November 20, 1998:
 - (a) They smoked a minimum of 87,600 cigarettes (the Quebec Administration Plan explains how to calculate the number of cigarettes smoked); and
 - (b) The cigarettes that they smoked were of one or more of the following cigarette brands (the Quebec Administration Plan contains a complete list of the cigarette brands and sub-brands):

Accord	Craven "A"	Mark Ten	Number 7
B&H	Craven "M"	Matinee	Peter Jackson
Belmont	du Maurier	Medallion	Players
Belvedere	Dunhill	Macdonald	Rothmans
Camel	Export	More	Vantage
Cameo	LD	North American Spirit	Viscount
			Winston

3. Before March 12, 2012, they were diagnosed with Lung Cancer, Throat Cancer or Emphysema/COPD (GOLD Grade III or IV) (the Quebec Administration Plan contains

details of the tobacco-related diseases), and they resided in Quebec at the time of their diagnosis.

4. The Heirs of persons who meet the above criteria but died after November 20, 1998 may also be eligible to receive a Compensation Payment.

The Quebec Administration Plan provides important information and forms to help people decide whether they may have a claim for payment. If they think they have a claim, they may fill out the Claim Forms and file them by sending them in to Claims Administrator for the Quebec Administration Plan.

The Claims Process for the Quebec Administration Plan has been designed to make it easy for a person to complete the Claim Forms. The Claims Process also allows the Claims Administrator to quickly process each claim and decide whether the claim is eligible to be paid. The instructions and questions on the Claim Forms are easy to understand with fill in the blanks and boxes to check.

If a claimant has questions in respect of the Claims Process under the Quebec Administration Plan, they may consult the Claims Administrator's website at [\[URL for website of Claims Administrator\]](#) or call the Claims Administrator's Call Center at [\[Call Centre toll-free number\]](#) or send an email to [\[Claims Administrator's email\]](#). Services will be offered in English and French.

If a claimant requires any assistance to complete the Claims Forms, they may call the Quebec Class Action Call Centre at 1-888-880-1844 or send an email to tabac@tjl.quebec or visit the Quebec Tobacco Class Action website at www.recourstabac.com. Services will be offered in English and French.

To ensure the integrity and fairness of the Claims Process, persons who submit claims to the Quebec Administration Plan will be asked to declare that the answers they provide on their Claim Forms are true and accurate. Where the Claims Administrator finds evidence of fraud, material false information or an intentional misleading of the Claims Administrator, the claim will be disallowed.

QUEBEC CLASS ACTION ADMINISTRATION PLAN

WHEREAS the Quebec Class Actions were brought against the defendants, ITCAN, RBH and JTIM, in the *Blais* Class Action on behalf of individuals in Quebec who developed Lung Cancer, Throat Cancer and Emphysema/COPD (GOLD Grade III or IV) as a result of smoking the Tobacco Companies' cigarettes, and in the *Létourneau* Class Action on behalf of individuals in Quebec who developed an addiction to the nicotine contained in the cigarettes made by ITCAN, RBH and JTIM;

AND WHEREAS the *Blais* Judgment found ITCAN, RBH and JTIM to be liable to the *Blais* Class Members, and the *Létourneau* Judgment found ITCAN, RBH and JTIM to be liable to the *Létourneau* Class Members in the amounts and in the manner set forth in such judgments;

AND WHEREAS JTIM is insolvent and was granted protection from its creditors under the *Companies' Creditors Arrangement Act*, R.S.C. 1985, c. C-36, as amended ("CCAA"), pursuant to the Initial Order of the Honourable Justice Haaney of the CCAA Court dated March 8, 2019;

AND WHEREAS ITCAN and ITCO are insolvent and were granted protection from their creditors under the CCAA pursuant to the Initial Order of the Honourable Justice McEwen of the CCAA Court dated March 12, 2019;

AND WHEREAS RBH is insolvent and was granted protection from its creditors under the CCAA pursuant to the Initial Order of the Honourable Justice Pattillo of the CCAA Court dated March 22, 2019;

AND WHEREAS by the Initial Orders the CCAA Court appointed Deloitte Restructuring Inc., FTI Consulting Canada Inc. and Ernst & Young Inc. as officers of the CCAA Court and the Monitors respectively of JTIM, Imperial and RBH ("**Monitors**");

AND WHEREAS by an Order dated April 5, 2019, the CCAA Court appointed the Honourable Warren K. Winkler, K.C. (“**Court-Appointed Mediator**”) as an officer of the Court to, as a neutral third party, mediate a global settlement of the claims by the Claimants;

AND WHEREAS the Court-Appointed Mediator conducted the mediation with the Tobacco Companies and the Claimants.

AND WHEREAS by an Order dated September 27, 2023, the Honourable Chief Justice Geoffrey B. Morawetz directed the Monitors to work with the Court-Appointed Mediator to develop a plan of compromise and arrangement concerning each of JTIM, Imperial and RBH;

AND WHEREAS, subject to the approval of the CCAA Court, the Quebec Class Action Administration Plan (“**Quebec Administration Plan**”) has been prepared to provide for Compensation Payments to be made pursuant to the *Blais* Judgment, as compromised in accordance with the CCAA Plans, directly to Eligible *Blais* Class Members in Quebec who suffer from Lung Cancer, Throat Cancer, or Emphysema/COPD (GOLD Grade III or IV) attributable to smoking cigarettes sold by ITCAN, RBH and JTIM during the period from January 1, 1950 to November 20, 1998;

AND WHEREAS, pursuant to the *Létourneau* Judgment, no monies are required to be distributed directly to the *Létourneau* Class Members;

AND WHEREAS, the *Létourneau* Judgment has been fully settled by payment of the sum of \$131 million from the QCAP Settlement Amount into the Cy-près Fund.

AND WHEREAS the CCAA Court will seek the aid, recognition and assistance of the Quebec Superior Court to give full force and effect to the extent necessary to the orders rendered by the CCAA Court in relation to the sanction and implementation of the CCAA Plans;

AND WHEREAS, where appropriate and to the extent possible, the Quebec Administration Plan and the PCC Compensation Plan shall be harmonized with each other; and

NOW THEREFORE, set out herein are the terms of the Quebec Administration Plan that is attached as Schedule “N” to the CCAA Plans of JTIM and RBH and Schedule “K” to Imperial’s CCAA Plan.

PART A: INTERPRETATION

SECTION I – INTERPRETATION

1. Definitions

1.1 In this document, including all Appendices hereto, unless otherwise stated or the context otherwise requires:

“**Acknowledgement of Receipt**” means an acknowledgement sent by the Claims Administrator to a Tobacco-Victim Claimant or Succession Claimant acknowledging the receipt of documents submitted by them pursuant to the Quebec Administration Plan.

“**Acknowledgement of Receipt of *Blais* Claim**” means the notice, in the form attached hereto as **Appendix “H”**, sent by the Claims Administrator to a Tobacco-Victim Claimant or Succession Claimant acknowledging receipt of their Proof of Claim.

“**Administrative Coordinator**” means Daniel Shapiro, K.C. in his capacity as the Court-appointed Administrative Coordinator in respect of the administration of both the PCC Compensation Plan and the Quebec Administration Plan. Daniel Shapiro’s appointment as the Administrative Coordinator will be upon the recommendation of the Court-Appointed Mediator and the Monitors and subject to the approval of the CCAA Court.

“**Affiliate**” means a Person is an affiliate of another Person if,

- (a) one of them is the subsidiary of the other, or
- (b) each of them is controlled by the same Person.

For the purpose of this definition,

- (i) “subsidiary” means a Person that is controlled directly or indirectly by another Person and includes a subsidiary of that subsidiary, and
- (ii) a Person (first Person) is considered to control another Person (second Person) if,
 - (A) the first Person beneficially owns or directly or indirectly exercises control or direction over securities of the second Person carrying votes which, if exercised, would entitle the first Person to elect a majority of the directors of the second Person, unless that first Person holds the voting securities only to secure an obligation,
 - (B) the second Person is a partnership, other than a limited partnership, and the first Person holds more than 50% of the interests of the partnership, or
 - (C) the second Person is a limited partnership and the general partner of the limited partnership is the first Person.

“**Alternative Cancer Proof**” means the elements of proof set out in paragraphs 36.1 and 36.2 of the Quebec Administration Plan.

“**Alternative Emphysema/COPD (GOLD Grade III or IV) Proof**” means the elements of proof referred to in paragraphs 37.1 and 37.2 of the Quebec Administration Plan.

“**Alternative Product**” means (i) any device that produces emissions in the form of an aerosol and is intended to be brought to the mouth for inhalation of the aerosol without burning of (a) a substance; or (b) a mixture of substances; (ii) any substance or mixture of substances, whether or not it contains tobacco or nicotine, that is intended for use with or without those devices to produce emissions in the form of an aerosol without burning; (iii) any non-combustible tobacco (other than smokeless tobacco) or nicotine delivery product; and (iv) any component, part, or accessory of or used in connection with any such device or product referred to above.

Alternative Proof” means either the Alternative Cancer Proof or the Alternative Emphysema/COPD Proof, as applicable.

“Annual Contributions” has the meaning given in Article 5, Section 5.7 of the CCAA Plans, and

“Annual Contribution” means any one of them.

“Bank” has the meaning given in Article 5, Section 5.3 of the CCAA Plans.

“Blais Claims Application Deadline” means the date twelve months after the Effective Time by which all Tobacco-Victim Claimants and Succession Claimants are required to submit their completed Proofs of Claim to the Claims Administrator. The *Blais* Claims Application Deadline may be extended jointly by the CCAA Court and the Quebec Superior Court if it is deemed necessary and expedient to do so as the implementation of the Quebec Administration Plan unfolds.

“Blais Claims Period” means the period of time before March 12, 2012 during which a *Blais* Class Member was diagnosed with a *Blais* Compensable Disease.

“Blais Claims Submission Period” means the twelve month period of time which shall commence at the Effective Time and shall end on the *Blais* Claims Application Deadline. The *Blais* Claims Submission Period may be extended jointly by the CCAA Court and the Quebec Superior Court if it is deemed necessary and expedient to do so as the implementation of the Quebec Administration Plan unfolds.

“Blais Class Action” means *Conseil québécois sur le tabac et la santé et al. v. JTI-Macdonald Corp. et al.*, Court File No. 500-06-000076-980 (Montreal, Quebec).

“Blais Class Members” means persons who meet the criteria of the following certified class definition in the *Blais* Class Action:

All persons residing in Quebec who satisfy the following criteria:

- (1) To have smoked, between January 1, 1950 and November 20, 1998, a minimum of 12 pack/years of cigarettes manufactured by the defendants (that is, the equivalent of a minimum of 87,600 cigarettes, namely any combination of the number of cigarettes smoked in a day multiplied by the number of days of consumption insofar as the total is equal to or greater than 87,600 cigarettes).

For example, 12 pack/years equals:

20 cigarettes a day for 12 years ($20 \times 365 \times 12 = 87,600$) or

30 cigarettes a day for 8 years ($30 \times 365 \times 8 = 87,600$) or

10 cigarettes a day for 24 years ($10 \times 365 \times 24 = 87,600$);

- (2) To have been diagnosed before March 12, 2012 with:
 - (a) Lung cancer or
 - (b) Cancer (squamous cell carcinoma) of the throat, that is to say of the larynx, the oropharynx or the hypopharynx or
 - (c) Emphysema/COPD (GOLD Grade III or IV).

The group also includes the Heirs of the persons deceased after November 20, 1998 who satisfied the criteria mentioned herein.

“Blais Compensable Diseases” means, collectively, Lung Cancer, Throat Cancer and Emphysema/COPD (GOLD Grade III or IV).

“Blais Eligibility Criteria” means the criteria set out in the certified class definition in the *Blais* Class Action which a person must meet to be eligible to receive a Compensation Payment as a Blais Class Member.

“**Blais First Notice**” means the initial notice which the Claims Administrator shall publish regarding the Quebec Administration Plan. Attached hereto as **Appendix “A”** is a version of the *Blais* First Notice which is provided for guidance only to assist the understanding of the Claims Administrator which shall be responsible for designing, implementing and managing the *Blais* Notice Plan pursuant to which prospective Tobacco-Victim Claimants and Succession Claimants in Quebec will be informed about the Quebec Administration Plan and be provided with ongoing notice throughout the *Blais* Claims Submission Period.

“**Blais First Notice Date**” means the date on which the Claims Administrator publishes the *Blais* First Notice.

“**Blais Judgment**” means the judgment rendered by the Honourable Justice Brian Riordan on May 27, 2015 as rectified on June 9, 2015, and the judgment of the Court of Appeal of Quebec dated March 1, 2019 in the class action commenced in the Quebec Superior Court in Court File No. 500-06-00076-980 (*Conseil québécois sur le tabac et la santé et Jean-Yves Blais c. Imperial Tobacco Ltée, Rothmans, Benson & Hedges Inc. et JTI-MacDonald Corp.*).

“**Blais Notice Plan**” means the plan to publish legal notice regarding the Quebec Administration Plan to prospective Tobacco-Victim Claimants and Succession Claimants in Quebec and provide the Tobacco-Victim Claimants and Succession Claimants with ongoing notice throughout the *Blais* Claims Submission Period.

“**Blais Notices**” means the legal notices that will provide notice to prospective Tobacco-Victim Claimants and Succession Claimants in Quebec regarding the Quebec Administration Plan and provide the Tobacco-Victim Claimants and Succession Claimants with ongoing notice throughout the *Blais* Claims Submission Period.

“**Business Day**” means, for the purpose of the Quebec Administration Plan, a day other than Saturday, Sunday or a day observed as a holiday under the laws of the Province or Territory in which the person who needs to take action pursuant to the Quebec Administration Plan is situated, or a holiday under the federal laws of Canada applicable in the said Province or Territory.

“Call Centre” means the call centre established by the Claims Administrator which will offer services in English and French to respond to inquiries from and provide information to Tobacco-Victim Claimants and Succession Claimants, and prospective Tobacco-Victim Claimants and Succession Claimants, as applicable, regarding the Quebec Administration Plan and the Claims Process.

“Cash Security Deposits” means, collectively, (i) in the case of Imperial, the cash and interest, if any, deposited by ITCAN as suretyship pursuant to the Order of the Quebec Court of Appeal dated October 27, 2015; and (ii) in the case of RBH, the cash deposited by RBH as suretyship pursuant to the Order of the Quebec Court of Appeal dated October 27, 2015, and **“Cash Security Deposit”** means any of them.

“CCAA” means the *Companies’ Creditors Arrangement Act*, R.S.C. 1985, c. C-36, as amended.

“CCAA Court” means the Ontario Superior Court of Justice (Commercial List) at Toronto.

“CCAA Plan” means in respect of each Tobacco Company, the Court-Appointed Mediator’s and Monitors’ plan of compromise and arrangement pursuant to the CCAA concerning, affecting and involving such Tobacco Company, including all Schedules thereto.

“CCAA Plan Administrators” has the meaning given in Article 14, Section 14.1 of the CCAA Plans.

“CCAA Proceeding” means, in respect of each Tobacco Company, the proceeding commenced by such Tobacco Company pursuant to the CCAA, namely Application No. CV-19-616077-00CL in respect of Imperial, Application No. CV-19-616779-00CL in respect of RBH, and Application No. CV-19-615862-00CL in respect of JTIM, collectively the **“CCAA Proceedings”**.

“Certificate” means the certificate filed by the Monitors with the CCAA Court confirming that the full amount of the Upfront Contributions has been received from the Tobacco Companies and deposited into the Global Settlement Trust Account.

“**Civil Code of Quebec**” means the *Civil Code of Quebec*, CQLR, c. CCQ-1991, as amended.

“**Claimants**” means, collectively, the Quebec Class Action Plaintiffs, Pan-Canadian Claimants, *Knight* Class Action Plaintiffs, Tobacco Producers, His Majesty the King in right of British Columbia, His Majesty the King in right of Alberta, His Majesty the King in right of Saskatchewan, His Majesty the King in right of Manitoba, His Majesty the King in right of Ontario, the Attorney General of Quebec, His Majesty the King in right of New Brunswick, His Majesty the King in right of Nova Scotia, His Majesty the King in right of Prince Edward Island, His Majesty the King in right of Newfoundland and Labrador, the Government of Yukon, the Government of the Northwest Territories and the Government of Nunavut.

“**Claims Administrator**” means the claims administrator approved and appointed by the CCAA Court to manage the overall administration of the individual Claims Process and perform all other duties and responsibilities assigned to it in regard to the Quebec Administration Plan. The appointment of Epiq as the Claims Administrator will be upon the recommendation of the Court-Appointed Mediator and the Monitors and subject to the approval of the CCAA Court.

“**Claims Process**” means the process by which Tobacco-Victim Claimants and Succession Claimants may assert, respectively, Tobacco-Victim Claims and Succession Claims for Compensation Payments as set forth in the Quebec Administration Plan.

“**Closing Judgment**” means the judgment terminating the *Blais* Class Action and the *Létourneau* Class Action which will be requested on a motion brought by the Quebec Class Counsel after all Eligible *Blais* Class Members have been paid their Compensation Payments.

“**Compensation Payment**” means the amount determined by the Claims Administrator to be payable to an Eligible *Blais* Class Member under the Quebec Administration Plan in satisfaction of their QCAP Claim.

“**Contribution Security Agreement**” has the meaning given in Article 5, Section 5.13 of the CCAA Plans and is attached to the CCAA Plans as Schedule ”E”.

“**COPD**” means chronic obstructive pulmonary disease (GOLD Grade III or IV). The Global Initiative for Chronic Obstructive Lung Disease (“**GOLD**”) developed a four grade classification system based upon severity of airflow limitation and other diagnostic parameters. The GOLD Grade III (severe) and GOLD Grade IV (very severe) classifications represent the two most severe categories of disease.

“**Costs**” has the meaning given in paragraph 48.1 of the Quebec Administration Plan.

“**Court-Appointed Mediator**” means the Honourable Warren K. Winkler, K.C., in his capacity as Court-appointed mediator in the CCAA Proceedings of the Tobacco Companies.

“**Cy-près Fund**” means the aggregate amount allocated from the Global Settlement Amount payable into the Cy-près Trust Account which shall be administered by the Cy-près Foundation.

“**Declaration**” means the applicable declaration contained in the Succession Claim Form, which is attached hereto as **Appendix “E”**.

“**Definitive Documents**” means the CCAA Plans, the Sanction Orders, the Contribution Security Agreements, the Hypothec, any intercreditor agreements, the documents required to implement and give effect to the PCC Compensation Plan and the Cy-près Fund, and all other agreements, documents and orders contemplated by, or necessary to implement the transactions contemplated by any of the foregoing.

“**Diagnosis**” means a Tobacco-Victim’s diagnosis of Throat Cancer, Lung Cancer or Emphysema/COPD (GOLD Grade III or IV), and the date of such diagnosis.

“**Effective Time**” means such time on the Plan Implementation Date as the Court-Appointed Mediator and the Monitors may determine and designate.

“**Eligible *Blais* Class Members**” means the Tobacco-Victim Claimants and Succession Claimants whom the Claims Administrator has determined meet all the *Blais* Eligibility Criteria such that their Tobacco-Victim Claims and Succession Claims are approved to receive a Compensation

Payment in accordance with the terms of the Quebec Administration Plan, and “**Eligible *Blais* Class Member**” means any one of them.

“**Emphysema**” means the condition of the lung that is marked by distension and eventual rupture of the alveoli with progressive loss of pulmonary elasticity, that is accompanied by shortness of breath with or without cough, and that may lead to impairment of heart action. For the purpose of the Quebec Administration Plan, “Emphysema” includes COPD (GOLD Grade III or IV).

“**Epiq**” means Epiq Class Actions Services Canada, Inc.

“**Estate**” means the succession of a deceased Tobacco-Victim, whether pursuant to a will or by operation of law.

“**Exit Report**” means the final report that the Claims Administrator shall be required to submit to the CCAA Plan Administrators within six months, or as soon as is practicable, following the termination of the administration of the Quebec Administration Plan.

“**FEV1**” means the measurement recorded during a spirometry test of the maximum volume of air that the individual can forcibly expel during the first second following maximal inhalation.

“**Global Settlement Amount**” has the meaning given in Article 5, Section 5.1 of the CCAA Plans.

“**Global Settlement Trust Account**” has the meaning given in Article 5, Section 5.3 of the CCAA Plans.

“**Heir**” means:

- (i) a universal legatee to the Estate of a deceased Tobacco-Victim identified in a will in effect at time of death, who is entitled to receive all or a portion of the Compensation Payment payable in respect of the deceased Tobacco-Victim;
- (ii) a particular legatee where the will stipulates that such person is entitled to receive all or a

portion of the Compensation Payment payable in respect of the deceased Tobacco-Victim;

- (iii) an heir pursuant to testamentary provisions in a registered marriage contract;
- (iv) an heir of a deceased Tobacco-Victim established by operation of law pursuant to the rules for legal successions contained in the Civil Code of Quebec, and summarized in the chart attached hereto as **Appendix “F”**; or
- (v) the estate, testamentary heirs or legal heirs of a deceased Heir, who takes the claim of the deceased Heir by representation;

and **“Heirs”** means all of them. In all cases, proof of such status of Heir must be submitted to the Quebec Administrator in a manner consistent with paragraphs 38.5 and 38.6 of the Quebec Administration Plan, as applicable.

“Hypopharynx” means the laryngeal part of the pharynx extending from the hyoid bone to the lower margin of the cricoid cartilage.

“Imperial” means, collectively, ITCAN and ITCO.

“Individuals” means all individuals residing in a Province or Territory of Canada, and **“Individual”** means any one of them.

“Initial Order” means, in respect of each Tobacco Company, the initial order commencing the CCAA Proceedings of the Tobacco Company, as amended and restated from time to time.

“ITCAN” means Imperial Tobacco Canada Limited.

“ITCO” means Imperial Tobacco Company Limited.

“JTIM” means JTI-Macdonald Corp.

“Knight Class Action” means *Kenneth Knight v. Imperial Tobacco Canada Limited* (Supreme Court of British Columbia, Court File No. L031300).

“Knight Class Action Plaintiffs” means Individuals who meet the criteria of the certified class definition in the *Knight Class Action*. The fact that an Individual is a *Knight Class Action Plaintiff* does not thereby disqualify that Individual from being a Pan-Canadian Claimant.

“Larynx” means the upper part of the respiratory passage that is bounded above by the glottis and is continuous below with the trachea.

“Legal Representative” means an Individual who establishes through the submission to the Claims Administrator of one of the documents listed in Question 10(b) of the Tobacco-Victim Claim Form that they have the right and are authorized to make a Tobacco-Victim Claim on behalf of the Tobacco-Victim Claimant.

“Létourneau Class Action” means *Cecilia Létourneau et al. v. Imperial Tobacco Canada Ltd., et al.*, Court File No. 500-06-000070-983 (Montreal, Quebec).

“Létourneau Class Members” means persons who meet the criteria of the following certified class definition in the *Létourneau Class Action*:

All persons residing in Quebec who, as of September 30, 1998, were addicted to the nicotine contained in the cigarettes made by the defendants and who otherwise satisfy the following criteria:

- (1) They started to smoke before September 30, 1994 and since that date have smoked principally cigarettes manufactured by the defendants;
- (2) Between September 1 and September 30, 1998, they smoked on a daily basis an average of at least 15 cigarettes manufactured by the defendants; and

- (3) On February 21, 2005, or until their death if it occurred before that date, they were still smoking on a daily basis an average of at least 15 cigarettes manufactured by the defendants.

The group also includes the Heirs of the members who satisfy the criteria described herein.

“Létourneau Judgment” means the judgment rendered by the Honourable Justice Brian Riordan on May 27, 2015 as rectified on June 9, 2015, and the judgment of the Court of Appeal of Quebec dated March 1, 2019 in the class action commenced in the Quebec Superior Court in Court File No. 500-06-000070-983 (*Cecilia Létourneau et al. v. Imperial Tobacco Canada Ltd., et al.*).

“Liquidator” means a liquidator, including an executor where that terminology is used, of the succession of a deceased Tobacco-Victim named under a will or designated by the Heirs or the court, and may include one or more liquidators so named or designated.

“Lung Cancer” means primary cancer of the lungs.

“MED-ÉCHO” means the database of the MSSS held by RAMQ that contains personal clinical-administrative information relating to the care and services rendered to a person admitted or registered for day surgery in a Quebec hospital center.

“MSSS” means the Ministère de la Santé et des Services sociaux, or Ministry of Health and Social Services, of Quebec.

“Monitor” means, in respect of each Tobacco Company, the Court-appointed monitor appointed pursuant to the applicable Initial Order in the respective CCAA Proceedings.

“Notice of Acceptance of *Blais* Claim” means the Notice, in the form attached hereto as **Appendix “L”**, sent by the Claims Administrator to a Tobacco-Victim Claimant or a Succession Claimant advising that their Proof of Claim has been accepted.

“**Notice of Incomplete *Blais* Claim**” means the Notice, in the form attached hereto as **Appendix “K”**, issued by the Claims Administrator to a Tobacco-Victim Claimant or a Succession Claimant advising them that the Proof of Claim is incomplete and of the corrective measures required to complete the Proof of Claim.

“**Notice of Rejection of *Blais* Claim**”, or “**Notice of Rejection of Claim**”, means the Notice, in the form attached hereto as **Appendix “B”**, issued by the Claims Administrator to a Tobacco-Victim Claimant or a Succession Claimant advising them that their Proof of Claim has been rejected and of the Request for Review.

“**Notice to Provide Alternative Proof**” means the Notice, in the form attached hereto as **Appendix “P”**, issued by the Claims Administrator to a Tobacco-Victim Claimant or Succession Claimant requesting that they provide Alternative Cancer Proof or Alternative Emphysema/COPD (GOLD Grade III or IV) Proof, as applicable, to the Claims Administrator.

“**Official Confirmation**” means the confirmation of a Tobacco-Victim Claimant’s diagnosis of a *Blais* Compensable Disease or Diseases before March 12, 2012, either by confirmation from the Quebec Cancer Registry in respect of a diagnosis of Lung Cancer or Throat Cancer, or confirmation from MED-ÉCHO in the case of a diagnosis of Emphysema/COPD (GOLD Grade III or IV), as the case may be, and collectively the “**Official Confirmations**”.

“**Oropharynx**” means the part of the pharynx that is below the soft palate and above the epiglottis and is continuous with the mouth. It includes the back third of the tongue, the soft palate, the side and back walls of the throat, and the tonsils.

“**Pan-Canadian Claimants**”, or “**PCCs**”, means Individuals, excluding *Blais* Class Members and *Létourneau* Class Members in relation to QCAP Claims, who have asserted or may be entitled to assert a PCC Claim.

“**Pan-Canadian Claimants’ Compensation Plan**”, or “**PCC Compensation Plan**”, means the Pan-Canadian Claimants’ Compensation Plan which provides for the payment of compensation to Eligible PCC-Claimants.

“**PCC Claim**” means any claim of any Pan-Canadian Claimant that has been made or may in the future be asserted or made in whole or in part against or in respect of the Released Parties, or any one of them (either individually or with any other Person), that has been advanced, could have been advanced or could be advanced, whether on such Pan-Canadian Claimant’s own account, or on their behalf, or on behalf of a certified or proposed class, to recover damages or any other remedy in respect of the development, design, manufacture, production, marketing, advertising, distribution, purchase or sale of Tobacco Products, including any representations or omissions in respect thereof, the historical or ongoing use of or exposure (whether directly or indirectly) to Tobacco Products or their emissions and the development of any disease or condition as a result thereof, whether existing or hereafter arising, in each case based on, arising from or in respect of any conduct, act, omission, transaction, duty, responsibility, indebtedness, liability, obligation, dealing, fact, matter or occurrence existing or taking place at or prior to the Effective Time (whether or not continuing thereafter) including, all Claims that have been advanced, could have been advanced or could be advanced in the following actions commenced by individuals under provincial class proceedings legislation and actions commenced by individuals, or in any other similar proceedings:

- (a) *Barbara Bourassa v. Imperial Tobacco Canada Limited et al.* (Supreme Court of British Columbia, Court File No. 10-2780 and Court File No. 14-4722);
- (b) *Roderick Dennis McDermid v. Imperial Tobacco Canada Limited et al.* (Supreme Court of British Columbia, Court File No. 10-2769);
- (c) *Linda Dorion v. Canadian Tobacco Manufacturers’ Council et al.* (Alberta Court of Queen’s Bench, Court File No. 0901-08964);
- (d) *Thelma Adams v. Canadian Tobacco Manufacturers’ Council et al.* (Saskatchewan Court of Queen’s Bench, Court File No. 916 of 2009);
- (e) *Deborah Kunta v. Canadian Tobacco Manufacturers’ Council et al.* (Manitoba Court of Queen’s Bench, Court File No. CI09-01-61479);

- (f) *Suzanne Jacklin v. Canadian Tobacco Manufacturers' Council* (Ontario Superior Court of Justice, Court File No. 53794/12);
- (g) *Ben Semple v. Canadian Tobacco Manufacturers' Council et al.* (Supreme Court of Nova Scotia, Court File No. 312869);
- (h) *Victor Todd Sparkes v. Imperial Tobacco Canada Limited* (Newfoundland and Labrador Supreme Court - Trial Division, Court File No. 200401T2716 CP);
- (i) *Peter Stright v. Imperial Tobacco Canada Limited* (Supreme Court of Nova Scotia, Court File No. 177663);
- (j) *Ljubisa Spasic as estate trustee of Mirjana Spasic v. Imperial Tobacco Limited and Rothmans, Benson & Hedges Inc.* (Ontario Superior Court of Justice, Court File No. C17773/97);
- (k) *Ljubisa Spasic as estate trustee of Mirjana Spasic v. B.A.T. Industries P.L.C.* (Ontario Superior Court of Justice, Court File No. C18187/97);
- (l) *Ragoonanan v. Imperial Tobacco Canada Limited* (Ontario Superior Court of Justice, Court File No. 00-CV-183165-CP00);
- (m) *Scott Landry v. Imperial Tobacco Canada Limited* (Ontario Superior Court of Justice, Court File No. 1442/03);
- (n) *Joseph Battaglia v. Imperial Tobacco Canada Limited* (Ontario Superior Court of Justice, Court File No. 21513/97);
- (o) *Roland Bergeron v. Imperial Tobacco Canada Limited* (Quebec Superior Court, Court File No. 750-32-700014-163);

(p) *Paradis, in personal capacity and on behalf of estate of Lorraine Trepanier v. Rothmans, Benson & Hedges Inc.* (Quebec Small Claims Court);

(q) *Couture v. Rothmans, Benson & Hedges Inc.* (Quebec Superior Court); and

including any such Claim that is a Section 5.1(2) Claim or Section 19(2) Claim.

“PCC-Claimants” means the Pan-Canadian Claimants who are all Individuals resident in a Province or Territory of Canada, excluding the Quebec Class Action Plaintiffs in relation to QCAP Claims, but including the Pan-Canadian Claimants’ respective heirs, successors, assigns and representatives, who assert a PCC Claim by submitting a Claim Package to the Claims Administrator pursuant to the PCC Compensation Plan, and **“PCC-Claimant”** means any one of them.

“PCC Eligibility Criteria” means the criteria set out in the PCC Compensation Plan which a person must meet to be eligible to receive an Individual Payment as a PCC-Claimant.

“Person” means an individual, a corporation, a partnership, a limited liability company, a trust, an unincorporated association, or any other entity or body.

“Personal Information” means any information in any form, including any data which is derived from such information, about an identifiable Individual, whether living or deceased, including information relating to age, address, telephone number, email address, any identifying number assigned to the Individual (including Provincial or Territorial Health Insurance Number), personal health information, medical records, and the Individual’s name where it appears with other Personal Information relating to the Individual, or where the disclosure of the name would reveal other Personal Information about the Individual.

“Physician” means an Individual who is licensed to practice medicine in Canada.

“Physician Form” means the form attached hereto as **Appendix “D”** which may be completed by the treating Physician of a Tobacco-Victim, or any other Physician with access to the Tobacco-

Victim's medical records, and submitted to the Claims Administrator as Alternative Proof, if Alternative Proof has been requested by the Claims Administrator in order to complete a Proof of Claim.

“Place of Residence” has the meaning given in paragraph 43.1.3 of the Quebec Administration Plan.

“Plan Implementation Date” means the date upon which all of the conditions to the CCAA Plans and other Definitive Documents have been satisfied or waived and the transactions contemplated by the CCAA Plans, the Sanction Orders and the other Definitive Documents are to be implemented, as evidenced by the Monitors' Certificates to be delivered to the Tobacco Companies and filed with the CCAA Court.

“Proof of Claim” means all of the documents that a Tobacco-Victim Claimant or a Succession Claimant, as applicable, is required to complete and submit to the Claims Administrator including the Tobacco-Victim Claim Form or Succession Claim Form, as applicable, and, if requested, the Alternative Proof. .

“Proof of Claim Review Checklist for Succession Claims” means the checklist attached hereto as **Appendix “J”** which the Claims Administrator will use to process the Proofs of Claim for Succession Claims.

“Proof of Claim Review Checklist for Tobacco-Victim Claims” means the checklist attached hereto as **Appendix “I”** which the Claims Administrator will use to process the Proofs of Claim for Tobacco-Victim Claims.

“Proof of Diagnosis” means the proof of diagnosis of a *Blais* Compensable Disease and the date of diagnosis, by way of either an Official Confirmation or Alternative Proof.

“Proof of Smoking History” means proof of a Tobacco-Victim's smoking history made in the Tobacco-Victim Claim Form or the Succession Claim Form, as applicable.

“Proof of Succession Status” means proof in the manner provided for in paragraphs 38.1 to 38.6 of the Quebec Administration Plan.

“Provinces” means, for the purpose of the Quebec Administration Plan, collectively, the geographic regions of British Columbia, Alberta, Saskatchewan, Manitoba, Ontario, Quebec, New Brunswick, Nova Scotia, Prince Edward Island, and Newfoundland and Labrador, and **“Province”** means any one of these geographic regions.

“QCAP Claim” means any Claim that has been advanced, could have been advanced or could be advanced in the following class actions or in any other similar proceedings, whether before or after the Effective Time:

- (a) *Conseil québécois sur le tabac et la santé et Jean-Yves Blais c. Imperial Tobacco Ltée, Rothmans, Benson & Hedges inc. et JTI-MacDonald Corp.* (Quebec Superior Court, Court File No. 500-06-00076-980); and
- (b) *Létourneau c. Imperial Tobacco Ltée, Rothmans Benson & Hedges Inc. et JTI MacDonald Corp.* (Quebec Superior Court, Court File No. 500-06-000070-983),

including the judgment of the Honourable Justice Brian Riordan dated May 27, 2015 as rectified on June 9, 2015, and the judgment of the Court of Appeal of Quebec dated March 1, 2019, and any such Claim that is a Section 5.1(2) Claim or Section 19(2) Claim.

“QCAP Settlement Amount” means the amount allocated from the Global Settlement Amount and paid for the benefit of the QCAPs in settlement of the Tobacco Companies’ liability pursuant to the judgments rendered in the Quebec Class Actions, as set forth in as set forth in Article 16, Sections 16.1, 16.2 and 16.3 of the CCAA Plans.

“QCAP Trust Account” means the designated trust account or trust accounts held in the Bank for the benefit of the Quebec Class Action Plaintiffs and into which the QCAP Settlement Amount shall be paid and deposited from the Global Settlement Trust Account.

“**Quebec Cancer Registry**” means the Registre québécois du cancer (RQC) of the MSSS held by RAMQ which contains personal information on cases of cancer in Quebec.

“**Quebec Class Action Administration Plan**”, or “**Quebec Administration Plan**”, means the document (with attached appendices) that is subject to the approval of the CCAA Court setting out the process by which the Quebec Class Action Plaintiffs may submit claims for a Compensation Payment pursuant to the *Blais* Judgment, the process of administering such claims, and the joint oversight and supervision thereof by the CCAA Court and the Superior Court of Quebec.

“**Quebec Class Action Call Centre**” means the Call Centre maintained by Raymond Chabot and the Quebec Class Counsel.

“**Quebec Class Action Plaintiffs**”, or “**QCAPs**”, means individuals who meet the criteria of the certified class definitions in the Quebec Class Actions.

“**Quebec Class Action Website**” means the secure website at www.recourstabac.com maintained by Raymond Chabot and the Quebec Class Counsel.

“**Quebec Class Actions**” means, collectively, (i) *Conseil québécois sur le tabac et la santé et al. v. JTI-Macdonald Corp. et al.*, Court File No. 500-06-000076-980 (Montreal, Quebec), and (ii) *Cecilia Létourneau et al. v. Imperial Tobacco Canada Ltd., et al.*, Court File No. 500-06-000070-983 (Montreal, Quebec).

“**Quebec Class Counsel**” means, collectively, the law practices of Trudel Johnston & Lespérance s.e.n.c., Kugler Kandestin s.e.n.c.r.l., L.L.P., De Grandpré Chait s.e.n.c.r.l., L.L.P., and Fishman Flanz Meland Paquin s.e.n.c.r.l., L.L.P.

“**Quebec Class Counsel Fee**” means the amount that is subject to the approval of the CCAA Court that will be payable from the QCAP Settlement Amount to Quebec Class Counsel, and to any legal counsel providing services to the Quebec Class Counsel in connection with the CCAA Proceedings, the Quebec Class Actions and/or any other proceedings on behalf of the *Blais* Class

Members and/or *Létourneau* Class Members, in respect of their fees, disbursements and costs as Quebec Class Counsel, and any GST, QST, HST and other applicable taxes payable thereon.

“Quebec Superior Court” means the Superior Court of Quebec, Class Action Division, at Montreal.

“RAMQ” means the Régie de l’assurance maladie du Québec.

“Raymond Chabot” means Raymond Chabot Administrateur Provisaires Inc. and its Affiliates.

“RBH” means Rothmans, Benson & Hedges Inc.

“Released Parties”, collectively, means:

- (a) ITCAN,
- (b) ITCO,
- (c) RBH,
- (d) JTIM,
- (e) British American Tobacco p.l.c.,
- (f) Philip Morris International Inc.,
- (g) JT International Holding B.V.,
- (h) JT International Group Holding B.V.,
- (i) the ITCAN Subsidiaries,
- (j) B.A.T. Investment Finance p.l.c.,

- (k) B.A.T Industries p.l.c.,
- (l) British American Tobacco (Investments) Limited,
- (m) Carreras Rothmans Limited,
- (n) Philip Morris U.S.A. Inc.,
- (o) Philip Morris Incorporated,
- (p) Philip Morris Global Brands Inc.,
- (q) Philip Morris S.A.,
- (r) Rothmans Inc.,
- (s) Ryesekks p.l.c.,
- (t) Altria Group, Inc.,
- (u) R.J. Reynolds Tobacco Company,
- (v) R.J. Reynolds Tobacco International Inc.,
- (w) RJR Nabisco, Inc.,
- (x) JT International SA,
- (y) JT Canada LLC Inc.,
- (z) Japan Tobacco Inc.,
- (aa) JTIM TM,

(bb) Canadian Tobacco Manufacturers' Council, and

(cc) every other current or former Affiliate of any of the companies listed in subparagraphs (a) to (aa) herein, and each of their respective indemnitees,

and “**Released Party**” means any of them. Each Released Party includes their respective Representatives.

“**Representatives**” means, in respect of a Person, as may be applicable, such Person's past, present or future representatives, predecessors, successors, executors, trustees, heirs, dependents, children, siblings, parents, administrators, executors, directors, officers, shareholders, partners, employees, servants, agents, consultants, legal counsel and advisers, including their respective successors and assigns, and each of their respective directors, officers, partners and employees.

“**Request for Review**” has the meaning given in paragraph 28.1 of the Quebec Administration Plan and is in the form attached hereto as **Appendix “M”**.

“**Residual Funds**” means any residual funds that may remain from the Quebec Settlement Amount after the payment in full of (i) all Compensation Payments to all Eligible *Blais* Class Members, and (ii) the Quebec Class Counsel Fee.

“**Retention Period**” has the meaning given in paragraph 59.1 of the Quebec Administration Plan.

“**Review Officer**” means a senior employee or officer of the Claims Administrator who is screened from the Claims Process and whose role is designated solely to review upon an independent basis any Requests for Review that may be submitted to the Claims Administrator by Tobacco-Victim Claimants or Succession Claimants and decide whether to confirm, reverse or vary the Claims Administrator's decision.

“**Sanction Hearing**” means the hearing before the CCAA Court in respect of the Sanction Orders.

“Sanction Orders” means the orders of the CCAA Court, among other things, sanctioning the CCAA Plans of Imperial, RBH and JTIM and granting, approving and declaring the settlements, compromises and releases, as applicable, contemplated by the CCAA Plans.

“Section 5.1(2) Claims” means any Claims against the directors of ITCAN, ITCO, RBH or JTIM that:

- (a) arose before the commencement of the CCAA Proceeding;
- (b) relate to the obligations of ITCAN, ITCO, RBH or JTIM where the directors are by law liable in their capacity as directors for the payment of such obligations; and
- (c) either relate to contractual rights of one or more creditors, or are based on allegations of misrepresentations made by directors to creditors, or of wrongful or oppressive conduct by directors.

“Section 19(2) Claims” means any Claims against ITCAN, ITCO, RBH or JTIM that relate to any of the following debts or liabilities, present or future, to which ITCAN, ITCO, RBH or JTIM is subject on the day on which the CCAA Proceeding commenced, or to which ITCAN, ITCO, RBH or JTIM may become subject before the compromise or arrangement is sanctioned by reason of any obligation incurred by ITCAN, ITCO, RBH or JTIM before the day on which the CCAA Proceeding commenced, unless the compromise or arrangement in respect of ITCAN, ITCO, RBH or JTIM explicitly provides for the Claim’s compromise, and the creditor in relation to that debt has voted for the acceptance of the compromise or arrangement:

- (a) any fine, penalty, restitution order or other order similar in nature to a fine, penalty or restitution order, imposed by a court in respect of an offence;
- (b) any award of damages by a court in civil proceedings in respect of:
 - (i) bodily harm intentionally inflicted, or sexual assault, or

- (ii) wrongful death resulting from an act referred to in subparagraph (i);
- (c) any debt or liability arising out of fraud, embezzlement, misappropriation or defalcation while acting in a fiduciary capacity or, in Quebec, as a trustee or an administrator of the property of others;
- (d) any debt or liability resulting from obtaining property or services by false pretences or fraudulent misrepresentation, other than a debt or liability of the company that arises from an equity claim; or
- (e) any debt for interest owed in relation to an amount referred to in any of paragraphs (a) to (d).

“**Smoking History**” means the number of pack-years smoked by a Tobacco-Victim between January 1, 1950 and November 20, 1998.

“**Subsidiary**” has the meaning attributed thereto in Section 2(5) of the *Canada Business Corporations Act*, R.S.C. 1985, c. C-44, as amended.

“**Succession Claim**” means the QCAP Claim of a Succession Claimant which is submitted to the Claims Administrator using the Succession Claim Form.

“**Succession Claim Form**” means the form attached hereto as **Appendix “E”** which a Succession Claimant is required to complete and submit to the Claims Administrator in order to make a Succession Claim pursuant to the Quebec Administration Plan.

“**Succession Claimant**” means a person who asserts a Succession Claim pursuant to the Quebec Administration Plan.

“**Succession Class Member**” means a Blais Class Member that either (i) represents the Estate of a deceased Tobacco-Victim; or (ii) is an Heir of a deceased Tobacco-Victim.

“Supporting Documents” means all documents submitted to the Claims Administrator by the Tobacco-Victim Claimant or Succession Claimant in support of a Proof of Claim, including the documents submitted by Succession Claimants pursuant to sections 35.3 and 35.4 of the Quebec Administration Plan.

“Tax Refund Cash Payments” has the meaning given in Article 5, Section 5.6 of the CCAA Plans.

“Territories” means, for the purpose of the Quebec Administration Plan, collectively, the geographic regions of Yukon, Northwest Territories and Nunavut, and **“Territory”** means any one of these geographic regions.

“Throat Cancer” means primary cancer (squamous cell carcinoma) of the Larynx, Oropharynx or Hypopharynx.

“Tobacco Companies” means, collectively, ITCAN, ITCO, RBH and JTIM, and **“Tobacco Company”** means any one of them.

“Tobacco Producers” means, collectively, the Ontario Flue-Cured Tobacco Growers’ Marketing Board, Andy J. Jacko, Brian Baswick, Ron Kichler, Arpad Dobrentey and all other tobacco growers and producers who sold their tobacco through the Ontario Flue-cured Tobacco Growers’ Marketing Board pursuant to the annual Heads of Agreement made by the Ontario Flue-cured Tobacco Growers’ Board with ITCAN, RBH and JTIM from January 1, 1986 to December 31, 1996, and **“Tobacco Producer”** means any one of them.

“Tobacco Product” means any product made in whole or in part of tobacco that is intended for human consumption or use, including any component, part, or accessory of or used in connection with a tobacco product, including cigarettes, tobacco sticks (intended for smoking and requiring further preparation before they are smoked), loose tobacco intended for incorporation into cigarettes, cigars, cigarillos, pipe tobacco, kreteks, bidis and smokeless tobacco (including chewing tobacco, nasal snuff and oral snuff), but does not include any Alternative Product.

“Tobacco-related Disease” means a disease or other illness or harm caused or contributed to by the use of or exposure (whether directly or indirectly) to a Tobacco Product.

“Tobacco-Victim” means any Individual who suffers or suffered from a Tobacco-related Disease.

“Tobacco-Victim Claim” is the QCAP Claim of a Tobacco-Victim which is submitted to the Claims Administrator using the Tobacco-Victim Claim Form.

“Tobacco-Victim Claim Form” means the form attached hereto as **Appendix “C”** which a Tobacco-Victim Claimant is required to complete and submit to the Claims Administrator in order to make a Tobacco-Victim Claim pursuant to the Quebec Administration Plan.

“Tobacco-Victim Claimant” means a person who asserts a Tobacco-Victim Claim pursuant to the Quebec Administration Plan.

“Twelve Pack-Years” means the equivalent of a minimum of 87,600 cigarettes, namely any combination of the number of cigarettes smoked in a day multiplied by the number of days of consumption insofar as the total is equal to or greater than 87,600 cigarettes. For example, Twelve Pack-Years equals:

- (a) 20 cigarettes a day for 12 years ($20 \times 365 \times 12 = 87,600$); or
- (b) 30 cigarettes a day for 8 years ($30 \times 365 \times 8 = 87,600$); or
- (c) 10 cigarettes a day for 24 years ($10 \times 365 \times 24 = 87,600$ “.

“Upfront Contributions” has the meaning given in Article 5, Section 5.4 of the CCAA Plans, and

“Upfront Contribution” means any one of them.

2. Form of Documents

- 2.1 Any reference in this document to a notice, form, statutory declaration, acknowledgement, checklist, agreement, application or other document being in a particular form means that such document shall be substantially in such form.

3. Headings

- 3.1 The division of this document into “Sections” and “paragraphs”, the insertion of a table of contents and headings, and the appending of Appendices are for the convenience of reference only and do not affect the construction or interpretation of the provisions herein governing the Quebec Administration Plan.

4. Extended Meanings

- 4.1 In this document, the use of words in the singular or plural, or with a particular gender, including a definition, will not limit the scope or exclude the application of any provision of the CCAA Plan or a schedule thereto to such Person (or Persons) or circumstances as the context otherwise permits.

5. Terms of Inclusion

- 5.1 In this document, the words “includes” and “including” and similar terms of inclusion shall not, unless expressly modified by the words “only” or “solely”, be construed as terms of limitation, but rather shall mean “includes but is not limited to” and “including but not limited to”, so that references to included matters shall be regarded as illustrative without being either characterizing or exhaustive.

6. Acts to Occur on Next Business Day

- 6.1 Where any payment, distribution or act pursuant to this document is required to be made or performed on a date that is not a Business Day, then the making of such payment or

distribution, or the performance of the act, may be completed on the next succeeding Business Day, but shall be deemed to have been completed as of the required date.

7. Changes to Quebec Administration Plan

7.1 No changes, modifications or revisions shall be made to the Quebec Administration Plan without the joint approval of the CCAA Court and the Quebec Superior Court as set out in an Order issued by the CCAA Court. The CCAA Plan Administrators, Claims Administrator and Quebec Class Counsel are the only persons who are entitled to apply to the CCAA Court to seek a revision to the terms of the Quebec Administration Plan.

7.2 Notwithstanding paragraph 7.1 herein, the Claims Administrator may make revisions to the claims forms which are Schedules to the Quebec Administration Plan provided that (i) the proposed revisions are not substantive and are consistent with the terms of Quebec Administration Plan, (ii) the Claims Administrator has first reviewed the proposed non-substantive revisions with the Administrative Coordinator, and (iii) the Administrative Coordinator has approved such revisions. The Administrative Coordinator shall advise the CCAA Plan Administrators and Quebec Class Counsel in writing of any revisions made to the claims forms.

8. Currency

8.1 All monetary amounts referenced in this document are expressed in the lawful currency of Canada.

9. No Other Obligations of Tobacco Companies

9.1 As more particularly set forth in Article 18, Sections 18.1.1, 18.1.2, 18.1.3, 18.1.8, 18.1.9 and 18.1.10 of the CCAA Plans and the Claimant Contractual Releases which are Schedule “T” to Imperial’s CCAA Plan and Schedule “W” to the CCAA Plans of RBH and JTIM, at the Effective Time all QCAP Claims shall be deemed to be fully, finally, irrevocably and unconditionally released and forever discharged against the Released Parties, and the

Released Parties shall have no further liability to the Quebec Class Action Plaintiffs except as set out in the Definitive Documents and this document which gives effect to the Quebec Administration Plan.

- 9.2 For greater certainty, the terms of the CCAA Plans and the Claimant Contractual Releases, and not paragraph 9.1 herein, govern the scope of the release provided to the Released Parties.

10. Appendices

- 10.1 The following Appendices regarding the Quebec Administration Plan are incorporated into this document and form part of it as fully as if contained in the body of this document and must be read in conjunction therewith. In the event of a contradiction between the content of the body of this document and the content of the body of one of the Appendices below, the language of the body of this document shall govern:

Appendix “A”: *Blais* First Notice

Appendix “B”: Notice of Rejection of *Blais* Claim

Appendix “C”: Tobacco-Victim Claim Form

Appendix “D”: Physician Form

Appendix “E”: Succession Claim Form

Appendix “F”: Rules for Legal Successions in the *Civil Code of Quebec* (in the absence of a will)

Appendix “G”: Decision Tree entitled “Determination of whether Canadian Residents qualify to receive Compensation either pursuant to *Blais* Judgment or from Pan-Canadian Claimants’ Compensation Plan”

Appendix “H”: Acknowledgment of Receipt of *Blais* Claim

Appendix “I”: Proof of Claim Review Checklist for Tobacco-Victim Claims

Appendix “J”: Proof of Claim Review Checklist for Succession Claims

Appendix “K”: Notice of Incomplete *Blais* Claim

Appendix “L”: Notice of Acceptance of *Blais* Claim

Appendix “M”: Request for Review Form

Appendix “N”: Acknowledgment of Receipt of Request for Review

Appendix “O”: Brands of Cigarettes sold by Canadian Tobacco Companies in Canada between January 1, 1950 and November 20, 1998

Appendix “P”: Notice to Provide Alternative Proof

**SECTION II – ROLES OF CCAA COURT, QUEBEC SUPERIOR COURT,
ADMINISTRATIVE COORDINATOR, CLAIMS ADMINISTRATOR
AND QUEBEC CLASS COUNSEL**

11. Role of CCAA Court and Quebec Superior Court

11.1 The CCAA Court shall have an ongoing supervisory role in respect of the administration of the CCAA Plans, including the Quebec Administration Plan.

11.2 As described in paragraphs 11.2.1, 11.2.2 and 11.2.3 herein, the CCAA Court’s oversight of the Quebec Administration Plan shall be exercised in a joint and coordinated manner with the Quebec Superior Court as follows:

11.2.1 The CCAA Court and the Quebec Superior Court may establish a protocol for communications between one another to discuss, on an ongoing basis, matters relating to their co-supervision of the administration of the Quebec Administration Plan, including issues which are specifically referred for resolution to the CCAA Court and the Quebec Superior Court by the CCAA Plan Administrators. In resolving such referred matters, the CCAA Court and the Quebec Superior Court may, in their discretion, issue orders and/or provide such directions as are appropriate to facilitate the fair, efficient and timely administration of the Quebec Administration Plan;

11.2.2 The CCAA Court shall hear and determine proceedings addressing the following matters:

- 11.2.2.1 A motion by the Court-Appointed Mediator and the Monitors for orders approving and sanctioning the CCAA Plans, which shall include the approval of both the Quebec Administration Plan (Schedule “K” to Imperial’s CCAA Plan and Schedule “N” to RBH’s and JTIM’s CCAA Plans) and the PCC Compensation Plan (Schedule “P” to Imperial’s CCAA Plan and Schedule “S” to RBH’s and JTIM’s CCAA Plans);
 - 11.2.2.2 The approval and appointment of the Claims Administrator;
 - 11.2.2.3 The approval and appointment of the Administrative Coordinator;
 - 11.2.2.4 The approval of the *Blais* Notice Plan;
 - 11.2.2.5 The approval of the retainer agreement respecting fees and disbursements between the Quebec Class Counsel and the representative plaintiffs, and the approval of the Quebec Class Counsel Fee; and
 - 11.2.2.6 Any matters which are referred for joint determination by the CCAA Court and the Quebec Superior Court.
- 11.2.3 The Quebec Superior Court shall hear and determine proceedings addressing the following matters:
- 11.2.3.1 A motion to be brought in the *Blais* Class Action by the Quebec Class Counsel: (a) requesting that the Quebec Superior Court come in aid, recognize, assist and give full force and effect to the extent necessary to the orders issued by the CCAA Court in the CCAA Proceedings, including in respect of the sanction of the CCAA Plans and the approval of the Quebec Administration Plan; (b) seeking orders authorizing and directing the MSSS and RAMQ to provide to the

Claims Administrator Official Confirmations (i) from the Quebec Cancer Registry of Tobacco-Victims' diagnoses of Lung Cancer or Throat Cancer, and (ii) from MED-ÉCHO of Tobacco-Victims' diagnoses of Emphysema/COPD (GOLD Grade III or IV); and (c) if deemed feasible by Quebec Class Counsel, seeking an order directing the MSSS to effect direct notification of the Quebec Administration Plan to potential *Blais* Class Members on the Quebec Cancer Registry;

11.2.3.2 Motions seeking the Closing Judgment to be brought in the *Blais* Class Action and the *Létourneau* Class Action by the Quebec Class Counsel after the Claims Process has ended and all Eligible *Blais* Class Members have been paid their Compensation Payments; and

11.2.3.3 Any matters which are referred for joint determination by the CCAA Court and the Quebec Superior Court.

12. Role of Administrative Coordinator

12.1 The Administrative Coordinator's role in regard to the administration of the Quebec Administration Plan and the administration of the PCC Compensation Plan is as follows:

12.1.1 The Administrative Coordinator will coordinate and serve as a liaison and conduit to facilitate the flow of information between the Claims Administrator and the CCAA Plan Administrators in regard to both the Quebec Administration Plan and the PCC Compensation Plan. Where the Claims Administrator requires directions from either the CCAA Plan Administrators directly, or jointly from the CCAA Court and the Quebec Superior Court through the CCAA Plan Administrators, the Administrative Coordinator will bring the Claims Administrator's request to the CCAA Plan Administrators and notify the Quebec Class Counsel;

- 12.1.2 The Administrative Coordinator may also assist the Claims Administrator to address issues that may arise from time to time in the interpretation, implementation and ongoing administration of the Quebec Administration Plan and that, in the opinion of the Administrative Coordinator, (i) are possible of resolution short of obtaining direction from the CCAA Court and the Quebec Superior Court, (ii) where such an approach is appropriate in the circumstances, and (iii) where the resolution of the issue does not require the sanction of either the CCAA Plan Administrators or the CCAA Court and the Quebec Superior Court, as the case may be;
- 12.1.3 If the Administrative Coordinator and the Claims Administrator are unable to resolve an issue relating to the Quebec Administration Plan, then the Administrative Coordinator will refer the matter to the CCAA Plan Administrators who may, in their discretion, refer the matter jointly to the CCAA Court and the Quebec Superior Court for resolution or directions in accordance with paragraph 11.2 herein. The CCAA Plan Administrators will advise the Quebec Class Counsel of all such matters that they refer jointly to the CCAA Court and the Quebec Superior Court; and
- 12.1.4 The Administrative Coordinator may also work with the Claims Administrator to coordinate the harmonization of the claims administration of the *Blais* Judgment under the Quebec Administration Plan and the claims administration of the PCC Compensation Plan in accordance with the harmonization principles set out in Section VII herein.

13. Costs of Administrative Coordinator

- 13.1 All fees, costs, disbursements, expenses and other expenditures of the Administrative Coordinator, including for the services of any legal or other advisors, shall be paid directly by the Tobacco Companies and shall not be deducted from the QCAP Settlement Amount or the PCC Compensation Plan Amount.

14. Appointment and Court Approval of Claims Administrator

- 14.1 The Claims Administrator of the Quebec Administration Plan is to be identified and recommended by the Court-Appointed Mediator and the Monitors for approval and appointment by the Order of the CCAA Court at the Sanction Hearing.
- 14.2 The Claims Administrator shall be neutral and independent from the Quebec Class Action Plaintiffs (including the *Blais* Class Members and the *Létourneau* Class Members), Quebec Class Counsel, Raymond Chabot, Pan-Canadian Claimants, PCC Representative Counsel, Tobacco Companies, Claimants, CCAA Plan Administrators, Administrative Coordinator and Court-Appointed Mediator. The Claims Administrator may, in its discretion, retain its own legal or other advisors.
- 14.3 In respect of all decisions regarding the implementation and execution of the Quebec Administration Plan, the Claims Administrator shall not collaborate or consult with or seek any advice, instructions or directions from the Quebec Class Counsel. Notwithstanding the above, the Quebec Class Counsel shall communicate and cooperate with the Claims Administrator and the Administrative Coordinator so as to fulfill their duties and responsibilities to the *Blais* Class Members.

15. Provision of Services in English and French

- 15.1 The Claims Administrator shall provide services including the forms and documents that are Appendix “A” through Appendix “P” hereto, in both English and French. All communications between the Claims Administrator and the Tobacco-Victim Claimants, Succession Claimants and *Blais* Class Members shall be in the official language chosen by the Tobacco-Victim Claimants, Succession Claimants and *Blais* Class Members.

16. Costs of Claims Administrator

- 16.1 All Costs for the services of the Claims Administrator, including for the services of any of its legal or other advisors, incurred in respect of the administration of the Quebec

Administration Plan shall be paid from the balance of the QCAP Settlement Amount net of the Quebec Class Counsel Fee.

- 16.2 The costs, fees and disbursements incurred by the Claims Administrator in respect of the administration of the Quebec Administration Plan shall not exceed the amount which is allocated for the budget of the Claims Administrator set out in the written agreement to be entered into between the CCAA Plan Administrators and the Claims Administrator.

17. Role of Quebec Class Counsel

- 17.1 The Quebec Class Counsel have a traditional solicitor-client relationship with the *Blais* Class Members and the *Létourneau* Class Members and a duty to act in the best interests of the classes as a whole and will represent their interests in regard to the Claims Process.
- 17.2 The Quebec Class Counsel may assist Tobacco-Victim Claimants and Succession Claimants to complete and submit their Proofs of Claim to the Claims Administrator.
- 17.3 The Quebec Class Counsel have retained Raymond Chabot to assist Quebec Class Counsel to perform their duties as class counsel. All costs for the services of Raymond Chabot shall be paid directly out of the Quebec Class Counsel Fee.
- 17.4 The Quebec Class Counsel will bring a motion before the Quebec Superior Court seeking orders authorizing and directing the MSSS and RAMQ to provide to the Claims Administrator Official Confirmations (i) from the Quebec Cancer Registry of Tobacco-Victims' diagnoses of Lung Cancer or Throat Cancer, and (ii) from MED-ÉCHO of Tobacco-Victims' diagnoses of Emphysema/COPD (GOLD Grade III or IV).
- 17.5 While no appeals, requests for review, or requests for direction to the CCAA Court or the Quebec Superior Court shall be permitted to be brought in respect of individual QCAP Claims under the Quebec Administration Plan, in the event an issue arises that is of significant general application to the Claims Process for *Blais* Class Members as a whole, Quebec Class Counsel shall in the first instance attempt to resolve the issue informally with

the Administrative Co-ordinator and Claims Administrator. If the issue cannot be resolved informally, then, subject to section 7.1, Quebec Class Counsel may bring a request for directions jointly to the CCAA Court and the Quebec Superior Court for determination.

- 17.6 The Quebec Class Counsel may liaise with the Claims Administrator and/or the Administrative Coordinator regarding matters relating to the Quebec Administration Plan and its implementation, including informing them of any difficulties faced by *Blais* Class Members as a whole in connection with the Claims Process and making suggestions in that regard.

PART B: QUEBEC ADMINISTRATION PLAN

SECTION I – NOTICE OF QUEBEC ADMINISTRATION PLAN

18. Duties and Responsibilities of Claims Administrator

- 18.1 The Claims Administrator will design the *Blais* Notice Plan which must effectively reach prospective Tobacco-Victim Claimants and Succession Claimants and capture their attention with notices communicated in clear, concise, plain language so that they fully understand their rights and options (“***Blais* Notices**”). The *Blais* Notice Plan may include communications in newspapers, other print media, television, radio, social media, other digital media and direct communications where appropriate in order to reach as many prospective Tobacco-Victim Claimants and Succession Claimants in Quebec as possible. The *Blais* Notice Plan shall be subject to CCAA Court approval.
- 18.2 The Claims Administrator shall implement and manage the *Blais* Notice Plan pursuant to which prospective Tobacco-Victim Claimants and Succession Claimants will be informed about the Quebec Administration Plan and be provided with ongoing notice throughout the *Blais* Claims Submission Period.
- 18.3 The *Blais* Notices shall:

- 18.3.1 Provide a description of the Quebec Administration Plan to prospective Tobacco-Victim Claimants and Succession Claimants, including the *Blais* Eligibility Criteria;
- 18.3.2 Provide prospective Tobacco-Victim Claimants and Succession Claimants with notice of the date upon which the *Blais* Claims Submission Period commences, as well as the *Blais* Claims Application Deadline;
- 18.3.3 Explain the Claims Process and invite prospective Tobacco-Victim Claimants and Succession Claimants to submit a completed Proof of Claim to the Claims Administrator;
- 18.3.4 Provide contact information for the Claims Administrator, including the URL for the Claims Administrator's website which will contain links to the forms comprising the Proof of Claim, and the telephone number for the Call Centre; and
- 18.3.5 Provide contact information for Quebec Class Counsel through the Quebec Class Action Website and the Quebec Class Action Call Centre.

19. Form and Content of *Blais* Notices

- 19.1 All *Blais* Notices shall be published in both English and French.
- 19.2 The ***Blais* First Notice** to prospective Tobacco-Victim Claimants and Succession Claimants notifying them of the CCAA Court's approval of the Quebec Administration Plan, the commencement of the *Blais* Claims Submission Period, the Claims Process and the *Blais* Claims Application Deadline for Tobacco-Victim Claimants and Succession Claimants to submit their completed Proof of Claim to the Claims Administrator is subject to the approval of the CCAA Court as part of the approval of the Notice Plan. Attached hereto as **Appendix "A"** is a version of the *Blais* First Notice that is provided for guidance only to assist the understanding of the Claim Administrator which shall be responsible for

designing, implementing and managing the *Blais* Notice Plan pursuant to which prospective Tobacco-Victim Claimants and prospective Succession Claimants will be informed about the Quebec Administration Plan and be provided with ongoing notice throughout the *Blais* Claims Submission Period. The *Blais* First Notice shall be in final form and ready to be published at the Effective Time, which is the commencement of the *Blais* Claims Submission Period.

20. Costs of *Blais* Notice Plan

- 20.1 The *Blais* Notice Plan shall include the budget for all services to be rendered by the Claims Administrator in connection with the *Blais* Notice Plan, as well as the costs to publish notice to prospective Tobacco-Victim Claimants and prospective Succession Claimants in Quebec through communications in newspapers, other print media, television, radio, social media, other digital media and direct communications where appropriate. The budget for the *Blais* Notice Plan shall be subject to the approval of the CCAA Court.
- 20.2 All fees, disbursements, costs and other expenses associated with the *Blais* Notice Plan shall be paid directly by the Tobacco Companies and shall not be deducted from the QCAP Settlement Amount.
- 20.3 The costs, fees and disbursements incurred by the Claims Administrator in connection with the *Blais* Notice Plan shall not exceed the amount which is allocated for the *Blais* Notice Plan in the budget of the Claims Administrator set out in the written agreement to be entered into between the CCAA Plan Administrators and the Claims Administrator.

SECTION II – COMMUNICATIONS BY CLAIMS ADMINISTRATOR

21. Duties and Responsibilities of Claims Administrator

- 21.1 The Claims Administrator shall establish and operate a toll-free Call Centre providing services in English and French to respond to inquiries from and provide information to Tobacco-Victim Claimants and Succession Claimants, and prospective Tobacco-Victim

Claimants and Succession Claimants, regarding the Quebec Administration Plan and the Claims Process. The Call Centre shall operate from 9:00 a.m. to 9:00 p.m. Eastern Time, Monday to Friday, or such further extended hours as may be determined by the Claims Administrator to be necessary for the efficient administration of the Quebec Administration Plan.

21.2 The Claims Administrator shall develop, host, maintain and manage an accessible website where Tobacco-Victim Claimants and Succession Claimants, and prospective Tobacco-Victim Claimants and Succession Claimants, may access:

21.2.1 Information, documents, and Frequently Asked Questions and Answers regarding the Quebec Administration Plan and the Claims Process;

21.2.2 Updates regarding the Claims Administrator's progress in administering the Quebec Administration Plan and an explanation for any delays in processing the Tobacco-Victim Claims and the Succession Claims;

21.2.3 Information regarding the status of their Tobacco-Victim Claim or Succession Claim, as applicable, including whether the Official Confirmation of the diagnosis with a *Blais* Compensable Disease has been received by the Claims Administrator, and whether Alternative Proof has been requested and received; and

21.2.4 Contact information for the Claims Administrator.

SECTION III – *BLAIS* CLAIMS SUBMISSION PERIOD AND *BLAIS* CLAIMS APPLICATION DEADLINE

22. *Blais* Claims Submission Period and *Blais* Claims Application Deadline

22.1 The *Blais* Claims Submission Period shall commence at the Effective Time and run for twelve months until the *Blais* Claims Application Deadline. The *Blais* Claims Submission Period may be extended jointly by the CCAA Court and the Quebec Superior Court if it is

deemed necessary and expedient to do so as the implementation of the Quebec Administration Plan unfolds.

22.2 All Proofs of Claim must be submitted to the Claims Administrator:

22.2.1 Online at [\[insert URL for website of Claims Administrator\]](#) by no later than 5:00 p.m. Eastern Time on the *Blais* Claims Application Deadline;

22.2.2 By email to [\[insert Claims Administrator's email address\]](#) by no later than 5:00 p.m. Eastern Time on the *Blais* Claims Application Deadline;

22.2.3 By facsimile transmission to [\[insert fax number of Claims Administrator\]](#) by no later than 5:00 p.m. Eastern Time on the *Blais* Claims Application Deadline; or

22.2.4 If sent by registered mail to the following address [\[insert address of Claims Administrator\]](#), postmarked by no later than the *Blais* Claims Application Deadline.

22.3 Any Proofs of Claim, or forms or documents comprising parts of Proofs of Claim, submitted to the Claims Administrator after 5:00 p.m. Eastern Time on the *Blais* Claims Application Deadline shall not be accepted by the Claims Administrator which shall send to the Tobacco-Victim-Claimant or Succession Claimant, as applicable, a **Notice of Rejection of *Blais* Claim** in the form set out in **Appendix “B”**.

22.4 For clarity, notwithstanding paragraph 22.3, if, pursuant to paragraph 35.4 herein, the Claims Administrator issues a Notice to Provide Alternative Proof in respect of a Proof of Claim, then the Tobacco-Victim Claimant or Succession Claimant shall have 120 days from the date on which the Claims Administrator issued the Notice to Provide Alternative Proof to submit their Alternative Cancer Proof or Alternative Emphysema/COPD (GOLD Grade III or IV) Proof, as applicable, to the Claims Administrator. Similarly, if pursuant to paragraph 26.6 herein, the Claims Administrator issues a Notice of Incomplete *Blais*

Claim in respect of a Proof of Claim, then the Tobacco-Victim Claimant or the Succession Claimant shall have 60 days from the date on which the Claims Administrator issued the Notice of Incomplete *Blais* Claim to submit the completed Proof of Claim to the Claims Administrator.

SECTION IV – SUBMISSION OF TOBACCO-VICTIM CLAIMS AND SUCCESSION CLAIMS

23. Proof of Claim required to be submitted to Claims Administrator by Tobacco-Victim Claimants and Succession Claimants

23.1 To make a QCAP Claim to the Quebec Administration Plan, a Tobacco-Victim Claimant, or their Legal Representative as applicable, shall be required to submit to the Claims Administrator by the *Blais* Claims Application Deadline a Proof of Claim comprised of all the following fully completed documents:

23.1.1 The **Tobacco-Victim Claim Form** in the form set out in **Appendix “C”**. If a Legal Representative of the Tobacco-Victim Claimant is assisting the Tobacco-Victim Claimant to submit their Tobacco-Victim Claim, they must complete the Tobacco-Victim Claim Form with all requested documents attached to establish that the Legal Representative has the right and is duly authorized to make a Tobacco-Victim Claim on behalf of the Tobacco-Victim Claimant; and

23.1.2 Only if the Claims Administrator requests that the Tobacco-Victim Claimant submit an Alternative Cancer Proof or an Alternative Emphysema/COPD (GOLD Grade III or IV) Proof, the documents which meet the requirements set out in paragraphs 36.1, 36.2, 37.1 and 37.2 herein to provide evidence that the Tobacco-Victim was diagnosed with Lung Cancer, Throat Cancer or Emphysema/COPD (GOLD Grade III or IV) before March 12, 2012 (“***Blais* Claims Period**”).

23.2 To make a QCAP Claim to the Quebec Administration Plan, a Succession Claimant shall be required to submit to the Claims Administrator by the *Blais* Claims Application Deadline a Proof of Claim comprised of all the following fully completed documents:

23.2.1 The **Succession Claim Form** in the form set out in **Appendix “E”** with all requested documents attached to establish that the Succession Claimant has the right and is duly authorized to make a Succession Claim on behalf of the Tobacco-Victim Claimant’s Estate in accordance with the Proof of Succession requirements set out in paragraphs 38.1 to 38.6 herein; and

23.2.2 Only if the Claims Administrator requests that the Succession Claimant submit an Alternative Cancer Proof or an Alternative Emphysema/COPD (GOLD Grade III or IV) Proof, the documents which meet the requirements set out in paragraphs 36.1, 36.2, 37.1 and 37.2 herein to provide evidence that the Tobacco-Victim was diagnosed with Lung Cancer, Throat Cancer or Emphysema/COPD (GOLD Grade III or IV) before March 12, 2012.

23.3 Tobacco-Victim Claimants and Succession Claimants may submit their Proof of Claim:

23.3.1 Online on the website of the Claims Administrator at [\[insert URL for website of Claims Administrator\]](#) by no later than 5:00 p.m. Eastern Time on the *Blais* Claims Application Deadline;

23.3.2 By email to [\[insert Claims Administrator’s email address\]](#) by no later than 5:00 p.m. Eastern Time on the *Blais* Claims Application Deadline;

23.3.3 By facsimile transmission to [\[insert fax number of Claims Administrator\]](#) by no later than 5:00 p.m. Eastern Time on the *Blais* Claims Application Deadline;
or

- 23.3.4 By registered mail, to the following address **[insert address of Claims Administrator]**, postmarked by no later than the *Blais* Claims Application Deadline.
- 23.4 The Claims Administrator shall develop a process to receive and manage Proofs of Claim submitted by Tobacco Victim-Claimants and Succession Claimants in writing by registered mail, by fax, via fillable pdf or other online format, or via scanned email at the choice of the Tobacco-Victim Claimants and Succession Claimants.
- 23.5 Subject to paragraph 22.4 herein, any Proofs of Claim, or forms or documents comprising parts of Proofs of Claim, submitted to the Claims Administrator after 5:00 p.m. Eastern Time on the *Blais* Claims Application Deadline shall not be accepted by the Claims Administrator which shall send to the Tobacco-Victim Claimant or Succession Claimant, as applicable, a **Notice of Rejection of *Blais* Claim** in the form set out in **Appendix “B”**.
- 23.6 Quebec Class Counsel and Raymond Chabot may assist Tobacco-Victim Claimants and Succession Claimants with the preparation and submission of their Proof of Claim forms and documents.

SECTION V – PROCESSING OF CLAIMS

24. Decision Tree for Claims Administrator

- 24.1 **Appendix “G”** is the **Decision Tree entitled “Determination of whether Canadian Residents qualify to receive compensation either pursuant to *Blais* Judgment or from Pan-Canadian Claimants’ Compensation Plan”** that will guide the Claims Administrator in the determination of whether (i) a PCC-Claimant meets the PCC Eligibility Criteria to be an Eligible PCC-Claimant who will receive an Individual Payment, or (ii) a Tobacco-Victim Claimant or Succession Claimant meets the *Blais* Eligibility Criteria to be an Eligible *Blais* Class Member who will receive a Compensation Payment.

- 24.2 For greater certainty, the Decision Tree is not to be used by the CCAA Court or any Individual in the interpretation of the PCC Compensation Plan or the Quebec Administration Plan in the event of a dispute.

25. Determination of Tobacco-Victim Claims and Succession Claims in Writing

- 25.1 The Claims Administrator shall determine whether a Tobacco-Victim Claimant or Succession Claimant is eligible to receive a Compensation Payment based upon the review of the information provided by the Tobacco-Victim Claimant or Succession Claimant in writing in the Proof of Claim.
- 25.2 In determining the eligibility of a Tobacco-Victim Claimant or Succession Claimant to receive a Compensation Payment, the Claims Administrator shall not conduct any hearing.

26. Review and Determination of Tobacco-Victim Claims and Succession Claims by Claims Administrator

- 26.1 Upon receipt of a Proof of Claim, the Claims Administrator shall send an **Acknowledgement of Receipt of *Blais* Claim** to the Tobacco-Victim Claimant or Succession Claimants, as applicable, in the form set out in **Appendix “H”**.
- 26.2 The Claims Administrator shall use the **Proof of Claim Review Checklist for Tobacco-Victim Claims** in the form set out in **Appendix “I”** in order to determine whether a Tobacco-Victim Claimant meets each of the *Blais* Eligibility Criteria.
- 26.3 The Claims Administrator shall use the **Proof of Claim Review Checklist for Succession Claims** in the form set out in **Appendix “J”** in order to determine whether a Succession Claimant meets each of the *Blais* Eligibility Criteria.
- 26.4 The Claims Administrator shall develop and implement procedures for preventing and identifying duplicate or fraudulent Tobacco-Victim Claims and duplicate or fraudulent Succession Claims.

- 26.5 If a Proof of Claim is incomplete and the missing information is straightforward, the Claims Administrator may contact the Tobacco-Victim Claimant, Succession Claimant or Physician, as applicable, verbally or in writing to invite the Tobacco-Victim Claimant, Succession Claimant or Physician, as applicable, to provide the missing information for insertion by the Claims Administrator on the applicable form in the Proof of Claim within a specified time period which shall not extend past the *Blais* Claims Application Deadline.
- 26.6 If the Proof of Claim is otherwise *prima facie* incomplete, for example, if the Smoking History has not been provided, the Claims Administrator shall issue a **Notice of Incomplete *Blais* Claim**, in the form attached hereto as **Appendix “K”**, advising the Tobacco-Victim Claimant or Succession Claimant of the corrective measures required to complete the Proof of Claim, and inviting the Tobacco-Victim Claimant or Succession Claimant to resubmit a revised Proof of Claim before the *Blais* Claims Application Deadline. If there are less than sixty days until the *Blais* Claims Application Deadline, or if the review of the Proof of Claim occurs after the *Blais* Claims Application Deadline has passed, then the Claims Administrator shall advise the Tobacco-Victim Claimant or Succession Claimant that they have sixty days from the date of the issuance of the Notice of Incomplete *Blais* Claim within which to resubmit a revised Proof of Claim.
- 26.7 If the Claims Administrator determines that a Tobacco-Victim Claimant or Succession Claimant meets all the *Blais* Eligibility Criteria, the Claims Administrator shall issue a **Notice of Acceptance of *Blais* Claim**, in the form set out in **Appendix “L”**, which advises that the Tobacco-Victim Claim or Succession Claim, as applicable, has been accepted. The Notice of Acceptance of *Blais* Claim shall: (i) indicate the maximum amount of the Compensation Payment that may be payable; (ii) advise that the actual quantum of the Compensation Payment that will be paid to the Tobacco-Victim Claimant or Succession Claimant will be determined on a *pro rata* basis between all *Blais* Class Members based on the number of Tobacco-Victim Claims and Succession Claims approved and the amount available for distribution to *Blais* Class Members after all claims have been received, reviewed and processed by the Claims Administrator; and (iii) advise that it is anticipated

that the distribution of Compensation Payments to Class Members will commence after the *Blais* Claims Application Deadline.

26.8 If a Tobacco-Victim Claimant or Succession Claimant does not meet all the *Blais* Eligibility Criteria, the Claims Administrator shall issue a **Notice of Rejection of *Blais* Claim** in the form set out in **Appendix “B”** which clearly states the reason for the rejection of the Tobacco-Victim Claim or Succession Claim, as applicable.

26.9 The Claims Administrator will advise the Quebec Class Counsel of the decision made in respect of each Proof of Claim submitted to the Claims Administrator.

27. Death of Tobacco-Victim Claimant after Submission of Proof of Claim

27.1 If the Claims Administrator receives notice that a Tobacco-Victim Claimant has died after they submitted their Proof of Claim to the Claims Administrator but before they received a Compensation Payment, the Claims Administrator shall complete the review of the Proof of Claim. If the Claims Administrator determines that the Tobacco-Victim Claimant meets the *Blais* Eligibility Criteria, then the Claims Administrator shall make the Compensation Payment payable to the Estate of the Tobacco-Victim Claimant.

28. Review of Rejected Tobacco-Victim Claims and Rejected Succession Claims by Review Officer

28.1 When the Claims Administrator issues a Notice of Rejection of *Blais* Claim, the Tobacco-Victim Claimant or Succession Claimant, as applicable, shall also be sent a **Request for Review** in the form set out in **Appendix “M”**.

28.2 A Tobacco Victim-Claimant or Succession Claimant who has received a Notice of Rejection of *Blais* Claim shall have sixty days from the date that the Claims Administrator issues the Notice of Rejection of *Blais* Claim to submit a completed Request for Review and any supporting documents to the Claims Administrator. The Tobacco Victim-Claimant’s or Succession Claimant’s Request for Review shall contain a statement clearly

identifying the error which they allege was made by the Claims Administrator in the review of their Tobacco-Victim Claim or Succession Claim, as applicable. If the Tobacco Victim-Claimant or Succession Claimant fails to identify the alleged error, the Tobacco-Victim Claim or Succession Claim will not be reviewed by the Review Officer.

28.3 Upon receipt of a Request for Review, the Claims Administrator shall send an **Acknowledgement of Receipt of Request for Review** to the Tobacco-Victim Claimant or Succession Claimant in the form set out in **Appendix “N”**.

28.4 The Claims Administrator shall designate a Review Officer to conduct an independent review of (i) the Proof of Claim submitted by a Tobacco-Victim Claimant or Succession Claimant who has requested a review of the Claims Administrator’s decision, and (ii) the Request for Review and any supporting documents submitted by the Tobacco-Victim Claimant or Succession Claimant. The Review Officer shall either confirm, reverse or vary the Claims Administrator’s decision and issue a Notice of Rejection of *Blais* Claim or Notice of Acceptance of *Blais* Claim to the Tobacco-Victim Claimant or Succession Claimant, as applicable.

29. Finality of Decisions of Claims Administrator and Review Officer

29.1 The decisions of the Claims Administrator and the Review Officer shall be final and binding without recourse to any Court or other forum or tribunal. For greater certainty, there is no right of appeal, judicial review, judicial recourse or other access to the CCAA Court, Quebec Superior Court or any other court in any Province or Territory from any decision of the Claims Administrator or the Review Officer.

**SECTION VI – ELIGIBILITY CRITERIA, PROOF OF CLAIMS AND AMOUNT OF
COMPENSATION PAYABLE TO TOBACCO-VICTIM CLAIMANTS
AND SUCCESSION CLAIMANTS**

30. Criteria for Entitlement to Compensation

30.1 To be eligible to receive compensation under the Quebec Administration Plan, the Tobacco-Victim Claimant must meet all of the following criteria (“**Blais Eligibility Criteria**”):

30.1.1 On the date that a Tobacco-Victim Claimant or Succession Claimant submits their Proof of Claim:

30.1.1.1 If the Tobacco-Victim Claimant is alive, they must reside in Quebec,
or

30.1.1.2 If the Tobacco-Victim Claimant is deceased, they must have resided
in Quebec on the date of their death;

30.1.2 The Tobacco-Victim Claimant was alive on November 20, 1998;

30.1.3 Between January 1, 1950 and November 20, 1998, the Tobacco-Victim Claimant smoked a minimum of Twelve Pack-Years of cigarettes sold by the Tobacco Companies:

Twelve Pack-Years of cigarettes is the equivalent of 87,600 cigarettes which is calculated as any combination of the number of cigarettes smoked in a day multiplied by the number of days of consumption. For example, Twelve Pack-Years equals:

10 cigarettes smoked per day for 24 years ($10 \times 365 \times 24$) = 87,600 cigarettes, or
20 cigarettes smoked per day for 12 years ($20 \times 365 \times 12$) = 87,600 cigarettes,
or

30 cigarettes smoked per day for 8 years (30 x 365 x 8) = 87,600 cigarettes;

30.1.4 Before March 12, 2012, the Tobacco-Victim Claimant was diagnosed with:

30.1.4.1 Lung Cancer, or

30.1.4.2 Throat Cancer, or

30.1.4.3 Emphysema/COPD (GOLD Grade III or IV) (collectively, the “***Blais*** Compensable Diseases”);

and

30.1.5 On the date of the diagnosis with a *Blais* Compensable Disease the Tobacco Victim-Claimant resided in Quebec.

30.2 The brands of cigarettes sold by the Tobacco Companies in Canada between January 1, 1950 and November 20, 1998 include the brands and sub-brands listed in **Appendix “O”** hereto.

31. Individuals who do not meet *Blais* Eligibility Criteria

31.1 Pursuant to the *Blais* Judgment, the Heirs of Tobacco-Victims who died prior to or on November 20, 1998 are not eligible to receive a Compensation Payment from the Quebec Administration Plan.

31.2 Pursuant to the *Blais* Judgment, the Heirs of Tobacco-Victims who died after November 20, 1998 may qualify to receive a Compensation Payment through a Succession Claim made under the Quebec Administration Plan, subject to the terms hereof.

32. Proof that Tobacco-Victim Claimant or Succession Claimant meets *Blais* Eligibility Criteria

- 32.1 The eligibility of a Tobacco-Victim Claimant to receive a Compensation Payment must be proven by (i) Proof of Smoking History and (ii) Proof of Diagnosis in the form of either an Official Confirmation or an Alternative Proof.
- 32.2 The eligibility of a Succession Claimant to receive a Compensation Payment must be proven by (i) Proof of Smoking History, (ii) Proof of Diagnosis in the form of either an Official Confirmation or an Alternative Proof, and (iii) Proof of Succession Status in accordance with paragraphs 38.1 to 38.6 herein.

33. Proof of Smoking History

- 33.1 A Tobacco-Victim Claimant or Succession Claimant shall provide Proof of Smoking History on the Tobacco-Victim Claim Form or Succession Claim Form, as applicable, by stating when the Tobacco-Victim started smoking cigarettes, providing an estimate of the number of cigarettes the Tobacco-Victim smoked per day per year, and identifying which of the brands of cigarettes sold by the Tobacco Companies in Canada the Tobacco-Victim smoked between January 1, 1950 and November 20, 1998, the complete list of which (including all sub-brands) is set out in **Appendix “O”**.

34. Proof of Diagnosis

- 34.1 In order to obtain the Proof of Diagnosis, on the Tobacco-Victim Claim Form or Succession Claim Form, as applicable, the Tobacco-Victim Claimant or Succession Claimant shall authorize the Claims Administrator to request an Official Confirmation through the MSSS and RAMQ (i) from the Quebec Cancer Registry in respect of a diagnosis of Lung Cancer or Throat Cancer, and (ii) from MED-ÉCHO in respect of a diagnosis of Emphysema/COPD (GOLD Grade III or IV) .

- 34.2 At the time of submitting the Tobacco-Victim Claim Form or Succession Claim Form to the Claims Administrator, the Tobacco-Victim Claimants and Succession Claimants are not required to submit an Alternative Cancer Proof or Alternative Emphysema/COPD a Proof, as applicable. In the event that the Claims Administrator is unable to obtain an Official Confirmation in respect of the Tobacco-Victim, then the Claims Administrator will request that the Tobacco-Victim Claimant or Succession Claimant submit an Alternative Proof.

35. Official Confirmation of a Diagnosis of a *Blais* Compensable Disease

- 35.1 On an ongoing basis, in respect of all Proofs of Claim received that *prima facie* appear to meet the *Blais* Eligibility Criteria other than Diagnosis, the Claims Administrator shall request Official Confirmations through the MSSS and RAMQ (i) from the Quebec Cancer Registry in respect of a diagnosis of Lung Cancer or Throat Cancer, and (ii) from MED-ÉCHO in respect of a diagnosis of Emphysema/COPD (GOLD Grade III or IV).
- 35.2 Upon receipt and review of the Official Confirmations, the Claims Administrator will complete, as applicable, Part 2 of the Proof of Claim Review Checklist for Tobacco-Victim Claims in order to determine whether a Tobacco-Victim Claimant meets all of the *Blais* Eligibility Criteria, or Part 2 of the Proof of Claim Review Checklist for Succession Claims in order to determine whether a Succession Claimant meets all of the *Blais* Eligibility Criteria.
- 35.3 If the Diagnosis in respect of a Tobacco-Victim Claim or a Succession Claim is proven by an Official Confirmation, the Claims Administrator shall complete Part 3 of the relevant Proof of Claim Review Checklist and issue a **Notice of Acceptance of *Blais* Claim**, in the form attached hereto as **Appendix “L”**, advising the Tobacco-Victim Claimant or Succession Claimant, as applicable, of the acceptance of their Proof of Claim. The Notice of Acceptance of *Blais* Claim shall: (i) indicate the maximum amount of the Compensation Payment that may be payable; (ii) advise that the actual quantum of the Compensation Payment that will be paid to the Tobacco-Victim Claimant or Succession Claimant will be determined on a *pro rata* basis between all *Blais* Class Members based on the number of

Tobacco-Victim Claims and Succession Claims received and the amount available for distribution to *Blais* Class Members after all claims have been received, reviewed and processed by the Claims Administrator; and (iii) advise that it is anticipated that the distribution of Compensation Payments to Class Members will commence after the *Blais* Claims Application Deadline.

- 35.4 If (i) the Tobacco-Victim Claimant or Succession Claimant, as applicable, has not authorized the Claims Administrator to request an Official Confirmation through the MSSS and RAMQ, or (ii) the Diagnosis in respect of a Proof of Claim cannot be confirmed by an Official Confirmation, then the Claims Administrator shall request that the Tobacco-Victim Claimant or Succession Claimant provide Alternative Cancer Proof or Alternative Emphysema/COPD (GOLD Grade III or IV) Proof, as applicable, by sending to them a **Notice to Provide Alternative Proof** in the form attached hereto as **Appendix “P”**.
- 35.5 If the Alternative Proof submitted by the Tobacco-Victim Claimant or Succession Claimant confirms the Diagnosis, then the Claims Administrator shall complete Part 3 of the relevant Proof of Claim Review Checklist and issue a **Notice of Acceptance of *Blais* Claim** advising the Tobacco-Victim Claimant or Succession Claimant, as applicable, of the acceptance of their Proof of Claim, and the amount of their Compensation Payment.
- 35.6 If the Alternative Proof submitted by the Tobacco-Victim Claimant or Succession Claimant does not confirm the Diagnosis, then the Claims Administrator shall send a **Notice of Rejection of *Blais* Claim** to the Tobacco-Victim Claimant or Succession Claimant, as applicable.

36. Alternative Cancer Proof

- 36.1 If the Claims Administrator requests Alternative Cancer Proof, the Tobacco-Victim Claimant or Succession Claimant shall be required to submit to the Claims Administrator, within 120 days after the date on which the Claims Administrator issued the Notice to Provide Alternative Proof, a copy of a pathology report which confirms that the Tobacco-

Victim was diagnosed with Lung Cancer or Throat Cancer, as applicable, before March 12, 2012.

36.2 If the Tobacco-Victim Claimant or Succession Claimant is unable to provide a pathology report as specified in paragraph 36.1 herein, then they may submit to the Claims Administrator one of the following documents as Alternative Cancer Proof:

36.2.1 A copy of an extract from a medical file of the Tobacco-Victim confirming the diagnosis of Lung Cancer or Throat Cancer before March 12, 2012;

36.2.2 A completed **Physician Form** in the form attached hereto as **Appendix “D”**; or

36.2.3 A written statement, in a form and content acceptable to the Claims Administrator, from a Physician of the Tobacco-Victim, or another physician having access to the medical record, confirming the diagnosis of Lung Cancer or Throat Cancer before March 12, 2012 and providing at least one of the following records to verify the diagnosis and date of diagnosis: pathology report, operative report, biopsy report, MRI report, CT scan report, PET scan report, x-ray report and/or sputum cytology report.

36.3 If the 120 day period during which the Tobacco-Victim Claimant or the Succession Claimant is required to submit their Alternative Cancer Proof to the Claims Administrator will end after the *Blais* Claims Application Deadline, then such deadline will be extended for that Tobacco-Victim Claimant or the Succession Claimant to the end of the 120 day period.

37. Alternative Emphysema/COPD (GOLD Grade III or IV) Proof

37.1 If the Claims Administrator requests Alternative Emphysema/COPD Proof, the Tobacco-Victim Claimant or Succession Claimant shall be required to submit to the Claims Administrator, within 120 days after the date on which the Claims Administrator issued the Notice to Provide Alternative Proof, a copy of a report of a spirometry test performed

on the Tobacco-Victim before March 12, 2012, demonstrating a FEV1 (non-reversible) of less than 50% of the predicted value.

37.2 If the Tobacco-Victim Claimant or Succession Claimant is unable to provide a report of a spirometry test as specified in paragraph 37.1 herein, then they may submit to the Claims Administrator one of the following documents as Alternative Emphysema/COPD (GOLD Grade III or IV) Proof:

37.2.1 A completed **Physician Form** in the form attached hereto as **Appendix “D”**;

37.2.2 A copy of an extract from a medical file of the Tobacco-Victim confirming the diagnosis of Emphysema/COPD (GOLD Grade III or IV) before March 12, 2012;
or

37.2.3 A written statement, in a form and content acceptable to the Claims Administrator, from Physician of the Tobacco-Victim, or another physician having access to the medical record, confirming the diagnosis of Emphysema/COPD (GOLD Grade III or IV) before March 12, 2012 providing at least one of the following records to verify the diagnosis and date of diagnosis: spirometry report or CT scan report.

37.3 If the 120 day period during which the Tobacco-Victim Claimant or the Succession Claimant is required to submit their Alternative Emphysema/COPD (GOLD Grade III or IV) Proof to the Claims Administrator will end after the *Blais* Claims Application Deadline, then such deadline will be extended for that Tobacco-Victim Claimant or the Succession Claimant to the end of the 120 day period.

38. Proof of Succession Status

38.1 Succession Claims must be submitted by the Liquidator to the Estate of the deceased Tobacco-Victim, where there is a Liquidator appointed and still acting in that capacity.

- 38.2 If there is no acting Liquidator to the Estate of the deceased Tobacco-Victim, including if the Estate is no longer open, then Succession Claims may be submitted by individual Heirs.
- 38.3 Where an Heir has died, Succession Claims may also be submitted by a person who takes the claim of the deceased Heir by representation.
- 38.4 **If a Succession Claim is submitted by a Liquidator:** Proof of Succession Status shall be made by submitting to the Claims Administrator the following Supporting Documents, together with the appropriate Declaration included in the **Succession Claim Form** which is attached hereto as **Appendix “E”**:
- 38.4.1 The deceased Tobacco-Victim’s death certificate; and
- 38.4.2 The will searches in respect of the Tobacco-Victim from the Bar of Quebec and the Chambre des notaires du Québec; and
- 38.4.2.1 **If the deceased Tobacco-Victim had a will:** either (i) a copy of the notarial will of the deceased Tobacco-Victim, appointing the Claimant as the Liquidator of the Estate of the deceased Tobacco-Victim; or (ii) a copy of the judgment probating the will of the deceased Tobacco-Victim, confirming the appointment of the Succession Claimant as the Liquidator of the Estate of the deceased Tobacco-Victim; or
- 38.4.2.2 **If the deceased Tobacco-Victim did not have a will:** either (i) a judgment confirming the appointment of the Succession Claimant as the Liquidator of the Estate of the deceased Tobacco-Victim, or (ii) a notarial deed or private writing whereby the Liquidator was appointed by the Heirs to manage the succession of the deceased Tobacco-Victim.
- 38.5 **If a Succession Claim is submitted by an Heir:** Proof of Succession Status shall be made by submitting to the Claims Administrator the following Supporting Documents, together

with the appropriate Declaration included in the **Succession Claim Form** which is attached hereto as **Appendix “E”**:

38.5.1 The deceased Tobacco-Victim’s death certificate; and

38.5.2 The will searches in respect of the Tobacco-Victim from the Bar of Quebec and the Chambre des notaires du Québec; and

38.5.3 **If the deceased Tobacco-Victim had a will or testamentary provisions in their registered marriage contract:**

38.5.3.1 Copies of (i) the notarial will of the deceased Tobacco-Victim, confirming that the Claimant is an Heir of the Tobacco-Victim; (ii) the deceased Tobacco-Victim’s registered marriage contract, confirming that the Claimant is an Heir of the Tobacco-Victim; or (iii) the will and a judgment probating the will of the deceased Tobacco-Victim, confirming that the Claimant is an Heir of the Tobacco-Victim; and

38.5.3.2 A confirmation that the Estate of the deceased Tobacco-Victim is no longer open and/or there is no acting Liquidator for the Estate, together with any reasonable evidence in support thereof; and the names and contact information for any of the deceased Tobacco-Victim’s living Heirs referenced in the will or marriage contract. If any such Heirs are deceased, the names and contact information for the Heirs by representation must be submitted to the Claims Administrator.

38.5.4 **If the deceased Tobacco-Victim did not have a will or testamentary provisions in their registered marriage contract:**

38.5.4.1 If the deceased Tobacco-Victim did not have a will or testamentary provisions in their registered marriage contract, an affidavit attesting to the following information:

- 38.5.4.1.1 The nature of the relationship between the Succession Claimant and the deceased Tobacco-Victim, together with any reasonable evidence in support thereof (for example, a power of attorney signed at a financial institution; an authorization to cash cheques on behalf of the estate; a marriage certificate);
- 38.5.4.1.2 That to the best of the Succession Claimant's knowledge, the deceased Tobacco-Victim did not have a will;
- 38.5.4.1.3 If the Heirs had appointed a Liquidator, that the Liquidator is no longer acting in such capacity and providing the contact information for such Liquidator; and
- 38.5.4.1.4 The names, and contact information (if still alive), of the deceased Tobacco-Victim's Heirs, including, as applicable, the deceased Tobacco-Victim's spouse, children, parents, siblings, nieces and nephews. If any such Heirs are deceased, the names and contact information for the Heirs by representation.

38.6 Where a Succession Claim is submitted by an Heir and the deceased Tobacco-Victim did not have a will or testamentary provisions in their registered marriage contract:

38.6.1 If the affidavit submitted by the Succession Claimant satisfies the Claims Administrator in regard to all information attested to therein, including the identities of the Heirs of the deceased Tobacco-Victim, then the Claims Administrator shall be entitled to rely upon such information for the purpose of making payment of the Compensation Payment in regard to the Succession Claim, and the Claims Administrator shall not have any responsibility to conduct any further inquiry or investigation to confirm, verify, substantiate or otherwise corroborate the information; and

38.6.2 If the affidavit submitted by the Succession Claimant is not satisfactory to the Claims Administrator and if, after the issuance of a Notice of Incomplete *Blais* Claim and the review of any revised Proof of Claim submitted by the Succession Claimant in response thereto, the Claims Administrator is still not satisfied in regard to the information provided, then the Claims Administrator shall issue a Notice of Rejection of *Blais* Claim.

38.7 Where a Succession Claim asserted by an Heir (which for certainty may include an Heir by representation) meets the *Blais* Eligibility Criteria for entitlement to a Compensation Payment, but the Claims Administrator has insufficient information to establish the apportionment thereof between multiple Heirs, the Claims Administrator shall issue the Compensation Payment to the Succession Claimant in the name of the Estate of the deceased Tobacco-Victim. In such event, it shall be the sole responsibility of the Succession Claimant, to the complete exoneration of the Claims Administrator, to engage a Quebec notary to effect the partition of the Compensation Payment or to otherwise have such partition ascertained in accordance with Quebec law.

39. Reduction for Contributory Negligence

39.1 The quantum of the Compensation Payment (see **Table 1** in paragraph 41.1 below) payable to a Tobacco-Victim Claimant or Succession Claimant who meets all the *Blais* Eligibility Criteria will depend upon the date on which the Tobacco-Victim started smoking the Tobacco Companies' cigarettes as follows:

39.1.1 A Tobacco-Victim who started to smoke the Tobacco Companies' cigarettes *before* January 1, 1976 will be eligible to receive 100% of the compensation available under the Quebec Administration Plan, or such prorated amount as may be payable pursuant to paragraph 53.1 herein; and

39.1.2 A Tobacco-Victim who started to smoke the Tobacco Companies' cigarettes *on or after* January 1, 1976 will be designated as being 20% contributorily negligent and eligible to receive 80% of the compensation available under the Quebec

Administration Plan, or such prorated amount as may be payable pursuant to paragraph 53.1 herein.

40. Where Tobacco-Victim Claimant diagnosed with more than one *Blais* Compensable Disease

40.1 Where a Tobacco-Victim Claimant meets all of the *Blais* Eligibility Criteria but has been diagnosed with more than one *Blais* Compensable Disease, the Tobacco-Victim Claimant or Succession Claimant, as applicable, shall be paid for the single *Blais* Compensable Disease with which the Tobacco-Victim has been diagnosed that will provide the highest amount of compensation under the Quebec Administration Plan. No “double recovery” or overlapping recovery will be permitted if a Tobacco-Victim has been diagnosed with more than one *Blais* Compensable Disease.

41. Quantum of Compensation payable to Tobacco-Victim Claimants and Succession Claimants

41.1 The Claims Administrator shall review the Proofs of Claim and will decide whether the Tobacco-Victim Claimants and Succession Claimants fulfill the *Blais* Eligibility Criteria such that they are eligible to receive a Compensation Payment as set out in the Compensation Grid in **Table 1** below. An Eligible *Blais* Class Member shall be paid for the single *Blais* Compensable Disease with which they have been diagnosed that will provide them with the highest amount of compensation from the Quebec Administration Plan. No “double recovery” or overlapping recovery will be permitted if a Tobacco-Victim Claimant has been diagnosed with more than one *Blais* Compensable Disease. The quantum of the payments indicated in subparagraphs 41.1.1 to 41.1.3 and **Table 1** may be reduced on a *pro rata* basis based upon the actual take-up rate and other factors:

41.1.1 If the Eligible *Blais* Class Member was diagnosed with Emphysema/COPD (GOLD Grade III or IV), they will be paid \$24,000 or \$30,000, or such other amount as may be determined by the Claims Administrator to be available for that subclass of Eligible *Blais* Class Members;

- 41.1.2 If the Eligible *Blais* Class Member was diagnosed with Lung Cancer, they will be paid \$80,000 or \$100,000, or such other amount as may be determined by the Claims Administrator to be available for that subclass of Eligible *Blais* Class Members; and
- 41.1.3 If the Eligible *Blais* Class Member was diagnosed with Throat Cancer, they will be paid \$80,000 or \$100,000, or such other amount as may be determined by the Claims Administrator to be available for that subclass of Eligible *Blais* Class Members.

Table 1

Disease(s) with which Eligible <i>Blais</i> Class Member was diagnosed	Compensation Payment (or such lesser amount as may be determined by the Claims Administrator to be available for the subclass of Eligible <i>Blais</i> Class Members; quantum will vary based upon the actual take-up rate and other factors and shall not exceed the maximum amounts specified in this table)	
	Compensation for Eligible <i>Blais</i> Class Members who started smoking before January 1, 1976	Compensation for Eligible <i>Blais</i> Class Members who started smoking on or after January 1, 1976
Emphysema/COPD (GOLD Grade III or IV)	\$30,000	\$24,000
Lung Cancer	\$100,000	\$80,000
Throat Cancer	\$100,000	\$80,000

- 41.2 The amounts of the Compensation Payments to Eligible *Blais* Class Members shall not exceed the maximum amounts specified in **Table 1** above.

- 41.3 The amounts payable to Eligible *Blais* Class Members under the Quebec Administration Plan are inclusive of any prejudgment interest, postjudgment interest and any other amounts that may be claimed by Eligible *Blais* Class Members.

SECTION VII – HARMONIZATION OF PCC COMPENSATION PLAN WITH CLAIMS PROCESS FOR *BLAIS* CLASS MEMBERS

42. Claims Administrator is responsible for Harmonization

- 42.1 The Claims Administrator shall harmonize the claims administration of the *Blais* Judgment under the Quebec Administration Plan and the claims administration of the PCC Compensation Plan in accordance with the harmonization principles set out in this Section for the purpose of ensuring that a resident of Quebec is not paid a Compensation Payment under the Quebec Administration Plan pursuant to the *Blais* Judgment as well as an Individual Payment from the PCC Compensation Plan. An individual resident in Quebec is only permitted to make one claim for compensation either as a *Blais* Class Member under the Quebec Administration Plan or as a PCC-Claimant under the PCC Compensation Plan. A Quebec resident is not permitted to make a claim to both Claims Processes.

43. Determination of Residency

- 43.1 For the purpose of the administration of the Tobacco-Victim Claims and Succession Claims under the Quebec Administration Plan pursuant to the *Blais* Judgment and the PCC Claims under the PCC Compensation Plan:
- 43.1.1 If an Individual does not reside in Canada both on the date of their diagnosis with a PCC Compensable Disease and on the date on which they submit their PCC Claim to the Claims Administrator, then they are not eligible to receive compensation from the PCC Compensation Plan;
- 43.1.2 If an Individual does not reside in Quebec on the date on which they submit their Tobacco-Victim Claim or Succession Claim to the Quebec Administration Plan,

then they are not eligible to receive a Compensation Payment pursuant to the *Blais* Judgment;

- 43.1.3 In respect of an Individual resident in Canada, their “**Place of Residence**” shall be deemed to be the Province or Territory which issued their health insurance card and/or their driver’s licence;
- 43.1.4 If an Individual’s answers to the questions on the Tobacco-Victim Claim Form, Succession Claim Form, or Claim Form for PCC-Claimant, as applicable, establish that, between January 1, 1950 and November 20, 1998, they smoked a minimum of Twelve Pack-Years of cigarettes (equivalent of 87,600 cigarettes) sold by the Canadian Tobacco Companies, then they will be considered to have resided in Canada between January 1, 1950 and November 20, 1998; and
- 43.1.5 In order to qualify to receive a Compensation Payment under the Quebec Administration Plan pursuant to the *Blais* Judgment, an Individual’s Place of Residence must have been Quebec on the date that they were diagnosed with Emphysema/COPD (GOLD Grade III or IV), Lung Cancer and/or Throat Cancer before March 12, 2012.

44. Quantum of Compensation payable to PCC-Claimants

- 44.1 In accordance with the terms of the PCC Compensation Plan, upon review of the Claim Packages by the Claims Administrator, PCC-Claimants who fulfill the PCC Eligibility Criteria may be determined to be eligible to receive an Individual Payment as set out in the Compensation Grid in **Table 2** below. An Individual who meets all the PCC Eligibility Criteria shall be paid for the single PCC Compensable Disease with which they have been diagnosed that will provide them with the highest amount of compensation from the PCC Compensation Plan. No “double recovery” or overlapping recovery will be permitted if a PCC-Claimant has been diagnosed with more than one PCC Compensable Disease. The quantum of the payments indicated in subparagraphs 44.1.1 through 44.1.3 and **Table 2** will vary based upon the actual take-up rate and other factors:

- 44.1.1 If the PCC-Claimant was diagnosed with Emphysema/COPD (GOLD Grade III or IV), they will be paid \$14,400 or \$18,000, or such other amount as may be determined by the Claims Administrator to be available for that subclass of PCC-Claimants;
- 44.1.2 If the PCC-Claimant was diagnosed with Lung Cancer, they will be paid \$48,000 or \$60,000, or such other amount as may be determined by the Claims Administrator to be available for that subclass of PCC-Claimants; and
- 44.1.3 If the PCC-Claimant was diagnosed with Throat Cancer, they will be paid \$48,000 or \$60,000, or such other amount as may be determined by the Claims Administrator to be available for that subclass of PCC-Claimants.

Table 2

Disease(s) with which Eligible PCC-Claimant was diagnosed	Individual Payment (or such lesser amount as may be determined by the Claims Administrator to be available for the subclass of Eligible PCC-Claimants; quantum will vary based upon the actual take-up rate and other factors and shall not exceed the maximum amounts specified in this table)	
	Compensation for Eligible PCC-Claimants who started smoking before January 1, 1976	Compensation for Eligible PCC-Claimants who started smoking on or after January 1, 1976
Emphysema/COPD (GOLD Grade III or IV)	\$18,000	\$14,400
Lung Cancer	\$60,000	\$48,000
Throat Cancer	\$60,000	\$48,000

- 44.2 The amounts of the Individual Payments to Eligible PCC-Claimants shall not exceed the maximum amounts specified in **Table 2** above.

44.3 The amounts payable to Eligible PCC-Claimants under the PCC Compensation Plan are inclusive of any prejudgment interest, postjudgment interest and any other amounts that may be claimed by Eligible PCC-Claimants.

45. Claims Administrator’s Determination of Compensation payable to Quebec Residents who may qualify as both a *Blais* Class Member and a PCC-Claimant

45.1 Depending upon the disease(s) with which they are diagnosed and the timing of the diagnoses, there are four possible cases in which a Quebec resident may meet both the PCC Eligibility Criteria and the *Blais* Eligibility Criteria. The four cases are described in **Table 3** below. However, since the *Blais* Class Members and the PCC-Claimants shall only be paid for the single compensable disease with which they have been diagnosed that will provide them with the highest amount of compensation pursuant to either the *Blais* Judgment or the PCC Compensation Plan, as applicable, **Table 3** indicates whether the compensation would be paid pursuant to the *Blais* Judgment under the Quebec Administration Plan or pursuant to the terms of the PCC Compensation Plan. The questions on the Tobacco-Victim Claim Form (Appendix “C”) and the Succession Claim Form (Appendix “E”) will elicit responses from the individual submitting the claim that will enable the Claims Administrator to determine whether the Quebec resident meets either the PCC Eligibility Criteria or the *Blais* Eligibility Criteria:

Table 3

Case	Diseases with which Quebec Residents were diagnosed and Timing of Diagnoses	How Compensation will be paid (Amounts shown are for illustrative purposes only. The actual quantum will be determined by the Claims Administrator. The quantum will vary based upon the actual take-up rate and other factors and shall not exceed the maximum amounts specified in this table.)	
		Compensation for <i>Blais</i> Class Members who started smoking before January 1, 1976	Compensation for <i>Blais</i> Class Members who started smoking on or after January 1, 1976
1.	Quebec resident was: (a) diagnosed with Emphysema/COPD	<i>Blais</i> Judgment: \$0	<i>Blais</i> Judgment: \$0

Case	Diseases with which Quebec Residents were diagnosed and Timing of Diagnoses	How Compensation will be paid (Amounts shown are for illustrative purposes only. The actual quantum will be determined by the Claims Administrator. The quantum will vary based upon the actual take-up rate and other factors and shall not exceed the maximum amounts specified in this table.)	
		Compensation for <i>Blais</i> Class Members who started smoking before January 1, 1976	Compensation for <i>Blais</i> Class Members who started smoking on or after January 1, 1976
	(GOLD Grade III or IV) before March 12, 2012; (b) diagnosed with either Lung Cancer or Throat Cancer between March 8, 2015 and March 8, 2019; and (c) alive on March 8, 2019.	PCC Compensation Plan: \$60,000 Total: \$60,000	PCC Compensation Plan: \$48,000 Total: \$48,000
2.	Quebec resident was: (a) diagnosed with Lung Cancer or Throat Cancer before March 12, 2012; (b) diagnosed with Emphysema/COPD (GOLD Grade III or IV) between March 8, 2015 and March 8, 2019; and (c) alive on March 8, 2019.	<i>Blais</i> Judgment: \$100,000 PCC Compensation Plan: \$0 Total: \$100,000	<i>Blais</i> Judgment: \$80,000 PCC Compensation Plan: \$0 Total: \$80,000

Case	Diseases with which Quebec Residents were diagnosed and Timing of Diagnoses	How Compensation will be paid (Amounts shown are for illustrative purposes only. The actual quantum will be determined by the Claims Administrator. The quantum will vary based upon the actual take-up rate and other factors and shall not exceed the maximum amounts specified in this table.)	
		Compensation for <i>Blais</i> Class Members who started smoking before January 1, 1976	Compensation for <i>Blais</i> Class Members who started smoking on or after January 1, 1976
3.	Quebec resident was: (a) diagnosed with Lung Cancer before March 12, 2012; (b) diagnosed with Throat Cancer between March 8, 2015 and March 8, 2019; and (c) alive on March 8, 2019.	<i>Blais</i> Judgment: \$100,000 PCC Compensation Plan: \$0 Total: \$100,000	<i>Blais</i> Judgment: \$80,000 PCC Compensation Plan: \$0 Total: \$80,000
4.	Quebec resident was: (a) diagnosed with Throat Cancer before March 12, 2012; (b) diagnosed with Lung Cancer between March 8, 2015 and March 8, 2019; and (c) alive on March 8, 2019.	<i>Blais</i> Judgment: \$100,000 PCC Compensation Plan: \$0 Total: \$100,000	<i>Blais</i> Judgment: \$80,000 PCC Compensation Plan: \$0 Total: \$80,000

45.2 The amounts of the Compensation Payments to Quebec residents shall not exceed the maximum amounts specified in **Table 3** above.

- 45.3 The amounts payable to Quebec residents are inclusive of any prejudgment interest, postjudgment interest and any other amounts that may be claimed by Quebec residents.

SECTION VIII – ROLE OF CCAA PLAN ADMINISTRATORS IN QUEBEC ADMINISTRATION PLAN

46. Appointment of CCAA Plan Administrators

- 46.1 The CCAA Court shall be requested to approve the appointment of the three CCAA Plan Administrators in the manner contemplated by the CCAA Plans and other Definitive Documents.
- 46.2 Subject to the approval of the CCAA Court, the following three firms shall be appointed to serve as the CCAA Plan Administrators until such time as such firms may be replaced with the further approval of the CCAA Court: Ernst & Young Inc.; FTI Consulting Canada Inc.; and Deloitte Restructuring Inc.
- 46.3 In the CCAA Court's discretion, when the CCAA Court approves the Tobacco Companies' CCAA Plans, and whether at that time or at some future date or as otherwise set out in the CCAA Plans, the CCAA Court may abridge, suspend or otherwise deal with the CCAA proceedings as the CCAA Court may see fit, and Ernst & Young Inc., FTI Consulting Canada Inc. and Deloitte Restructuring Inc. shall be discharged and relieved of any further duties and obligations in regard to their capacities as Monitors, but shall continue without interruption in their capacities as CCAA Plan Administrators until such time as they may be replaced with the approval of the CCAA Court.

47. Advisors to CCAA Plan Administrators

- 47.1 The CCAA Plan Administrators, in their discretion, may retain any advisors, including legal, financial, investment or other advisors, to advise and assist them to carry out their duties in relation to the administration of the Quebec Administration Plan.

48. Payment for Services provided by CCAA Plan Administrators

- 48.1 All professional fees, other fees, costs, disbursements, expenses, court costs and other expenditures, and all applicable sales taxes thereon (collectively, “**Costs**”), incurred in respect of the services provided by the CCAA Plan Administrators in relation to the administration of the Quebec Administration Plan, and the services provided by all legal, financial, investment or other advisors with whom the CCAA Plan Administrators in their discretion may consult regarding the administration of the Quebec Administration Plan, shall be paid biweekly directly by the Tobacco Companies, and such amounts shall not be deducted from the QCAP Settlement Amount. All such Costs shall be subject to the approval of the CCAA Court.

49. Investment of QCAP Settlement Amount

- 49.1 In accordance with the terms of the CCAA Plans, the QCAP Settlement Amount shall be paid from the Global Settlement Trust Account and deposited into the QCAP Trust Account for the benefit of the Quebec Class Action Plaintiffs.
- 49.2 The CCAA Plan Administrators shall ensure that the amounts from time to time in the QCAP Trust Account are invested in accordance with approved investment guidelines pending disbursement to the Eligible *Blais* Class Members.
- 49.3 The CCAA Plan Administrators shall provide to the Quebec Class Counsel a monthly report of the receipts and disbursements for the QCAP Trust Account.

50. Advancement of Funds to Claims Administrator for Payments to Eligible *Blais* Class Members

- 50.1 From time to time, the Claims Administrator shall submit to the CCAA Plan Administrators a requisition with sufficiently detailed information and supporting data requesting the advancement of a specified sum of money from the QCAP Settlement Amount to be used

by the Claims Administrator for the purpose of making Compensation Payments to Eligible *Blais* Class Members.

- 50.2 Upon receipt of each such requisition and supporting information and data from the Claims Administrator, the CCAA Plan Administrators will verify the calculation of the sum requisitioned by the Claims Administrator. In their discretion, the CCAA Plan Administrators may request further information from the Claims Administrator before they authorize the advancement of an instalment of funds from the QCAP Settlement Amount held in the QCAP Trust Account to the Claims Administrator to enable it to make Compensation Payments to Eligible *Blais* Class Members.

51. Reporting by CCAA Plan Administrators

- 51.1 On an annual basis, and as circumstances warrant at any other times in the CCAA Plan Administrators' discretion or as the CCAA Court and the Quebec Superior Court jointly direct, the CCAA Plan Administrators shall report to the CCAA Court and the Quebec Superior Court regarding the progress of the administration of the Quebec Administration Plan including the publication of notices, the *Blais* Claims Application Deadline to file Tobacco-Victim Claims and Succession Claims, the Tobacco-Victim Claims and Succession Claims approved, the Tobacco-Victim Claims and Succession Claims rejected, any delays in the Claims Process, amounts distributed, fees charged and disbursements made and any other matter which the CCAA Plan Administrators in their discretion deem to be appropriate.

SECTION IX – DISTRIBUTION OF COMPENSATION PAYMENTS

52. Determination of Quantum of Compensation Payments to Eligible *Blais* Class Members

- 52.1 Upon the completion of the processing of the Tobacco-Victim Claims and Succession Claims, the CCAA Plan Administrators, in consultation with the Claims Administrator, shall determine the quantum of the Compensation Payments which may be made from the

amount in the QCAP Trust Account based upon several factors, including: the timing of the payment of the total QCAP Settlement Amount by the Tobacco Companies; the amount in the QCAP Trust Account available for distribution after the payment of the Quebec Class Counsel Fee; the numbers of Tobacco-Victim Claims and Succession Claims accepted in respect of each of the diagnoses of Lung Cancer, Throat Cancer and Emphysema/COPD (GOLD Grade III or IV); and the numbers of Eligible *Blais* Class Members who started smoking before and on or after January 1, 1976.

53. *Pro rata* Reduction if Aggregate of Compensation Payments exceeds Amount available from QCAP Settlement Amount

53.1 If, after the payment of the Quebec Class Counsel Fee, the funds remaining in the QCAP Trust Account are not sufficient to pay the aggregate of the Compensation Payments determined to be payable by the CCAA Plan Administrators, in consultation with the Claims Administrator, then the Compensation Payments owing to the Eligible *Blais* Class Members shall be divided on a *pro rata* basis among the Eligible *Blais* Class Members so that the aggregate amount of the Compensation Payments otherwise payable to the Eligible *Blais* Class Members does not exceed the total amount of the funds remaining in the QCAP Trust Account.

54. Payment of Compensation Payments to Eligible *Blais* Class Members

54.1 Once the CCAA Plan Administrators have finally determined the quanta of the Compensation Payments which may be made from the QCAP Trust Account, at the direction of the CCAA Plan Administrators, the Claims Administrator shall be responsible for making the Compensation Payments to the Eligible *Blais* Class Members.

54.2 The Claims Administrator shall make payment of the Compensation Payments by either cheque or direct deposit as designated on the Tobacco-Victim Claim Form by the Tobacco-Victim Claimant or by the Succession Claimant on the Succession Claim Form, as applicable.

54.3 Cheques for Compensation Payments shall be issued in the name of each Eligible *Blais* Class Member or in the name of the Estate of a deceased Tobacco-Victim, as applicable. Cheques will be mailed to the address of the Eligible *Blais* Class Member that was provided on the Tobacco-Victim Claim Form or Succession Claim Form.

54.4 An Eligible *Blais* Class Member who receives a Compensation Payment by cheque shall have 180 days from the date inscribed on the cheque to present it for payment. After 180 days, any amount not deposited shall be returned to the QCAP Settlement Amount.

54.5 Compensation Payments made by direct deposit shall be deposited into a bank account in the name of the Eligible *Blais* Class Member.

55. Distribution of any Residual Funds from QCAP Settlement Amount

55.1 Three years after the Claims Administrator commenced its review and processing of the Tobacco-Victim Claims and Succession Claims, or at such other time as the CCAA Plan Administrators are of the view that the administration of the Tobacco-Victim Claims and Succession Claims has been substantially completed, to the extent that there remains any Residual Funds in the Quebec Administration Plan, any such Residual Funds shall be allocated to the Provinces and Territories Settlement Amount and apportioned among the Provinces and Territories in accordance with the percentages set out in the table in Article 16, Section 16.3 of the CCAA Plan.

56. No Assignment or Direction to Pay

56.1 No amount payable under the Quebec Administration Plan may be assigned, and any such assignment shall be null and void.

56.2 No amount payable under the Quebec Administration Plan may be subject to a direction to pay, and any such direction to pay shall be null and void.

SECTION X – REPORTING OBLIGATIONS OF CLAIMS ADMINISTRATOR**57. Engagement with Administrative Coordinator and reporting to CCAA Plan Administrators, CCAA Court and Quebec Superior Court**

- 57.1 The Claims Administrator shall bring to the attention of and work with the Administrative Coordinator to address and resolve issues that may arise from time to time in the interpretation, implementation and ongoing administration of the Quebec Administration Plan. If the Administrative Coordinator and the Claims Administrator are unable to resolve an issue relating to the Quebec Administration Plan, then the Administrative Coordinator shall refer the matter to the CCAA Plan Administrators who, in their discretion, may bring the matter jointly before the CCAA Court and the Quebec Superior Court for resolution or directions.
- 57.2 The Claims Administrator shall keep accurate and complete records to allow for verification, audit or review as required by the CCAA Plan Administrators and, as circumstances may warrant, by the CCAA Court and the Quebec Superior Court which shall jointly hear and determine matters relating to the ongoing supervision of the Quebec Administration Plan.
- 57.3 Annually, the Claims Administrator shall prepare and submit the budget for the claims administration to the Administrative Coordinator who shall forward the budget to the CCAA Plan Administrators for approval by the CCAA Plan Administrators, who shall submit the budget for final joint approval by the CCAA Court and the Quebec Superior Court.
- 57.4 The Claims Administrator shall manage and track the budget for the administration of the Quebec Administration Plan.
- 57.5 Annually and as circumstances warrant at any other times as requested by the CCAA Plan Administrators in their discretion or as the CCAA Court and the Quebec Superior Court acting jointly direct, the Claims Administrator shall report through the Administrative

Coordinator to the CCAA Plan Administrators regarding the progress of the administration of the Quebec Administration Plan including the publication of notices, the *Blais* Claims Application Deadline to file Claims, the Tobacco-Victim Claims and Succession Claims approved, the Tobacco-Victim Claims and Succession Claims rejected, any delays in the Claims Process, amounts distributed, fees charged and disbursements made.

- 57.6 Annually and as circumstances warrant at any other times as requested by the CCAA Plan Administrators in their discretion or as the CCAA Court and the Quebec Superior Court acting jointly direct, the Claims Administrator shall provide through the Administrative Coordinator to the CCAA Plan Administrators who, in turn, shall report to the CCAA Court, an accounting of the fees charged, disbursements made and, after the *Blais* Claims Application Deadline, the distributions made to Eligible *Blais* Class Members for approval by the CCAA Court.
- 57.7 The Claims Administrator shall provide an Exit Report through the Administrative Coordinator to the CCAA Plan Administrators within six months, or as soon as is practicable, following the termination of the administration of the Quebec Administration Plan.
- 57.8 The Administrative Coordinator shall provide to the Quebec Class Counsel copies of the budget, reports, accounting of fees and Exit Report that the Claims Administrator submits through the Administrative Coordinator to the CCAA Plan Administrators pursuant to paragraphs 57.3, 57.5, 57.6 and 57.7 herein.

SECTION XI – CONFIDENTIALITY AND INFORMATION MANAGEMENT

58. Confidentiality

- 58.1 The Claims Administrator shall develop a privacy policy which shall be posted on the website maintained by the Claims Administrator. The privacy policy shall include a description of how the Claims Administrator will collect Personal Information regarding the Tobacco-Victim Claimants and the Succession Claimants, and how the Personal

Information may be used, shared, stored, safeguarded and destroyed by the Claims Administrator.

- 58.2 The Claims Administrator shall develop, host, maintain and manage an electronic database of all Tobacco-Victim Claims and Succession Claims submitted by Tobacco-Victim Claimants and Succession Claimants and maintain the confidentiality of the Personal Information and data regarding the Tobacco-Victim Claimants and Succession Claimants in the database through security measures which include: the training of staff regarding their privacy obligations; administrative controls to restrict access to Personal Information on a “need to know basis”; and technological security measures such as firewalls, multi-factor authentication, encryption and anti-virus software.
- 58.3 Any Personal Information and data regarding a Tobacco-Victim Claimant or Succession Claimant that is provided, created or obtained in the course of the claims administration, whether written or oral, shall be kept confidential by the Claims Administrator, the Review Officer, the Administrative Coordinator, and the CCAA Plan Administrators and shall not be disclosed, shared or used for any purpose other than the determination of the Tobacco-Victim Claims and Succession Claims, without the consent of the Tobacco-Victim Claimant or the Succession Claimant, as applicable, or as required by law.
- 58.4 The Personal Information and data regarding the Tobacco-Victim Claimants and the Succession Claimants that is collected by the Claims Administrator shall not be used for any research or any other purpose that is not related to the administration of Tobacco-Victim Claims and Succession Claims made pursuant to the Quebec Administration Plan.
- 58.5 The Claims Administrator shall obtain from all its employees, officers, contractors, subcontractors, agents and representatives who are engaged in the administration of Tobacco-Victim Claims and Succession Claims under the Quebec Administration Plan, an executed non-disclosure agreement in a form approved by the CCAA Plan Administrators.
- 58.6 The Claims Administrator shall store all Personal Information and data regarding the Tobacco-Victim Claims and Succession Claims in a secure location and only permit

authorized Individuals who have executed a non-disclosure agreement to have access to the Personal Information.

59. Retention and Destruction of Tobacco-Victim Claimant and Succession Claimant Information and Records

- 59.1 The Claims Administrator shall retain all Personal Information and documentation in its possession provided in connection with the Proofs of Claim submitted by the Tobacco-Victim Claimants and the Succession Claimants for two years following the completion of the distribution of the Compensation Payments (“**Retention Period**”). The Personal Information and documents provided in respect of a Tobacco-Victim Claimant or Succession Claimant, or the fact that a Proof of Claim has been submitted in respect of a Tobacco-Victim Claimant or Succession Claimant, shall not be disclosed by the Claims Administrator to anyone, except with the consent of the Tobacco-Victim Claimant or Succession Claimant, as applicable, or as required by law.
- 59.2 Subject to the prior approval of the CCAA Court, the Claims Administrator shall conduct the secure destruction of all electronic Personal Information, including all data and metadata, and all Personal Information in document form in the Claims Administrator’s possession that was provided as part of the Proofs of Claim, with the exception of the Claims Administrator’s reports and administrative records, as soon as reasonably practicable after the expiry of the Retention Period, and shall provide certification of such destruction to the CCAA Court.

PART C: GENERAL

**SECTION I – GENERAL PROVISIONS APPLICABLE TO
QUEBEC ADMINISTRATION PLAN**

60. Effective in Entirety

- 60.1 None of the terms herein regarding the Quebec Administration Plan shall become effective unless and until all the terms of the Quebec Administration Plan have been finally approved

by the CCAA Court. If such CCAA Court approval is not granted, the Quebec Administration Plan will thereupon be terminated, and none of the Tobacco Companies or the Quebec Class Action Plaintiffs will be liable for such termination.

61. Termination of Quebec Administration Plan

- 61.1 The Quebec Administration Plan will continue in full force and effect until all obligations under the Quebec Administration Plan are fulfilled.

62. Governing Law

- 62.1 The Quebec Administration Plan shall be governed and construed in accordance with the laws of the Province of Quebec and the applicable laws of Canada.

63. Entire Agreement

- 63.1 The terms and conditions set forth in Part B regarding the Quebec Administration Plan constitute the entire Agreement between the Tobacco Companies and the Quebec Class Action Plaintiffs with respect to the Quebec Administration Plan, and cancel and supersede any prior or other understandings and agreements between the Tobacco Companies and the Tobacco-Victim Claimants and Succession Claimants. There are no representations, warranties, terms, conditions, undertakings, covenants or collateral agreements, express, implied or statutory between the Tobacco Companies and the Tobacco-Victim Claimants and Succession Claimants with respect to the Quebec Administration Plan other than as expressly set forth or referred to in Part B of this document.

64. Benefit of the Quebec Administration Plan

- 64.1 The terms and conditions set forth in Part B regarding the Quebec Administration Plan shall enure to the benefit of and be binding upon the Tobacco Companies and the Tobacco-

Victim Claimants and Succession Claimants who are alive and deceased, and their successors, heirs, administrators and estate trustees.

65. Official Languages

- 65.1 The Tobacco Companies shall pay for the cost to prepare a French translation of this document and all Notices and Forms regarding the Quebec Administration Plan that are attached to this document as Appendices. To the extent that there are any inconsistencies between the English and the French versions of this document, the Notices or the Appendices, the English version shall be authoritative and shall govern and prevail in all respects.

DATED as of the 5th day of December, 2024.

APPENDIX “A”

Note: Appendix “A” is a version of the *Blais* First Notice that is provided for guidance only to assist the understanding of the Claim Administrator which shall be responsible for designing, implementing and managing the *Blais* Notice Plan pursuant to which prospective Tobacco-Victim Claimants and prospective Succession Claimants will be informed about the Quebec Administration Plan and be provided with ongoing notice throughout the *Blais* Claims Submission Period.

Quebec Class Action Administration Plan

BLAIS FIRST NOTICE

To all individuals resident in Quebec who smoked Twelve Pack-Years of cigarettes sold in Canada by Imperial Tobacco Canada Limited, Rothmans, Benson & Hedges Inc. and JTI-Macdonald Corp. during the period from January 1, 1950 to November 20, 1998, and were diagnosed before March 12, 2012 with Lung Cancer, Throat Cancer or Emphysema/COPD (GOLD Grade III or IV) attributable to smoking cigarettes.

You may be eligible to receive compensation.

A person smoked Twelve Pack-Years of cigarettes if they smoked the equivalent of a minimum of 87,600 cigarettes calculated as any combination of the number of cigarettes smoked in a day multiplied by the number of days of consumption (for example, 20 cigarettes a day for 12 years; 30 cigarettes a day for 8 years; or 10 cigarettes a day for 24 years).

Please read this Notice carefully.

To learn more about the Quebec Class Action Administration Plan go to [\[URL for website of Claims Administrator\]](#) or contact the Claims Administrator’s Call Centre by telephone at [\[Call Centre toll-free number\]](#) or by email at [\[Call Centre email address\]](#).

You may also contact the Quebec Class Counsel through the Quebec Class Action Call Centre at 1-888-880-1844 or send an email to tabac@tjl.quebec or

The Ontario Superior Court of Justice (Commercial List) (“CCAA Court”) authorized this Notice. It is not a solicitation from a lawyer.

What is the *Blais* Class Action?

In 1998, the action in *Conseil québécois sur le tabac et la santé et al. v. JTI-Macdonald Corp. et al.* (“**Blais Class Action**”) was commenced against three Canadian Tobacco Companies, Imperial Tobacco Canada Limited, Rothmans, Benson & Hedges Inc. and JTI-Macdonald Corp. (“**Tobacco Companies**”) in the Superior Court of Quebec (“**QSC**”). The proceeding was certified as a class action on February 21, 2005. The **Blais Class Members** are comprised of approximately 100,000 smokers resident in Quebec who developed lung cancer, throat cancer or Emphysema/COPD (GOLD Grade III or IV) prior to March 12, 2012, after having smoked a stipulated quantity of cigarettes manufactured by the Tobacco Companies.

Following a lengthy trial, on May 27, 2015, the QSC granted judgment against the Tobacco Companies. On March 1, 2019, the Quebec Court of Appeal upheld the trial judgment. The Quebec Courts awarded the *Blais* Class Members moral damages, punitive damages, interest and additional indemnity totalling approximately \$13.7 billion.

What is the Quebec Class Action Administration Plan?

In March, 2019, the Tobacco Companies filed for protection from their creditors, including the *Blais* Class Members, under the *Companies’ Creditors Arrangement Act* (“**CCAA**”). The Tobacco Companies participated in a comprehensive Court-supervised mediation with the Provinces, Territories, *Blais* Class Members and other persons with claims and potential claims against them to negotiate a global settlement of all claims arising from the development, design, manufacture, production, marketing, advertising, distribution, purchase or sale of tobacco products, including the historical or ongoing use of or exposure to tobacco products or their emissions and the development of any resulting disease or condition in Canada.

Following a Court-supervised mediation, on [date], the CCAA Court approved the plans of compromise and arrangement (“**CCAA Plans**”) pursuant to the CCAA of the Tobacco Companies. The CCAA Plans include compensation to be provided through the Quebec Class Action Administration Plan (“**Quebec Administration Plan**”) to residents of Quebec who meet the prescribed criteria to be the *Blais* Class Members.

If you are a resident of Quebec, smoked Twelve pack-years of cigarettes sold by any of the Tobacco Companies between January 1, 1950 and November 20, 1998, and were diagnosed with Lung Cancer, Throat Cancer, or Emphysema/COPD (GOLD Grade III or IV) attributable to smoking cigarettes before March 12, 2012, you may be eligible to receive compensation from the Quebec Administration Plan.

Who can receive money from the Quebec Administration Plan?

You are a *Blais* Class Member and may be entitled to receive compensation in the form of a monetary payment if you fulfill the following criteria (“**Blais Eligibility Criteria**”):

- (a) You were alive on November 20, 1998;
- (b) You reside in Quebec;

- (c) Between January 1, 1950 and November 20, 1998, you smoked a minimum of Twelve Pack-Years of cigarettes sold by the Tobacco Companies;
- (d) Before March 12, 2012, you were diagnosed with:
 - (i) Lung cancer,
 - (ii) Throat cancer, or
 - (iii) Emphysema/COPD (GOLD Grade III or IV); and
- (e) On the date of your diagnosis, you resided in Quebec.

The heirs of persons who meet the above criteria but died after November 20, 1998 may also be eligible to receive a compensation payment.

“Lung Cancer” has been defined to mean primary cancer of the lungs.

“Throat Cancer” has been defined to mean primary cancer (squamous cell carcinoma) of the larynx, the oropharynx or the hypopharynx.

“Larynx” has been defined to mean the upper part of the respiratory passage that is bounded above by the glottis and is continuous below with the trachea.

“Oropharynx” has been defined to mean the part of the pharynx that is below the soft palate and above the epiglottis and is continuous with the mouth. It includes the back third of the tongue, the soft palate, the side and back walls of the throat, and the tonsils.

“Hypopharynx” has been defined to mean the laryngeal part of the pharynx extending from the hyoid bone to the lower margin of the cricoid cartilage.

“Emphysema” has been defined to mean the condition of the lung that is marked by distension and eventual rupture of the alveoli with progressive loss of pulmonary elasticity, that is accompanied by shortness of breath with or without cough, and that may lead to impairment of heart action. For the purpose of the Quebec Administration Plan, “Emphysema” includes COPD (GOLD Grade III or IV).

“COPD” has been defined to mean chronic obstructive pulmonary disease (GOLD Grade III or IV). The Global Initiative for Chronic Obstructive Lung Disease (**“GOLD”**) developed a four grade classification system based upon severity of airflow limitation and other diagnostic parameters. The GOLD Grade III (severe) and GOLD Grade IV (very severe) classifications represent the two most severe categories of disease.

“Twelve pack-years of cigarettes” has been defined to mean the minimum amount of the Tobacco Companies’ cigarettes that a Pan-Canadian Claimant is required to have smoked between January

1, 1950 and November 20, 1998. One pack-year is the number of cigarettes smoked daily and is equivalent to 7,300 cigarettes. Twelve pack-years of cigarettes is the equivalent of 87,600 cigarettes which is calculated as any combination of the number of cigarettes smoked in a day multiplied by the number of days of consumption. For example, twelve pack-years equals:

10 cigarettes smoked per day for 24 years ($10 \times 365 \times 24$) = 87,600 cigarettes
 or
 20 cigarettes smoked per day for 12 years ($20 \times 365 \times 12$) = 87,600 cigarettes
 or
 30 cigarettes smoked per day for 8 years ($30 \times 365 \times 8$) = 87,600 cigarettes

“Cigarettes sold by the Tobacco Companies” has been defined to mean the following brands and sub-brands of cigarettes:

Accord	Craven “A”	Mark Ten	Number 7
B&H	Craven “M”	Matinee	Peter Jackson
Belmont	du Maurier	Medallion	Players
Belvedere	Dunhill	Macdonald	Rothmans
Camel	Export	More	Vantage
Cameo	LD	North American Spirit	Viscount
Other Brands [link to document listing sub-brands]			Winston

What compensation may you be eligible to receive from the Quebec Administration Plan?

The Quebec Administration Plan provides financial compensation for *Blais* Class Members who fulfill the *Blais* Eligibility Criteria. The amount of compensation for which a *Blais* Class Member will be assessed to be eligible will depend upon several factors including the number of individuals in Quebec who fulfill the *Blais* Eligibility Criteria, the number of individuals diagnosed with each of Lung Cancer, Throat Cancer and Emphysema/COPD (GOLD Grade III or IV), and whether each *Blais* Class Member started smoking the Tobacco Companies’ cigarettes before January 1, 1976, or on or after January 1, 1976. **An Eligible *Blais* Class member shall be paid for the single compensable disease with which they have been diagnosed that will provide them with the highest amount of compensation from the Quebec Administration Plan. The amounts of the Compensation Payments to Eligible *Blais* Class Members shall not exceed and may be less than the maximum amounts specified in the table below:**

Disease(s) with which you were diagnosed	Maximum Amount of Compensation (CAD)	
	If you started smoking before January 1, 1976	If you started smoking on or after January 1, 1976
Emphysema/COPD (GOLD Grade III or IV)	Up to \$30,000	Up to \$24,000
Lung cancer	Up to \$100,000	Up to \$80,000

Disease(s) with which you were diagnosed	Maximum Amount of Compensation (CAD)	
	If you started smoking before January 1, 1976	If you started smoking on or after January 1, 1976
Throat cancer	Up to \$100,000	Up to \$80,000

How do I submit a Claim?

To make a Claim to the Quebec Administration Plan, **by no later than [the *Blais* Claims Application Deadline which is TBD]**, you must submit to the Claims Administrator a **Proof of Claim** consisting of a **Tobacco-Victim Claim Form or Succession Claim Form** as applicable.

In order to obtain the Proof of Diagnosis, on the Tobacco-Victim Claim Form or Succession Claim Form, as applicable, you will be asked to authorize the Claims Administrator to request an Official Confirmation through the Ministry of Health and Social Services of Quebec (“MSSS”) and the *Régie de l’assurance maladie du Québec* (“RAMQ”) from (i) the Quebec Cancer Registry in respect of a diagnosis of Lung Cancer or Throat Cancer, and (ii) from MED-ÉCHO, a MSSS database of clinical information, in respect of a diagnosis of Emphysema/COPD (GOLD Grade III or IV). In the event that the Claims Administrator is unable to obtain an Official Confirmation in respect of the Tobacco-Victim, then the Claims Administrator will request that you submit an Alternative Cancer Proof or Alternative Emphysema/COPD (GOLD Grade III or IV) Proof which you will be responsible to obtain and submit.

If you are requested by the Claims Administrator to submit an Alternative Cancer Proof or an Alternative Emphysema/COPD (GOLD Grade III or IV) Proof, you must submit such proof to the Claims Administrator by no later than 120 days following receipt of such request in one of the following forms:

- (a) a copy of a pathology report which confirms that you were diagnosed with Lung Cancer or Throat Cancer, as applicable, before March 12, 2012; or
- (b) a copy of a report of a spirometry test performed on you before March 12, 2012, demonstrating a FEV1 (non-reversible) of less than 50% of the predicted value to establish a diagnosis of Emphysema/COPD (GOLD Grade III or IV); or
- (c) A copy of an extract from your medical file confirming the diagnosis of Lung Cancer, Throat Cancer or Emphysema/COPD (GOLD Grade III or IV) before March 12, 2012; or
- (d) A completed **Physician Form**; or
- (e) A written statement from your Physician, or another physician having access to your medical record, confirming the diagnosis of Lung Cancer or Throat Cancer before March 12, 2012 and providing at least one of the following records to verify the diagnosis and date of diagnosis: pathology report, operative report, biopsy report,

MRI report, CT scan report, PET scan report, x-ray report and/or sputum cytology report.

The Tobacco-Victim Claim Form, Succession Claim Form and Physician Form can be found [here \[link to forms on Claims Administrator's website\]](#) on the website for the Quebec Administration Plan. You must sign the Tobacco-Victim Claim Form or Succession Claim Form, as applicable, before a Commissioner for Oaths.

If you are the Legal Representative for an individual who is currently alive, or is now deceased, and who may fulfill the *Blais* Eligibility Criteria, you must provide the Claims Administrator with a document proving that you have the right and are authorized to make a Claim on behalf of the individual. You must also submit a Tobacco-Victim Claim Form or Succession Claim Form, as applicable, and, if requested, Alternative Cancer Proof or an Alternative Emphysema/COPD (GOLD Grade III or IV) Proof to the Claims Administrator **by no later than [the *Blais* Claims Application Deadline which is TBD]**.

You may submit your Proof of Claim to the Claims Administrator by:

By Registered Mail to: [\[Address of Claims Administrator\]](#)

Online at: [\[URL for website of Claims Administrator\]](#)

By email to: [\[Email address of Claims Administrator\]](#)

By fax to: [\[Fax Number of Claims Administrator\]](#)

We recommend that you take a few minutes to review the [FAQ section on the website of the Claims Administrator \[link to Claims Administrator's website\]](#) for further details about the Quebec Administration Plan and the financial compensation that may be available to you. If you have any questions about the Quebec Administration Plan, you may contact the Claims Administrator at: [\[insert URL for website of Claims Administrator and Call Centre toll-free number and email address\]](#).

You may also contact the Quebec Class Counsel through the Quebec Class Action Call Centre at 1-888-880-1844 or send an email to tabac@tjl.quebec or visit the Quebec Tobacco Class Action website at www.recourstabac.com.

WHAT IS THE DEADLINE FOR SUBMITTING A CLAIM?

The deadline to file your Tobacco-Victim Claim Form or Succession Claim Form, as applicable, and, if requested, Alternative Cancer Proof or an Alternative Emphysema/COPD (GOLD Grade III or IV) Proof with the Claims Administrator is [**the *Blais* Claims Application Deadline which is TBD**].

**IF YOU DO NOT FILE YOUR COMPLETE CLAIM ON TIME,
YOUR CLAIM WILL NOT BE ALLOWED.**

**YOU MUST FILE A CLAIM EVEN IF YOU HAVE ALREADY REGISTERED
ON THE QUEBEC CLASS ACTION WEBSITE**

APPENDIX “B”

Quebec Class Action Administration Plan

NOTICE OF REJECTION OF *BLAIS* CLAIM

[on Claims Administrator’s Letterhead]

BY [METHOD OF COMMUNICATION]

Claimant’s Name
 Claim Number
 Claimant’s Address

Dear [Full name of Tobacco-Victim Claimant / Succession Claimant or representative],

By way of the present Notice, we hereby advise you that your claim [claim number] relating to [your/ the Tobacco-Victim’s name] diagnosis of [lung cancer/throat cancer/Emphysema/COPD (GOLD Grade III or IV)] has been rejected for the following reason(s): [Select appropriate reasons or add additional reasons]

- ☐ The Claim Form was not properly completed, despite having received a Notice of Incomplete Claim;
- ☐ The Claimant has not established that they are the proper claimant to be asserting the Tobacco-Victim’s claim;
- ☐ A Succession Claim has been submitted by the Liquidator of the estate of the deceased Tobacco-Victim, or by an Heir with a priority claim to the Compensation Payment;
- ☐ The supporting documents do not support that the Tobacco-Victim smoked at least 12 pack-years of the Tobacco Companies’ cigarettes between January 1, 1950 and November 20, 1998;
- ☐ The supporting documents do not support that the Tobacco-Victim was diagnosed with [lung cancer, throat cancer or Emphysema/COPD (GOLD Grade III or IV)] prior to March 12, 2012;
- ☐ The Tobacco-Victim’s diagnosis or date of diagnosis could not be confirmed;
- ☐ The Tobacco-Victim does not reside in Quebec; and/or
- ☐ The Tobacco-Victim was not alive on November 20, 1998.

[If applicable: Although your claim has been rejected in the *Blais* Class Action, the date of your/the Tobacco-Victim's diagnosis is within the period between March 8, 2015 and March 8, 2019 which is covered by the Pan-Canadian Claimants' Compensation Plan ("**PCC Compensation Plan**"). You will be receiving instructions from the Claims Administrator regarding on how to proceed with your claim under the PCC Compensation Plan.]

If you believe that your claim has been improperly rejected, you may submit your Claim for review by the Review Officer. To do so, you must fully complete and submit the attached Request for Review Form and any supporting documents to the Claims Administrator by not later than 5:00 p.m. Eastern Time **sixty (60) days** from the date this Notice of Rejection of *Blais* Claim. The Claims Administrator will not accept and review your Request for Review unless it has been submitted by this deadline by one of the following methods:

SUBMIT YOUR REQUEST FOR REVIEW BY REGISTERED MAIL TO: [\[Address of Claims Administrator\]](#);

OR

SUBMIT YOUR REQUEST FOR REVIEW ONLINE AT: [\[URL for website of Claims Administrator\]](#);

OR

SUBMIT YOUR REQUEST FOR REVIEW BY EMAIL TO: [\[Email address for Claims Administrator\]](#);

OR

SUBMIT YOUR REQUEST FOR REVIEW BY FAX TO: [\[Fax Number of Claims Administrator\]](#).

In accordance with the terms of the Quebec Administration Plan, the decision of the Claims Administrator, and the decision of the Review Officer if you chose to submit a Request for Review, are final and binding without any recourse to any Court, forum or tribunal.

If you have questions in respect of the Claims Process, including this Notice of Rejection of *Blais* Claim or the Request for Review, under the Quebec Administration Plan, please consult the Claims Administrator's website at [\[URL for website of Claims Administrator\]](#) or call the Claims Administrator's Call Center at [\[Call Centre toll-free number\]](#) or send an email to [\[Claims Administrator's email\]](#).

If you require any assistance to complete a Request for Review, you may contact the Quebec Class Counsel through the Quebec Class Action Call Centre at 1-888-880-1844 or send an email to tabac@tjl.quebec or visit the Quebec Tobacco Class Action website at www.recourstabac.com.

[Place], this • day of •, 202•

Claims Administrator

APPENDIX “C”

Quebec Class Action Administration Plan

CLAIM FORM ATOBACCO-VICTIM CLAIM FORM

PROOF OF CLAIM – GENERAL INSTRUCTIONS

If you have questions in respect of the Claims Process, including the status of your claim, under the Quebec Administration Plan, please consult the Claims Administrator’s website at [\[URL for website of Claims Administrator\]](#) or call the Claims Administrator’s Call Center at [\[Call Centre toll-free number\]](#) or send an email to [\[Claims Administrator’s email\]](#).

If you require any assistance to complete this form, please call the Quebec Class Action Call Centre at 1-888-880-1844 or send an email to tabac@tjl.quebec or visit the Quebec Tobacco Class Action website at www.recourstabac.com.

You must submit your Claim Form and any required supporting documents to the Claims Administrator by *[Blais Claims Application Deadline]* before 5 PM EST.

Proofs of Claim may be submitted:

1. Electronically via the website at [\[URL for website of Claims Administrator\]](#);
2. By email to [\[Claims Administrator’s email\]](#);
3. By fax to: [\[Fax Number of Claims Administrator\]](#); or
4. By registered mail to the following address: [\[Address of Claims Administrator\]](#).

Your claim will be deemed to be received **only when received by the Claims Administrator**. All Tobacco-Victim Claimants will be sent an Acknowledgement of Receipt of Claim by email or by mail once their Proof of Claim has been received by the Claims Administrator. You must keep your record of transmission of your Proof of Claim until you receive the Acknowledgement of Receipt of Claim. Please note that there may be a delay of several days before you receive your Acknowledgment of Receipt of Claim from the Claims Administrator.

PLEASE DO NOT SUBMIT YOUR CLAIM MORE THAN ONCE OR THROUGH MULTIPLE MEANS.

To be eligible to receive payment of financial compensation from the Quebec Administration Plan you (or the Tobacco-Victim for whom you are submitting a claim) must meet all of the following *Blais* Eligibility Criteria:

1. You reside in Quebec;
2. Between January 1, 1950 and November 20, 1998, you smoked a minimum of twelve pack-years of cigarettes sold by the Canadian Tobacco Companies.

Note: The calculator at this link [\[insert link to Pack-Years Calculator\]](#) will assist you to calculate the number of pack-years that you (or the Tobacco-Victim for whom you are submitting a claim) smoked.

3. Before March 12, 2012, you were diagnosed with:
 - (a) Primary lung cancer, or
 - (b) Primary cancer (squamous cell carcinoma) of the larynx, the oropharynx or the hypopharynx (throat cancer), or
 - (c) Emphysema/COPD (GOLD Grade III or IV).
4. On the date of your diagnosis with lung cancer, throat cancer or Emphysema/COPD (GOLD Grade III or IV) you resided in Quebec.

AND

5. The *Blais* Class Members include the heirs of all persons who died after November 20, 1998 and satisfied the above criteria.

If you reside in Quebec and do not meet the above *Blais* Eligibility Criteria, you may be eligible to receive compensation as a Pan-Canadian Claimant under the Pan-Canadian Claimant Compensation Plan (“PCC Compensation Plan”), if you meet all of the following criteria:

1. You reside in any Province or any Territory;
2. You were alive on March 8, 2019;
3. Between January 1, 1950 and November 20, 1998, you smoked a minimum of twelve pack-years of cigarettes sold by the Canadian Tobacco Companies;

Note: The calculator at this link [\[insert link to Pack-Years Calculator\]](#) will assist you to calculate the number of pack-years that you smoked.

4. Between March 8, 2015 and March 8, 2019, you were diagnosed with:
 - (a) Primary lung cancer, or
 - (b) Primary cancer (squamous cell carcinoma) of the larynx, the oropharynx or the hypopharynx (throat cancer), or
 - (c) Emphysema/COPD (GOLD Grade III or IV);

AND

5. On the date of your diagnosis with lung cancer, throat cancer or Emphysema/COPD (GOLD Grade III or IV) you resided in any Province or any Territory.

You are only permitted to make one claim for compensation as either a *Blais* Class Member or a PCC-Claimant under the PCC Compensation Plan. You cannot make a claim to both Claims Processes. You may determine whether you are eligible to receive compensation as a PCC-Claimant at [\[link to PCC section of Claims Administrator’s website\]](#).

You must fill out either Claim Form A or Claim Form B, depending on your situation:

Claim Form A is the Tobacco-Victim Claim Form (living class members)

Use Claim Form A – Tobacco-Victim Claim Form:

- If you are a Tobacco-Victim who was diagnosed with lung cancer, throat cancer and/or Emphysema/COPD (GOLD Grade III or IV) before March 12, 2012; or
- If you have a mandate or power of attorney to represent a living Tobacco-Victim who was diagnosed with lung cancer, throat cancer and/or Emphysema/COPD (GOLD Grade III or IV) before March 12, 2012.

Claim Form B is the Succession Claim Form (succession class members)

Use Claim Form B – Succession Claim Form:

- If you are the liquidator of the estate of a Tobacco-Victim who was diagnosed with lung cancer, throat cancer and/or Emphysema/COPD (GOLD Grade III or IV) before March 12, 2012, and who died after November 20, 1998;
- If you are an heir of a Tobacco-Victim who was diagnosed with lung cancer, throat cancer and/or Emphysema/COPD (GOLD Grade III or IV) before March 12, 2012 and who died after November 20, 1998, and the estate is closed, or if the Tobacco-Victim died without a will; or
- If you have a mandate or power of attorney to represent the heir of a Tobacco-Victim who was diagnosed with lung cancer, throat cancer and/or Emphysema/COPD (GOLD Grade III or IV) before March 12, 2012 and who died after November 20, 1998, and the estate is closed or the Tobacco-Victim died without a will.

If the heir has died, a person who assumes the claim of the deceased heir by representation may also file a Succession Claim using Claim Form B.

Confidentiality Declaration by the Claims Administrator

All personal information collected by the Claims Administrator through the Claims Process will be kept confidential in accordance with the *Personal Information Protection and Electronic Documents Act*, S.C. 2000, c. 5 (“**PIPEDA**”). This information is collected only for the purpose of administering the Quebec Administration Plan and to assess a Tobacco-Victim Claimant’s or Succession Claimant’s eligibility to receive a Compensation Payment as an Eligible *Blais* Class Member and will not be disclosed without the express written permission of the Tobacco-Victim Claimant or Succession Claimant, except as provided for in the Quebec Administration Plan or by Court Order.

INSTRUCTIONS – CLAIM FORM A: TOBACCO-VICTIM CLAIM FORM

As a person who has suffered from lung cancer, throat cancer and/or Emphysema/COPD (GOLD Grade III or IV), you are considered a “Tobacco-Victim Claimant” under the terms of the Quebec Administration Plan.

This document is intended to assist you in completing Claim Form A, and assembling the documentation required in order to prove your claim.

If you need any help or have questions, please call the Claims Administrator’s Call Center at [Call Centre toll-free number] or send an email to [Claims Administrator’s email].

You may also contact the Quebec Class Counsel through the Quebec Class Action Call Centre at 1-888-880-1844 or send an email to tabac@tlj.quebec or visit the Quebec Tobacco Class Action website at www.recourstabac.com.

***If you are filling out this form on your own behalf, provide your own information where information is requested about the “Tobacco-Victim.”

Part A: Information about the Tobacco-Victim

In **Question 1**, provide the Tobacco-Victim’s full name.

In **Question 2**, provide the Tobacco-Victim’s birth date.

In **Question 3**, provide the Tobacco-Victim’s health insurance card number. This information is required to enable the Claims Administrator to make requests to the Ministry of Health and Social Services of Quebec (“MSSS”) and Régie de l’assurance maladie du Québec (RAMQ) for documents that will assist the Tobacco-Victim Claimant to prove the diagnosis and the date of diagnosis of the Tobacco-Victim’s tobacco-related disease(s).

In **Question 4**, confirm whether the Tobacco-Victim was alive on November 20, 1998. If the Tobacco-Victim died before November 20, 1998, then neither the estate of the Tobacco-Victim nor the Tobacco-Victim’s Heirs are eligible to receive a Compensation Payment.

In **Question 5**, confirm whether the Tobacco-Victim resided in Quebec during the period from January 1, 1950 to November 20, 1998.

In **Question 6**, indicate whether the Tobacco-Victim resided in Quebec on the date of their diagnosis.

In **Question 7**, indicate whether the Tobacco-Victim currently resides in Quebec.

Only answer **Question 8** if the answer to Questions 5, 6 or 7 was “No” and provide the details concerning the Tobacco-Victim’s time living in Quebec. Please note that the Tobacco-Victim must have been a resident of the Province of Quebec in order to be entitled to compensation. **Please note that, in order to be entitled to compensation, the Tobacco-Victim must have been a resident of Quebec at the time of diagnosis as well as a resident of Quebec at the time of submitting the Proof of Claim to the Claims Administrator.**

In **Question 9**, indicate whether you are acting as a representative of the Tobacco-Victim.

Only answer **Question 10** if you are a representative of the Tobacco-Victim. In response to these questions, indicate your full name and the type of mandate that you are acting pursuant to. You must attach a copy of the mandate or power of attorney with the Proof of Claim, marked with the words “Representative’s Mandate”, followed by the Tobacco-Victim’s name on the front page of the document, and in the file name, if submitted electronically.

In **Questions 11 and 12**, provide your own mailing address and other contact information so that the Claims Administrator can communicate with you in respect of your claim. Note that the Claims Administrator will communicate with you by email, if an email address is provided. Please add the Claims Administrator's email address [\[Claims Administrator's email\]](#) to your list of contacts to ensure that correspondence in connection with your claim reaches your Inbox.

In **Question 12**, indicate your language of preference for communications from the Claims Administrator.

Part B: Proof of Diagnosis

To be eligible for compensation, the Tobacco-Victim must have been diagnosed with primary lung cancer, primary cancer (squamous cell carcinoma) of the larynx, oropharynx or hypopharynx and/or Emphysema/COPD (GOLD Grade III or IV) before **March 12, 2012**. These are the only diseases covered by the Quebec Administration Plan.

In response to **Question 1**, indicate what disease(s) the Tobacco-Victim has been diagnosed with, and for each, indicate the initial date of diagnosis. While a Tobacco-Victim has a distinct claim for each occurrence of a covered disease, a recurrence or a relapse is not considered a primary cancer. In the case of a recurrence or relapse, only the initial diagnosis date should be indicated. Please note that the Tobacco-Victim Claimant will only receive compensation relating to the proven claim which entitles the Tobacco-Victim to the highest compensation.

If you do not recall the exact date of the Tobacco-Victim's diagnosis, please provide the most accurate estimate possible, as this information will be verified in the Claims Process.

If you are unsure of which category your claim falls into, please call the Claims Administrator's Call Center at [\[Call Centre toll-free number\]](#) or send an email to [\[Claims Administrator's email\]](#).

You may also contact the Quebec Class Counsel through the Quebec Class Action Call Centre at 1-888-880-1844 or send an email to tabac@tjl.quebec or visit the Quebec Tobacco Class Action website at www.recourstabac.com.

In **Section 2**, you must provide your authorization for the Claims Administrator to obtain medical information concerning the Tobacco-Victim from the sources listed therein for the purpose of confirming the diagnosis and the date of diagnosis of the disease(s) indicated in response to **Question 1**.

To facilitate the process of proving a Tobacco-Victim's diagnosis, the Claims Administrator will request the official records from the Quebec Cancer Registry and the MED-ÉCHO database which are held by RAMQ and the Ministry of Health and Social Services.

If an official confirmation of disease/diagnosis cannot be made from these sources, the Claims Administrator will contact you to request that you submit an alternative method of proof. By way of example only, such proof may include: a copy of a pathology report which confirms that the Tobacco-Victim was diagnosed with Lung Cancer or Throat Cancer, as applicable, before March 12, 2012; a copy of a report of a spirometry test performed on the Tobacco-Victim before March 12, 2012, demonstrating a FEV1 (non-reversible) of less than 50% of the predicted value to establish a diagnosis of Emphysema/COPD (GOLD Grade III or IV); an extract from the Tobacco-Victim's medical records or a written statement of the Tobacco-Victim's Physician. **Do not submit any alternative evidence unless it has been explicitly requested from you by way of a Notice from the Claims Administrator entitled "Notice to Provide Alternative Proof."**

If submitting your Alternative Proof electronically, please name the PDF document "[your health insurance card number]-Alternative Medical Proof.pdf" as applicable.

PART C. Proof of Smoking History

In this section, you must confirm the Tobacco-Victim's smoking habits.

In **Section 1**, you must indicate whether the Tobacco-Victim started smoking either (a) before or (b) on or after January 1, 1976. The Quebec Courts reduced the tobacco companies' liability by 20% for Tobacco-Victims who started smoking after January 1, 1976. This is because the Courts determined that, by January 1, 1980, the dangers of

contracting a disease from smoking were known to the public, and that it would have taken 4 years for an individual to become addicted to smoking. Thus, people who started smoking after January 1, 1976 are deemed to have been aware of the dangers of contracting a disease from smoking (the Courts also determined that the public was deemed to have knowledge as of March 1, 1996 that cigarettes were addictive). Consequently, Tobacco-Victims who started smoking after January 1, 1976 are entitled to compensation to the extent of 80%. These determinations by the Courts are final and cannot be appealed.

Note that in order to be entitled to compensation, the Tobacco-Victim must have smoked 12 pack-years, or 87,600 cigarettes between January 1, 1950 and November 20, 1998.

A pack-year is 7,300 cigarettes, expressed in terms of daily smoking. For example, 12 pack-years equals:

- 20 cigarettes a day for 12 years ($20 \times 365 \times 12 = 87,600$) or
- 30 cigarettes a day for 8 years ($30 \times 365 \times 8 = 87,600$) or
- 10 cigarettes a day for 24 years ($10 \times 365 \times 24 = 87,600$);

It is not necessary for you to calculate the number of pack-years smoked by the Tobacco-Victim, as this calculation will be done by the Claims Administrator when reviewing the Proof of Claim.

If the Tobacco-Victim's smoking history can be easily expressed in terms of number of cigarettes smoked per year, then please fill out the requisite information where indicated in **Section 2(a)**. If the Tobacco-Victim's smoking history cannot be easily expressed in such terms, please provide a summary where indicated in **Section 2(b)** describing the Tobacco-Victim's smoking habits between January 1, 1950 and November 20, 1998.

In **Section 3**, please check the boxes for all brands of cigarettes that the Tobacco-Victim smoked on a regular basis between January 1, 1950 and November 20, 1998. The brand choices listed include the "family" of those brands, for example, Players includes Players Light and Players Filter etc. The purpose of providing this information is to confirm that the Tobacco-Victim smoked cigarettes manufactured by the defendant tobacco companies.

PART D. Payment Method

In this section indicate your preference to receive payment by either cheque or direct deposit of any Compensation Payment for which the Tobacco-Victim may be determined to be eligible.

PART E. Signature

In this section indicate your own name and the date, and add your signature. By signing this form, you are acknowledging that the information submitted is true, and all supporting documents are authentic and have not been altered.

The Claim Form must be signed before a Commissioner for Oaths.

If Quebec Class Counsel are assisting you with your Claim Form, they can arrange for a Commissioner for Oaths to commission your Claim Form prior to submitting it to the Claims Administrator.

If you are not using the assistance of Quebec Class Counsel, you may locate a Commissioner for Oaths at <https://www.assermentation.justice.gouv.qc.ca/ServicesPublicsConsultation/Commissaires/Proximite/Criteres.aspx>.

CLAIM FORM A
TOBACCO-VICTIM CLAIM FORM

Part A: Information about the Tobacco-Victim

1. What is your (the Tobacco-Victim's) full legal name?

Last name: _____ Given name(s): _____

2. What is your (the Tobacco-Victim's) date of birth (YYYY-MM-DD)?

3. What is your (the Tobacco-Victim's) health insurance card number? _____

4. Was the Tobacco-Victim alive on November 20, 1998? ☐ Yes ☐ No

5. Between January 1, 1950 and November 20, 1998, did you (the Tobacco-Victim) reside in Quebec?

☐ No ☐ Yes

6. Did you reside in Quebec on the date on which you were diagnosed with primary lung cancer, primary squamous cell carcinoma of the larynx, the oropharynx or the hypopharynx (throat cancer), or Emphysema/COPD (GOLD Grade III or IV)?

☐ Yes ☐ No

7. Do you (the Tobacco-Victim) currently reside in Quebec? ☐ Yes ☐ No

8. If you answered "No" to any of Questions 4, 5 and/or 6, during which periods of time were you a resident of Quebec?

9. Are you (the Tobacco-Victim) represented by another person? ☐ Yes ☐ No

10. If you answered "Yes" to Question 9:

(a) What is the representative's full legal name?

Last name: _____ Given name(s): _____

(b) Pursuant to what type of mandate is the representative acting?

☐ Tutorship to a person of full age

☐ Mandate in case of incapacity

☐ Curatorship to a person of full age

☐ Power of attorney

☐ Detailed Mandate

A copy of the mandate or power of attorney that the representative of the Tobacco-Victim is acting pursuant to must be attached and marked with the words "Representative's Mandate" and the name of the Tobacco-Victim.

11. What is your mailing address? If a representative is submitting the claim, provide the representative's mailing address.

Number	Street	Apartment	
City/Town	Province	Country	Postal Code

12. What is your contact information? If a representative is filing the claim, provide the representative's contact information.

Phone: _____ Fax: _____

Email: _____

13. What language should be used for communication?

☐ English ☐ French

Part B: Proof of Diagnosis

1. I (or the Tobacco-Victim whom I represent) have (or has) been diagnosed with the following disease (or diseases) on the following date(s) (YYYY-MM-DD), and was resident in the place indicated on the date of diagnosis:

☐ Primary Lung Cancer

Date of diagnosis: _____

Place of residence on date of diagnosis: _____

☐ Primary squamous cell carcinoma of the larynx, oropharynx or hypopharynx (Throat Cancer)

Date of diagnosis: _____

Place of residence on date of diagnosis: _____

☐ Emphysema/COPD (GOLD Grade III or IV)

Date of diagnosis: _____

Place of residence on date of diagnosis: _____

Reminder: In the case of recurrence or relapse, please indicate the initial date of diagnosis only.

2. Authorization to obtain Official Confirmation of Diagnosis

I hereby authorize the Claims Administrator to obtain a copy of my medical information (or a copy of the medical information of the Tobacco-Victim whom I represent) relating to the diseases/diagnoses referenced above, and I authorize the Ministère de la Santé et des Services sociaux and/or the Régie de l'assurance maladie du Québec to communicate to the Claims Administrator copies of any of the following:

- A confirmation of my (or the Tobacco-Victim's) diagnosis from the Quebec Cancer Registry;
- An extract from RAMQ files confirming my (or the Tobacco-Victim's) diagnosis; and
- An extract from the MED-ÉCHO database confirming my (or the Tobacco-Victim's) diagnosis.

☐ By checking this box, I authorize my (or the Tobacco-Victim's) medical information to be released to the Claims Administrator.

If an official confirmation of disease/diagnosis cannot be made through these means, the Claims Administrator will contact you to request the submission of an alternative method of proof. **Do not submit any alternative evidence unless it has been explicitly requested from you by way of a Notice from the Claims Administrator entitled "Notice to Provide Alternative Proof."**

Part C: Proof of Smoking History

1. I (or the Tobacco-Victim whom I represent) started smoking cigarettes:

☐ Before January 1, 1976

☐ On or after January 1, 1976

2 (a). Between January 1, 1950 and November 20, 1998, I (or the Tobacco-Victim whom I represent) smoked approximately _____ cigarettes per day for approximately _____ years.

[or]

2 (b). The following is a summary of the number of cigarettes I (or the Tobacco-Victim whom I represent) smoked between January 1, 1950 and November 20, 1998:

3. I (or the Tobacco-Victim who I represent) regularly smoked the following brands of cigarettes:

☐ Accord

☐ Craven "M"

☐ Matinee

☐ Rothmans

☐ B&H

☐ du Maurier

☐ Medallion

☐ Vantage

☐ Belmont

☐ Dunhill

☐ More

☐ Viscount

☐ Belvedere

☐ Export

☐ North American Spirit

☐ Winston

☐ Camel

☐ LD

☐ Number 7

☐ Cameo ☐ Macdonald ☐ Peter Jackson

☐ Craven "A" ☐ Mark Ten ☐ Players

☐ Other: _____

Reminder: The brand choices listed above include all cigarettes in the same brand family. Please check all that apply. [\[link to document listing sub-brands\]](#)

Part D: Payment Method

1. If the Claims Administrator determines that I (or the Tobacco-Victim whom I represent) is eligible to receive compensation from the Quebec Administration Plan, I wish to receive payment:

☐ By cheque mailed to the address that I provided in Part A of this Claim Form.

☐ By direct deposit into my (the Tobacco Victim's) bank account. I have attached a "Void" cheque and provided the following information regarding the bank account in my name:

Financial Institution: _____

Branch Address: _____

City: _____

Province: _____

Postal Code: _____

Name on Account: _____

Branch Number: _____

Financial Institution Number: _____

Account Number: _____

Part E: Signature

I, _____, solemnly declare that the information provided herein is true and that the documents submitted in support of this claim are authentic and have not been modified in any way whatsoever.

Signature: _____

Date: _____

SOLEMNLY AFFIRMED BEFORE ME in

_____ (City),

Quebec, on _____ (Date)

Commissioner for Oaths for Quebec

APPENDIX “D”

Quebec Class Action Administration Plan

PHYSICIAN FORM

GENERAL INSTRUCTIONS

If you have questions in respect of the Claims Process under the Quebec Class Action Administration Plan (“**Quebec Administration Plan**”), please consult the Claims Administrator’s website at [\[URL for website of Claims Administrator\]](#) or call the Claims Administrator’s Call Center at [\[Call Centre toll-free number\]](#) or send an email to [\[Claims Administrator’s email\]](#).

You may also contact the Quebec Class Counsel through the Quebec Class Action Call Centre at 1-888-880-1844 or send an email to tabac@tjl.quebec or visit the Quebec Tobacco Class Action website at www.recourstabac.com.

This Physician Form can be used as Alternative Proof if the Claims Administrator has requested that the Tobacco-Victim Claimant or Succession Claimant provide Alternative Cancer Proof or Alternative Emphysema/COPD (GOLD Grade III or IV) Proof to help the Tobacco-Victim Claimant or Succession Claimant prove the Tobacco-Victim’s diagnosis of Lung Cancer, Throat Cancer or Emphysema/COPD (GOLD Grade III or IV) before March 12, 2012, which is required in order to prove a claim under the Quebec Administration Plan.

Deadline to Submit this Form: This Physician Form and all requested medical documents must be submitted to the Claims Administrator of the Quebec Administration Plan as a complete package by no later than [the *Blais* Claims Application Deadline which is TBD] or on the date set forth in the Notice to Provide Alternative Proof issued by the Claims Administrator (the “**Deadline**”).

SUBMIT THIS FORM BY REGISTERED MAIL: This Physician Form and all required medical documents must be postmarked no later than the Deadline and mailed to: [Address of Claims Administrator].

OR

SUBMIT THIS FORM ONLINE: This Physician Form and documents must be submitted online and all documents must be uploaded online at [URL for website of Claims Administrator] by no later than 5:00 p.m. Eastern Time on the Deadline.

OR

SUBMIT THIS FORM BY EMAIL: This Physician Form must be emailed to the Claims Administrator to [Email address of Claims Administrator] by no later than 5:00 p.m. Eastern Time on the Deadline.

OR

SUBMIT THIS FORM BY FAX: This Physician Form and documents must be faxed to the Claims Administrator to [Fax Number of Claims Administrator] by no later than 5:00 p.m. Eastern Time on the Deadline.

Section I: Information regarding Tobacco-Victim	
The “Tobacco-Victim” is the person in respect of whom a Proof of Claim has been filed pursuant to the Quebec Administration Plan. If the Tobacco-Victim is deceased, the Proof of Claim may be filed by the Tobacco-Victim’s estate or heirs.	
Full Name (First Name, Middle Name and Last Name):	
Date of Birth:	(DD/MM/YYYY)
Health Insurance Card Number:	
Section II: Name and Contact Information of Physician	
Full Name:	
Address:	
Business Phone:	
Preferred Language of Correspondence	☐ French ☐ English

Section III: Disease Diagnosis

Please complete this section even if the Tobacco-Victim is deceased.

Please attach the requested medical documentation marked in Question 3 below to verify the diagnosis. The request for documentation to confirm the diagnosis is a request for existing clinical records only. It is not a request for you or other physicians to prepare a report at this time.

1.	Has the Tobacco-Victim been diagnosed with primary Lung Cancer, Throat Cancer (primary squamous cell carcinoma of the larynx, oropharynx, or hypopharynx), or Emphysema/COPD (GOLD Grade III or IV)? Check all that apply.	☐ Lung Cancer ☐ Throat Cancer (primary squamous cell carcinoma of the larynx, oropharynx, or hypopharynx) ☐ Emphysema/COPD (GOLD Grade III or IV)
2.	On what date was the Tobacco-Victim first diagnosed with Lung Cancer, Throat Cancer or Emphysema/COPD (GOLD Grade III or IV)? (If the Tobacco-Victim was diagnosed with multiple diseases, please add the date of diagnosis for each disease).	Disease: _____ Date of Diagnosis: _____ (DD/MM/YYYY) Disease: _____ Date of Diagnosis: _____ (DD/MM/YYYY) Disease: _____ Date of Diagnosis: _____ (DD/MM/YYYY)

3.	Please attach <u>at least one</u> of the following records that verify the above-referenced diagnosis and date of diagnosis:	☐ Pathology Report ☐ Operative Report ☐ Biopsy Report ☐ MRI Report ☐ CT Scan Report ☐ PET Scan Report ☐ X-ray Report ☐ Sputum Cytology Report ☐ Spirometry Report ☐ Extract from medical chart ☐ Any other medical evidence or documentation that establishes the diagnosis and date of diagnosis (list the records attached):

Section IV: Smoking History

Please answer Question 4 based upon information available in the clinical notes and records available to you. Question 4 is not a request that you seek information from the Claimant or perform an exhaustive review of the Tobacco-Victim's medical records. The Claimant is required to respond to questions regarding the Tobacco-Victim's smoking history on a separate Claim Form which they will submit to the Claims Administrator. If this information is not readily available to you, select "Do not know".

4.	To the best of your knowledge, information and belief, does, or if the Tobacco-Victim is deceased did, the Tobacco-Victim smoke cigarettes?	☐ Yes ☐ No ☐ Do not know

Section V: Certification by Physician

I certify that the information provided on this Physician Form is true and correct to the best of knowledge, information and belief.

Date signed

Signature of Physician

APPENDIX “E”

Quebec Class Action Administration Plan

CLAIM FORM BSUCCESSION CLAIM FORM

PROOF OF CLAIM – GENERAL INSTRUCTIONS

If you have questions in respect of the Claims Process, including the status of your claim, under the Quebec Administration Plan, please consult the Claims Administrator’s website at [\[URL for website of Claims Administrator\]](#) or call the Claims Administrator’s Call Center at [\[Call Centre toll-free number\]](#) or send an email to [\[Claims Administrator’s email\]](#).

If you require any assistance to complete this form, please call the Quebec Class Action Call Centre at 1-888-880-1844 or send an email to tabac@tjl.quebec or visit the Quebec Tobacco Class Action website at www.recourstabac.com.

You must file your Claim Form and any required supporting documents by *[Blais Claims Application Deadline]* before 5 PM Eastern Time.

Proofs of Claim may be submitted:

1. Electronically via the website at [\[URL for website of Claims Administrator\]](#);
2. By email to [\[Claims Administrator’s email\]](#);
3. By fax to: [\[Fax Number of Claims Administrator\]](#); or
4. By registered mail to the following address: [\[Address of Claims Administrator\]](#).

Your claim will be deemed to be received **only when received by the Claims Administrator**. All Tobacco-Victim Claimants will be sent an Acknowledgement of Receipt of Claim by email or by mail once their Proof of Claim has been received by the Claims Administrator. There may be a delay of several days before you receive your Acknowledgment of Receipt of Claim from the Claims Administrator. You must keep your record of transmission of your Proof of Claim until you receive the Acknowledgement of Receipt of Claim.

PLEASE DO NOT SUBMIT YOUR CLAIM MORE THAN ONCE OR THROUGH MULTIPLE MEANS.

To be eligible to receive payment of financial compensation from the Quebec Administration Plan the Tobacco-Victim in respect of whom you are submitting a claim must meet all of the following *Blais* Eligibility Criteria:

1. The Tobacco-Victim resided in Quebec on the date of their death;
2. Between January 1, 1950 and November 20, 1998, the Tobacco-Victim smoked a minimum of twelve pack-years of cigarettes sold by the Canadian Tobacco Companies.

Note: The calculator at this link [\[insert link to Pack-Years Calculator\]](#) will assist you to calculate the number of pack-years that the Tobacco-Victim smoked.

3. Before March 12, 2012, the Tobacco-Victim was diagnosed with:
 - (d) Primary lung cancer, or
 - (e) Primary cancer (squamous cell carcinoma) of the larynx, the oropharynx or the hypopharynx (throat cancer), or
 - (f) Emphysema/COPD (GOLD Grade III or IV).
4. On the date of the Tobacco-Victim's diagnosis with lung cancer, throat cancer or Emphysema/COPD (GOLD Grade III or IV) the Tobacco-Victim resided in Quebec.

AND

5. The *Blais* Class Members include the heirs of all persons who died after November 20, 1998 and satisfied the above criteria.

If Tobacco-Victim resided in Quebec and does not meet the above *Blais* Eligibility Criteria, you may be eligible to receive compensation if the Tobacco-Victim was a Pan-Canadian Claimant under the Pan-Canadian Claimant Compensation Plan ("PCC Compensation Plan"), and meets all of the following criteria:

1. The Tobacco-Victim resided in any Province or any Territory on the date of their death;
2. The Tobacco-Victim was alive on March 8, 2019;
3. Between January 1, 1950 and November 20, 1998, the Tobacco-Victim smoked a minimum of twelve pack-years of cigarettes sold by the Canadian Tobacco Companies;

Note: The calculator at this link [\[insert link to Pack-Years Calculator\]](#) will assist you to calculate the number of pack-years that the Tobacco-Victim smoked.

4. Between March 8, 2015 and March 8, 2019, the Tobacco-Victim was diagnosed with:
 - (d) Primary lung cancer, or
 - (e) Primary cancer (squamous cell carcinoma) of the larynx, the oropharynx or the hypopharynx (throat cancer), or
 - (f) Emphysema/COPD (GOLD Grade III or IV);

AND

5. On the date of the Tobacco-Victim's diagnosis with lung cancer, throat cancer or Emphysema/COPD (GOLD Grade III or IV) the Tobacco-Victim resided in any Province or any Territory.

You are only permitted to make one claim for compensation in regard to the Tobacco-Victim as either a *Blais* Class Member or a PCC-Claimant under the PCC Compensation Plan. You cannot make a claim to both Claims Processes. You may determine whether you are eligible to receive compensation in regard to the Tobacco-Victim as a PCC-Claimant at [\[link to PCC section of Claims Administrator's website\]](#).

You must fill out either Claim Form A or Claim Form B, depending on their situation:

Claim Form A is the Tobacco-Victim Claim Form (living class members)

Use Claim Form A – Tobacco-Victim Claim Form:

- If you are a Tobacco-Victim who was diagnosed with lung cancer, throat cancer and/or emphysema/COPD (GOLD Grade III or IV) before March 12, 2012; or
- If you have a mandate or power of attorney to represent a living Tobacco-Victim who was diagnosed with lung cancer, throat cancer and/or emphysema/COPD (GOLD Grade III or IV) before March 12, 2012.

Claim Form B is the Succession Claim Form (succession class members)

Use Claim Form B – Succession Claim Form:

- If you are the liquidator of the estate of a Tobacco-Victim who was diagnosed with lung cancer, throat cancer and/or emphysema/COPD (GOLD Grade III or IV) before March 12, 2012, and who died after November 20, 1998;
- If you are an heir of a Tobacco-Victim who was diagnosed with lung cancer, throat cancer and/or emphysema/COPD (GOLD Grade III or IV) before March 12, 2012 and who died after November 20, 1998, and the estate is closed, or if the Tobacco-Victim died without a will; or
- If you have a mandate or power of attorney to represent the heir of a Tobacco-Victim who was diagnosed with lung cancer, throat cancer and/or emphysema/COPD (GOLD Grade III or IV) before March 12, 2012 and who died after November 20, 1998, and the estate is closed or the Tobacco-Victim died without a will.

If the heir has died, a person who assumes the claim of the deceased heir by representation may also file a Succession Claim using Claim Form B.

Confidentiality Declaration by the Claims Administrator

All personal information collected by the Claims Administrator through the Claims Process will be kept confidential in accordance with the *Personal Information Protection and Electronic Documents Act*, S.C. 2000, c. 5 (“**PIPEDA**”). This information is collected only for the purpose of administering the Quebec Administration Plan and to assess a Tobacco-Victim Claimant's or Succession Claimant's eligibility to receive a Compensation Payment as an Eligible *Blais* Class Member and will not be disclosed without the express written permission of the Tobacco-Victim Claimant or Succession Claimant, except as provided for in the Quebec Administration Plan or by Court Order.

INSTRUCTIONS – CLAIM FORM B: SUCCESSION CLAIM FORM

As the liquidator of the estate of a deceased Tobacco-Victim or an heir of a deceased Tobacco-Victim, you are considered a “Succession Claimant” under the terms of the Quebec Administration Plan. If the claim is proven, you will be entitled to receive a Compensation Payment as a “Succession Class Member”. In the case of a claim submitted by an heir, the compensation may be split amongst all eligible heirs.

This document is intended to assist you to complete Claim Form B, and assemble the documentation required in order to prove your claim.

If you need any help or have questions, please call the Claims Administrator’s Call Center at [Call Centre toll-free number] or send an email to [Claims Administrator’s email].

You may also contact the Quebec Class Counsel through the Quebec Class Action Call Centre at 1-888-880-1844 or send an email to tabac@tjl.quebec or visit the Quebec Tobacco Class Action website at www.recourstabac.com.

Part A: Information about the Succession Claimant and the Deceased Tobacco-Victim

Section 1: Succession Claimant and Representative

In this section, you must provide information to prove that you are entitled to submit a proof of claim on behalf of the estate of the deceased Tobacco-Victim.

Succession claims **must** be submitted by the liquidator of the estate of the deceased Tobacco-Victim, if there is still a liquidator acting in that capacity. If there is no liquidator (or no longer a liquidator) to the estate of the deceased Tobacco-Victim, then a claim may be submitted by an heir to the deceased Tobacco-Victim, or by an heir by representation. Please note that it is not sufficient to be a member of a deceased Tobacco-Victim’s family in order to file a claim as an heir; a person must be an heir named in a will or registered marriage contract, or be the legal heir pursuant to the Quebec law on successions.

In response to **Questions 1 and 2**, provide the personal details of the person entitled to make the claim. If you are filing the claim on your own behalf, you are the “Succession Claimant.” If you are filing as a representative, then the information requested concerns the person you represent.

In response to **Question 3**, indicate whether you are submitting the claim as the representative of a Succession Claimant.

Only answer **Question 4** if you are submitting the claim as the representative of the Succession Claimant. In response to these questions, indicate the type of mandate that you are acting pursuant to. You must also attach a copy of the mandate or power of attorney with your Proof of Claim, marked with the words “Succession Representative’s Mandate”, followed by the deceased Tobacco-Victim’s name on the front page of the document, and in the file name, if submitted electronically.

In response to **Questions 5 and 6**, provide your mailing address and contact information so that the Claims Administrator can communicate with you in respect of the claim. The Claims Administrator will communicate with you by email, if an email address is provided. Please add the Claims Administrator’s email address [Claims Administrator’s email] to your list of contacts to ensure that correspondence in connection with your claim reaches your Inbox.

In response to **Question 7**, indicate your language of preference for communications from the Claims Administrator.

Section 2: Deceased Tobacco-Victim Information

In response to **Question 1**, provide the deceased Tobacco-Victim's full name.

In response to **Question 2**, provide the deceased Tobacco-Victim's birth date.

In response to **Question 3**, provide the deceased Tobacco-Victim's date of death.

In response to **Question 4** provide the deceased Tobacco-Victim's health insurance card number. This information is required to enable the Claims Administrator to make requests to the Ministry of Health and Social Services of Quebec ("MSSS") and *Régie de l'assurance maladie du Québec* (RAMQ) for relevant documents to assist in proving the diagnosis and the date of diagnosis of the Tobacco-Victim's tobacco-related disease(s).

In **Question 5**, confirm whether the deceased Tobacco-Victim was alive on November 20, 1998. If the Tobacco-Victim died before November 20, 1998, then neither the estate of the Tobacco-Victim nor the Tobacco-Victim's Heirs are eligible to receive a Compensation Payment.

In **Question 6**, confirm whether the deceased Tobacco-Victim resided in Quebec during the period from January 1, 1950 to November 20, 1998.

In **Question 7**, indicate whether the deceased Tobacco Victim resided in Quebec on the date of their diagnosis.

In **Question 8**, indicate whether the deceased Tobacco Victim resided in Quebec on the date of their death.

Only answer **Question 9** if the answer to Questions 6, 7 or 8 was "No" and provide the details concerning the Tobacco-Victim's time living in Quebec. Please note that the Tobacco-Victim must have been a resident of the Province of Quebec in order to be entitled to compensation. **Please note that, in order to be entitled to compensation, the Tobacco-Victim must have been a resident of Quebec at the time of diagnosis as well as a resident of Quebec at the time of their death.**

Part B: Proof of Diagnosis

In order to be eligible for compensation, the deceased Tobacco-Victim must have been diagnosed with primary lung cancer, primary cancer (squamous cell carcinoma) of the larynx, oropharynx or hypopharynx, and/or emphysema/COPD (GOLD Grade III or IV) before **March 12, 2012**. These are the only diseases covered by the Quebec Administration Plan.

In response to **Question 1**, indicate what disease(s) the deceased Tobacco-Victim was diagnosed with, and for each, indicate the initial date of diagnosis. While a Succession Claimant has a distinct claim for each occurrence of a covered disease, a recurrence or a relapse is not considered a primary cancer. In the case of a recurrence or relapse, only indicate the initial diagnosis date. Note that the Succession Claimant will only receive compensation relating to the proven claim entitling the estate of the Tobacco-Victim to the highest compensation.

If you do not recall the exact date of the deceased Tobacco-Victim's diagnosis, please provide the most accurate estimate possible, to facilitate verification in the Claims Process.

If you are unsure of which category your claim falls into, please call the Claims Administrator's Call Center at [Call Centre toll-free number] or send an email to [Claims Administrator's email].

In **Section 2**, you must provide your authorization for the Claims Administrator to obtain medical information concerning the deceased Tobacco-Victim from the sources listed therein for the purpose of confirming the diagnosis and the date of diagnosis of the disease(s) indicated in response to **Question 1**.

To facilitate the process of proving a deceased Tobacco-Victim's diagnosis, the Claims Administrator will request the official records, including from RAMQ, the Ministry of Health and Social Services, the Quebec Cancer Registry and the MED-ÉCHO database.

If an official confirmation of disease/diagnosis cannot be made from these sources, the Claims Administrator will contact you to request that you submit an alternative method of proof. By way of example only, such proof may include:

a copy of a pathology report which confirms that the Tobacco-Victim was diagnosed with Lung Cancer or Throat Cancer, as applicable, before March 12, 2012; a copy of a report of a spirometry test performed on you before March 12, 2012, demonstrating a FEV1 (non-reversible) of less than 50% of the predicted value to establish a diagnosis of Emphysema/COPD (GOLD Grade III or IV); an extract from the Tobacco-Victim's medical records or a written statement of the Tobacco-Victim's Physician. **Do not submit any alternative evidence unless it has been explicitly requested from you by way of a Notice from the Claims Administrator entitled "Notice to Provide Alternative Proof".**

If submitting the Tobacco-Victim's Alternative Proof electronically, please name the PDF document "[Health insurance card number of the deceased Tobacco-Victim]-Alternative Medical Proof.pdf" as applicable.

PART C. Proof of Smoking History

In this section, you must confirm that you have knowledge of the deceased Tobacco-Victim's smoking habits.

In **Section 1**, you must indicate whether the deceased Tobacco-Victim started smoking either (a) before, or (b) on or after, January 1, 1976. The Quebec Courts reduced the tobacco companies' liability by 20% for Tobacco-Victims who started smoking after January 1, 1976. This is because the Courts determined that, by January 1, 1980, the dangers of contracting a disease from smoking were known to the public, and that it would have taken 4 years for an individual to become addicted to smoking. Thus, people who started smoking after January 1, 1976 are deemed to have been aware of the dangers of contracting a disease from smoking (the Courts also determined that the public was deemed to have knowledge as of March 1, 1996 that cigarettes were addictive). Consequently, deceased Tobacco-Victims who started smoking after January 1, 1976 are entitled to compensation to the extent of 80%. These determinations by the Courts are final and cannot be appealed.

Note that in order to be entitled to compensation, the deceased Tobacco-Victim must have smoked 12 pack-years, or 87,600 cigarettes between January 1, 1950 and November 20, 1998.

A pack-year is 7,300 cigarettes, expressed in terms of daily smoking. For example, 12 pack-years equals:

- 20 cigarettes a day for 12 years ($20 \times 365 \times 12 = 87,600$); or
- 30 cigarettes a day for 8 years ($30 \times 365 \times 8 = 87,600$); or
- 10 cigarettes a day for 24 years ($10 \times 365 \times 24 = 87,600$).

It is not necessary for you to calculate the number of pack-years smoked by the Tobacco-Victim, as this calculation will be done by the Claims Administrator when reviewing the Proof of Claim.

If the deceased Tobacco-Victim's smoking history can be easily expressed in terms of number of cigarettes smoked per year, then please fill out the requisite information where indicated in **Section 2(a)**. If the deceased Tobacco-Victim's smoking history cannot be easily expressed in such terms, please provide a summary where indicated in **Section 2(b)** of the deceased Tobacco-Victim's smoking habits between January 1, 1950 and November 20, 1998.

In **Section 3**, please check the boxes for all brands of cigarettes that the deceased Tobacco-Victim smoked on a regular basis between January 1, 1950 and November 20, 1998. The brand choices listed include the "family" of those brands, for example, Players includes Players Light and Players Filter etc. The purpose of providing this information is to confirm that the deceased Tobacco-Victim smoked cigarettes manufactured by the Defendant tobacco companies.

PART D. Proof of Succession Status

The purpose of this section is to provide the required proof of the Succession Claimant's status to assert a Succession Claim.

In response to **Question 1**, indicate whether the Succession Claimant is a liquidator to the estate of the deceased Tobacco-Victim. Mark the first box if you are the liquidator pursuant to a will. Mark the second box if you are a

liquidator pursuant to an appointment by the heirs, in the case of a deceased Tobacco-Victim who did not have a will. Mark the third box if the Succession Claimant is not a liquidator.

Question 2 only needs to be answered if you marked the third box (“No”) in Question 1. Mark the first box if the Succession Claimant is an heir pursuant to a will. Mark the second box if the Succession Claimant is an heir by operation of law (i.e., if the deceased Tobacco-Victim did not have a will). Mark the third box if the Succession Claimant is an heir by representation of an heir who has died. If you are filing the Proof of Claim as an heir by representation, you will need to complete and attach a declaration in respect of the estate of the deceased Tobacco-Victim and a declaration in respect of the estate of the heir whom you represent. If you require assistance, please contact Quebec Class Counsel or Raymond Chabot, so that they can help you make sure that all required documentation is submitted.

You must fill in the Sub-Form required, which is indicated next to the box you marked. Follow the instructions found on that Sub-Form, and include all required supporting documents.

PART E. Payment Method

In this section indicate your preference to receive payment by either cheque or direct deposit of any Compensation Payment for which the deceased Tobacco-Victim may be determined to be eligible.

PART F. Signature

In this section indicate your own name and the date, and add your signature. By signing this form, you are acknowledging that the information submitted is true, and all supporting documents are authentic and have not been altered.

The Claim Form must be signed before a Commissioner for Oaths.

If Quebec Class Counsel are assisting you with your Claim Form, they can arrange for a Commissioner for Oaths to commission your Claim Form prior to submitting it to the Claims Administrator.

If you are not using the assistance of Quebec Class Counsel, you may locate a Commissioner for Oaths at <https://www.assermentation.justice.gouv.qc.ca/ServicesPublicsConsultation/Commissaires/Proximite/Criteres.asp>
[X](#)

CLAIM FORM B
SUCCESSION CLAIM FORM

Part A: Information about the Succession Claimant

Section 1: Succession Claimant and Representative

1. What is the Succession Claimant's full legal name?

Last name: _____

Given name(s): _____

2. What is the Succession Claimant's date of birth (YYYY-MM-DD)?

3. Is the Succession Claimant represented by another party?

☐ Yes ☐ No

4. If you answered "yes" to Question 3:

(a) What is the Succession Claimant's representative's full legal name?

Last name: _____

Given name(s): _____

(b) Pursuant to what type of mandate is the representative acting?

☐ Tutorship to a person of full age

☐ Tutorship to a person of minor age

☐ Curatorship to a person of full age

☐ Mandate in case of incapacity

☐ Detailed Mandate

☐ Power of attorney

A copy of the mandate or power of attorney that the representative of the Succession Claimant is acting pursuant to must be attached and marked with the words "Representative's Mandate" and the name of the deceased Tobacco-Victim.

5. What is the Succession Claimant's mailing address? If a representative is filing the claim, provide the representative's mailing address.

Number _____

Street _____

Apartment _____

City/Town _____

Province _____

Country _____

Postal Code _____

6. What is the Succession Claimant's contact information? If a representative is filing the claim, provide the representative's contact information.

Phone: _____

Fax: _____

Email: _____

7. What language should be used for communication?

☐ English☐ French**Section 2: Deceased Tobacco-Victim Information****1. What is the deceased Tobacco-Victim's full legal name?**

Last name: _____

Given name(s): _____

2. What is the deceased Tobacco-Victim's date of birth (YYYY-MM-DD)?

Date of birth: _____

3. What is the deceased Tobacco-Victim's date of death (YYYY-MM-DD)?

Date of death: _____

4. What is the deceased Tobacco-Victim's health insurance card number?

Health insurance card number: _____

5. Was the Tobacco-Victim alive on November 20, 1998? ☐ Yes ☐ No**6. Between January 1, 1950 and November 20, 1998, did the deceased Tobacco-Victim reside in Quebec?**☐ Yes ☐ No**7. Did the deceased Tobacco-Victim reside in Quebec on the date on which they were diagnosed with primary lung cancer, primary squamous cell carcinoma of the larynx, the oropharynx or the hypopharynx (throat cancer), or Emphysema/COPD (GOLD Grade III or IV)?**☐ Yes ☐ No**8. Did the deceased Tobacco-Victim reside in Quebec on the date of their death?** ☐ Yes ☐ No**9. If you answered "No" to any of Questions 6, 7 and/or 8, during which periods of time was the deceased Tobacco-Victim a resident of Quebec?**

Part B: Proof of Diagnosis**1. Indicate whether the deceased Tobacco-Victim was diagnosed with one or more of the following diseases, and provide the dates of diagnosis, as well as the place in which the Tobacco-Victim resided on the date of diagnosis:**☐ Primary Lung Cancer

Date of diagnosis: _____

Place of residence on date of diagnosis: _____

☐ Primary squamous cell carcinoma of the larynx, oropharynx or hypopharynx (Throat Cancer)

Date of diagnosis:

Place of residence on date of diagnosis: _____

☐ Emphysema/COPD (GOLD Grade III or IV)

Date of diagnosis: _____

Place of residence on date of diagnosis: _____

Reminder: In the case of recurrence or relapse, please indicate the initial date of diagnosis only.

2. Authorization to Confirm Diagnosis

I hereby authorize the Claims Administrator to obtain a copy of the deceased Tobacco-Victim's medical information relating to the diseases/diagnoses referenced above, and I authorize the Ministère de la Santé et des Services sociaux and/or the Régie de l'assurance maladie du Québec to communicate to the Claims Administrator copies of any of the following:

- A confirmation of the deceased Tobacco-Victim's diagnosis from the Quebec Cancer Registry;
- An extract from RAMQ files confirming the deceased Tobacco-Victim's diagnosis; and
- An extract from the MED-ÉCHO database confirming the deceased Tobacco-Victim's diagnosis.

☐ By checking this box, I authorize the deceased Tobacco-Victim's medical information to be released to the Claims Administrator.

If an official confirmation of disease/diagnosis cannot be made through these means, the Claims Administrator will contact you to request the submission of an alternative method of proof. **Do not submit any alternative evidence unless it has been explicitly requested from you by way of a Notice from the Claims Administrator entitled "Notice to Provide Alternative Proof."**

Part C: Proof of Smoking History

I confirm that I have knowledge of the deceased Tobacco-Victim's smoking habits and:

1. That the deceased Tobacco-Victim started smoking cigarettes:

☐ Before January 1, 1976

☐ On or after January 1, 1976

2(a). That between January 1, 1950 and November 20, 1998, the deceased Tobacco-Victim smoked approximately _____ cigarettes per day for approximately _____ years.

[or]

2(b). That the number of cigarettes that the deceased Tobacco-Victim smoked between January 1, 1950 and November 20, 1998 can be summarized as follows:

3. That I believe that the deceased Tobacco-Victim regularly smoked the following brands of cigarettes:

☐ Accord	☐ Craven "M"	☐ Matinee	☐ Rothmans
☐ B&H	☐ du Maurier	☐ Medallion	☐ Vantage
☐ Belmont	☐ Dunhill	☐ More	☐ Viscount
☐ Belvedere	☐ Export	☐ North American Spirit	☐ Winston
☐ Camel	☐ LD	☐ Number 7	
☐ Cameo	☐ Macdonald	☐ Peter Jackson	
☐ Craven "A"	☐ Mark Ten	☐ Players	
☐ Other: _____			

Reminder: The brand choices listed above include all cigarettes in the same brand family. Please check all that apply.

PART D: Proof of Succession Status

1. Are you the liquidator of the deceased Tobacco-Victim's estate? Please select and mark only one of the following options.

☐ Yes, I am the liquidator of the estate of the deceased Tobacco-Victim, appointed pursuant to the will of the deceased Tobacco-Victim.

*If you select this option, please complete and attach **Sub-form B.1**, together with all of the required supporting documents.*

☐ Yes, I am the liquidator of the estate of the deceased Tobacco-Victim, appointed by the legal heirs, as the deceased Tobacco-Victim did not have a valid will.

*If you select this option, please complete and attach **Sub-form B.2**, together with all of the required supporting documents.*

☐ No, I am not a liquidator of the estate of the deceased Tobacco-Victim.

If you select this option, please answer Question 2.

2. Only complete this Question if you answered "No" to the previous question, otherwise, leave blank: Are you an heir of the deceased Tobacco-Victim?

☐ Yes, I am an heir pursuant to the will of a deceased Tobacco-Victim.

*If you select this option, please complete and attach **Sub-form B.3**, together with all of the required supporting documents.*

☐ Yes, I am an heir of the deceased Tobacco-Victim by operation of law.

*If you select this option, please complete and attach **Sub-form B.4**, together with all of the required supporting documents.*

☐ Yes, I am an heir by representation of the deceased Tobacco-Victim who has died.

*If you select this option, please complete and attach either **Sub-form B.3 or B.4**, as applicable in respect of the deceased Tobacco-Victim, together with all of the required supporting documents and provide a similar declaration in respect of the deceased heir that you represent.*

Reminder: *If you require assistance, please contact Quebec Class Counsel or Raymond Chabot, so that they can help you make sure that all required documentation is submitted.*

Part E: Payment Method

1. If the Claims Administrator determines that the Succession Claimant is eligible to receive compensation from the Quebec Administration Plan, I wish to receive payment:

☐ By cheque payable to the Estate of the Tobacco-Victim mailed to the address that I provided in Part A of this Claim Form.

☐ By direct deposit into a bank account in the name of the Tobacco-Victim's Estate. I have attached a "Void" cheque and provided the following information regarding the bank account in the name of the Tobacco-Victim's Estate:

Financial Institution: _____

Branch Address: _____

City: _____

Province: _____

Postal Code: _____

Name on Account: _____

Branch Number: _____

Financial Institution Number: _____

Account Number: _____

Part F: Signature

I, _____, solemnly declare that the information provided herein is true and that the documents submitted in support of this claim are authentic and have not been modified in any way whatsoever.

Signature:

SOLEMNLY AFFIRMED BEFORE ME in

_____ (City),

Quebec, on _____ (Date)

Commissioner for Oaths for Quebec

SUB-FORM B.1:**LIQUIDATOR TO AN ESTATE OF THE DECEASED TOBACCO VICTIM PURSUANT TO A WILL**

In **Section 1**, fill in the blanks, where indicated. If options are listed, please check the box next to the option that is applicable to your situation.

Locate and attach all exhibits referred to in the Declaration. For ease of reference, the exhibits are also listed in **Section 2**.

The Declaration must be signed before a Commissioner for Oaths.

If the Quebec Class Counsel are assisting you with your Declaration, they can arrange for a Commissioner for Oaths to commission your Declaration prior to submitting it to the Claims Administrator.

If you are not using the assistance of Quebec Class Counsel, you may locate a Commissioner for Oaths to commission your Declaration at the following link:

<https://www.assermentation.justice.gouv.qc.ca/ServicesPublicsConsultation/Commissaires/Proximite/Criteres.aspx>.

If submitting your Proof of Claim electronically, please save the Declaration and Exhibits together in one PDF file, and name the document “[Health insurance card number of the deceased Tobacco-Victim]-Declaration of Liquidator.pdf”.

SECTION 1. DECLARATION OF A LIQUIDATOR PURSUANT TO A WILL

I _____ (Name), _____ (Profession), residing and domiciled at _____ (Address), do solemnly affirm the following:

1. I attach hereto the death certificate of _____ (name of deceased Tobacco-Victim), as **Exhibit 1**.

2. I attach hereto the will search of _____ (name of deceased Tobacco-Victim) from the *Chambre des notaires du Québec* as **Exhibit 2**.

3. I attach hereto the will search of _____ (name of deceased Tobacco-Victim) from the Bar of Quebec as **Exhibit 3**.

4. I attach hereto as **Exhibit 4**:

☐ the notarial will

☐ the will and judgment probating the will

pursuant to which I was appointed the liquidator to the estate of _____

(name of deceased Tobacco-Victim).

5. I confirm that I am still acting in the capacity as liquidator to the estate of the _____ (name of deceased Tobacco-Victim) and confirm that I shall receive any compensation due to such estate and distribute such compensation in accordance with the deceased Tobacco-Victim’s instructions in accordance with my duties.

6. All of the facts contained herein are true and all of the documents that I have submitted in support of this claim are authentic and have not been altered in any way.

AND I HAVE SIGNED,

Claimant name:

SOLEMNLY AFFIRMED BEFORE ME in

_____ (City),

Quebec, on _____ (Date)

Commissioner for Oaths for Quebec

SECTION 2. LIST OF EXHIBITS TO ATTACH

- ☐ **Exhibit 1 – Death certificate**
- ☐ **Exhibit 2 – Will search – Chambres des notaires du Québec**
- ☐ **Exhibit 3 – Will search – Barreau du Québec**
- ☐ **Exhibit 4 – The Notarial Will or the Will and judgment probating the Will**

SUB-FORM B.2:**LIQUIDATOR OF THE ESTATE OF A DECEASED TOBACCO- VICTIM,
APPOINTED BY THE HEIRS**

In **Section 1**, fill in the blanks, where indicated. If options are listed, please check the box next to the option that is applicable.

Locate and attach all exhibits referred to in the Declaration. For ease of reference, the exhibits are also listed in **Section 2**.

The Declaration must be signed before a Commissioner for Oaths.

If the Quebec Class Counsel are assisting you with your Declaration, they can arrange for a Commissioner for Oaths to commission your Declaration prior to submitting it to the Claims Administrator.

If you are not using the assistance of Quebec Class Counsel, you may locate a Commissioner for Oaths to commission your Declaration at the following link:

<https://www.assermentation.justice.gouv.qc.ca/ServicesPublicsConsultation/Commissaires/Proximite/Criteres.aspx>.

If submitting your Proof of Claim electronically, please save the Declaration and Exhibits Affidavit together in one PDF file, and name the document “[Health insurance card number of the Deceased Tobacco-Victim]-Declaration of Liquidator.pdf”.

SECTION 1. DECLARATION OF A LIQUIDATOR OF THE ESTATE OF A DECEASED TOBACCO-VICTIM, APPOINTED BY THE HEIRS

I _____ (Name), _____ (Profession), residing and domiciled at _____ (Address), do solemnly affirm the following:

1. I attach hereto the death certificate of _____ (name of deceased Tobacco-Victim), as **Exhibit 1**.
2. I attach hereto the will search of _____ (name of deceased Tobacco-Victim) from the *Chambre des notaires du Québec* as **Exhibit 2**.
3. I attach hereto the will search of _____ (name of deceased Tobacco-Victim) from the Bar of Quebec as **Exhibit 3**.
4. As appears from Exhibit 2 and Exhibit 3, there are no registered wills in the name of _____ (name of deceased Tobacco-Victim), and I do not believe that the deceased had a will.
5. I am the _____ (relationship) of the _____ (name of deceased Tobacco-Victim).
6. On _____ (date), I was appointed by the legal heirs of _____ (name of deceased Tobacco-Victim) to act as liquidator to the estate of _____ (name of deceased Tobacco-Victim), as appears from the following document, which is attached hereto as **Exhibit 4**:

☐ copy of a notarial deed

☐ a private writing

☐ any other document, as applicable.

7. I confirm that I am still acting in the capacity as liquidator to the estate of _____ (name of deceased Tobacco-Victim) and confirm that I shall receive any compensation due to such estate and distribute such compensation in accordance with the law in accordance with my duties as liquidator.
8. All of the facts contained herein are true and all of the documents that I have submitted in support of this claim are authentic and have not been altered in any way.

AND I HAVE SIGNED,

Claimant name:

SOLEMNLY AFFIRMED BEFORE ME in

_____ (City),

Quebec, on _____ (Date)

Commissioner for Oaths for Quebec

SECTION 2. LIST OF EXHIBITS TO ATTACH

☐ **Exhibit 1 – Death certificate**

☐ **Exhibit 2 – Will search – Chambres des notaires du Québec**

☐ **Exhibit 3 – Will search – Barreau du Québec**

☐ **Exhibit 4 – Copy of the Notarial Deed or Private Writing, or another document**

SUB-FORM B.3

HEIR OF THE ESTATE OF A DECEASED TOBACCO- VICTIM PURSUANT TO A WILL OR TESTAMENTARY CLAUSE IN A MARRIAGE CONTRACT

In **Section 1**, fill in the blanks, where indicated. If options are listed, please check the box next to the option that is applicable.

Locate and attach all exhibits referred to in the Declaration. For ease of reference, the exhibits are also listed in **Section 2**.

The Declaration must be signed before a Commissioner for Oaths.

If the Quebec Class Counsel are assisting you with your Declaration, they can arrange for a Commissioner for Oaths to commission your Declaration prior to submitting it to the Claims Administrator.

If you are not using the assistance of Quebec Class Counsel, you may locate a Commissioner for Oaths to commission your Declaration at the following link:

<https://www.assermentation.justice.gouv.qc.ca/ServicesPublicsConsultation/Commissaires/Proximite/Criteres.aspx>.

If submitting your Proof of Claim electronically, please save the Declaration and Exhibits Affidavit together in one PDF file, and name the document “[Health insurance card number of the deceased Tobacco-Victim]-Declaration of Heir.pdf”.

SECTION 1. DECLARATION OF A TESTAMENTARY HEIR

I _____ (Name), _____ (Profession), residing and domiciled at _____ (Address), do solemnly affirm the following:

1. I attach hereto the death certificate of _____ (name of deceased tobacco-victim), as **Exhibit 1**.
2. I attach hereto the will search of _____ (name of deceased tobacco-victim) from the *Chambre des notaires* as **Exhibit 2**.
3. I attach hereto the will search of _____ (name of deceased tobacco-victim) from the Bar of Quebec as **Exhibit 3**.
4. I attach hereto as **Exhibit 4** the

☐ notarial will
☐ the registered marriage contract
☐ the will and judgment probating the will

of the deceased tobacco-victim.

5. As appears from Exhibit 4, I was named:

☐ An heir to the estate of _____ (name of deceased tobacco-victim);

☐ A particular legatee entitled to receive compensation from the class action.

6. All assets of the estate were distributed on or around _____ (date)
and there is presently no liquidator to the estate, as appears from _____
(name of documentary evidence) attached hereto as **Exhibit 5**.

7. I am:

☐ the sole heir

☐ one of several heirs

to the estate of the _____ (name of deceased tobacco-victim).

8. If there are other heirs pursuant to the will or marriage contract entitled to receive compensation from the class action, I am attaching a list of their names and contact information in **Exhibit 6**.
9. All of the facts contained herein are true and all of the documents that I have submitted in support of this claim are authentic and have not been altered in any way.

AND I HAVE SIGNED

Claimant name:

SOLEMNLY AFFIRMED BEFORE ME in

_____ (City),

Quebec, on _____ (Date)

Commissioner for Oaths for Quebec

SECTION 2. LIST OF EXHIBITS TO ATTACH

- ☐ **Exhibit 1 – Death certificate**
- ☐ **Exhibit 2 – Will search – Chambres des notaires du Québec**
- ☐ **Exhibit 3 – Will search – Barreau du Québec**
- ☐ **Exhibit 4 – The Notarial Will, registered marriage contract or the Will and judgment probating the Will**
- ☐ **Exhibit 5 – Any document evidencing the absence of a liquidator to the Estate**
- ☐ **Exhibit 6 – A list of any other testamentary heirs, including their name, address, email address and telephone number**

SUB-FORM B.4:**HEIR OF THE ESTATE OF A DECEASED TOBACCO- VICTIM
BY OPERATION OF LAW**

For **Section 1**, fill in the blanks, where indicated. This document must be printed and signed before a Commissioner of Oaths.

Locate and attach all exhibits referred to in the Declaration. For ease of reference, the exhibits are also listed in **Section 2**.

The Declaration must be signed before a Commissioner for Oaths.

If the Quebec Class Counsel are assisting you with your Declaration, they can arrange for a Commissioner for Oaths to commission your Declaration prior to submitting it to the Claims Administrator.

If you are not using the assistance of Quebec Class Counsel, you may locate a Commissioner for Oaths to commission your Declaration at the following link:

<https://www.assermentation.justice.gouv.qc.ca/ServicesPublicsConsultation/Commissaires/Proximite/Criteres.aspx>.

If submitting your Proof of Claim electronically, please save the Declaration and Exhibits Affidavit together in one PDF file, and name the document “[Health insurance card number of the deceased Tobacco-Victim]-Declaration of Heir.pdf”.

SECTION 1. DECLARATION OF A LEGAL HEIR OF THE ESTATE OF A DECEASED TOBACCO-VICTIM

I _____ (Name), _____
(Profession), residing and domiciled at _____ (Address),
do solemnly affirm the following:

1. I attach hereto the death certificate of _____ (Name of deceased tobacco-victim), as **Exhibit 1**.
2. I attach hereto the will search of _____ (Name of deceased Tobacco-Victim) from the *Chambre des notaires du Québec* as **Exhibit 2**.
3. I attach hereto the will search of _____ (Name of deceased Tobacco-Victim) from the Bar of Quebec as **Exhibit 3**.
4. As appears from Exhibit 2 and Exhibit 3, there are no registered wills in the name of the _____ (Name of deceased Tobacco-Victim), and I do not believe that the deceased had a will.
5. I am the _____ (relationship) of the _____ (Name of deceased Tobacco-Victim).
6. I attach a list of all of _____ (Name of deceased Tobacco-Victim) other living heirs, including, as applicable, the deceased Tobacco-Victim’s spouse, children, parents, siblings, nieces and nephews, as **Exhibit 4**.
7. All of the facts contained herein are true and all of the documents that I have submitted in support of this claim are authentic and have not been altered in any way.

AND I HAVE SIGNED

Claimant name:
SOLEMNLY AFFIRMED BEFORE ME in

 (City),

 Quebec, on

 (Date)

 Commissioner for Oaths for Quebec
SECTION 2. LIST OF EXHIBITS TO ATTACH

- ☐ **Exhibit 1 – Death certificate**
- ☐ **Exhibit 2 – Will search – Chambres des notaires du Québec**
- ☐ **Exhibit 3 – Will search – Barreau du Québec**
- ☐ **Exhibit 4 – List of the names and contact information (for living heirs) of the deceased Tobacco-Victim's other living heirs, including, as applicable, the deceased Tobacco-Victim's spouse, children, parents, siblings, nieces and nephews**

APPENDIX “F”

Quebec Class Action Administration Plan

Rules for Legal Successions in the *Civil Code of Quebec*
(in the absence of a will)

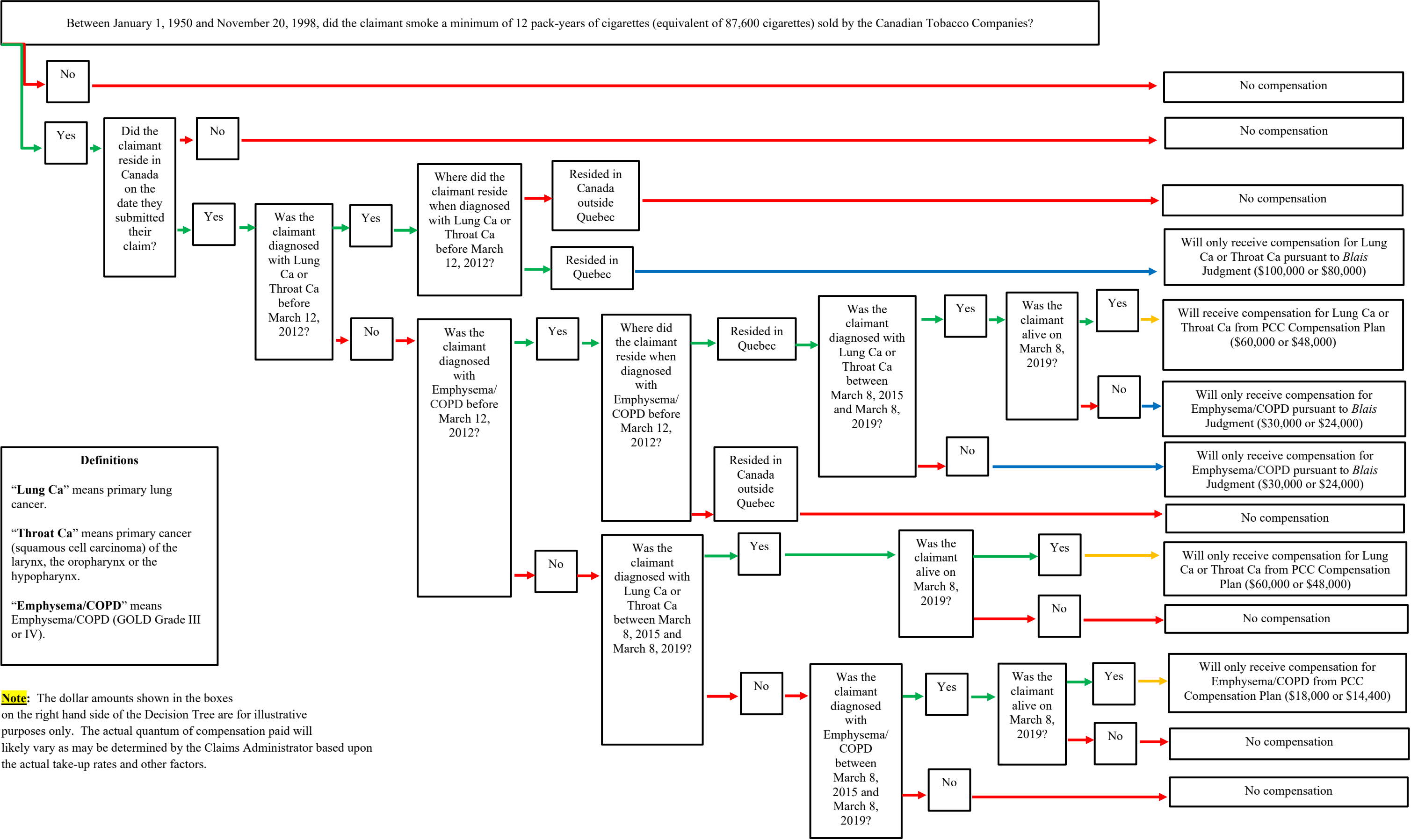
Relationship to the Deceased				
Children, or their representatives	Surviving spouse	Parents, or one of them	Siblings, or their representatives	Nieces and nephews
Everything				
2/3	1/3			
	Everything			
	2/3	1/3		
	2/3		1/3	
		Everything		
		1/2	1/2	
			Everything	
	2/3			1/3
		1/2		1/2
				Everything

Legend:

	These relatives exist and are entitled to the specified portion of the succession.

	No such successors exist.

	These relatives are excluded from the succession given that other successors take priority over them



APPENDIX “H”

Quebec Class Action Administration Plan

ACKNOWLEDGMENT OF RECEIPT OF *BLAIS* CLAIM

[on Claims Administrator’s Letterhead]

BY [METHOD OF COMMUNICATION]

Claimant’s Name

Claim Number

Claimant’s Address

Dear [Full name of Tobacco-Victim Claimant / Succession Claimant or representative],

This Acknowledgment of Receipt of Claim is your record that your claim in the Quebec tobacco class action has been received by the Claims Administrator.

Your claim number is: [insert claim number].

Your Proof of Claim will be reviewed as quickly as possible to determine if you are entitled to a Compensation Payment.

If your Claim Form is incomplete, or if any further documents are needed, you will receive a subsequent Notice detailing any further action required on your part.

You will be notified in writing once a decision has been made in respect of your claim.

If you have questions in respect of the Claims Process, including the status of your claim, under the Quebec Administration Plan, please consult the Claims Administrator’s website at [\[URL for website of Claims Administrator\]](#) or call the Claims Administrator’s Call Center at [\[Call Centre toll-free number\]](#) or send an email to [\[Claims Administrator’s email\]](#).

You may contact the Quebec Class Counsel through the Quebec Class Action Call Centre at 1-888-880-1844 or send an email to tabac@tjl.quebec or visit the Quebec Tobacco Class Action website at www.recourstabac.com.

[Place], this ● day of ●, 202●

Claims Administrator

APPENDIX “I”

Quebec Class Action Administration Plan

PROOF OF CLAIM REVIEW CHECKLIST FOR TOBACCO-VICTIM CLAIMS

PART 1. REVIEW OF TOBACCO-VICTIM CLAIM FORM

PART A OF TOBACCO-VICTIM CLAIM FORM: Information about the Tobacco-Victim

1. The Tobacco-Victim Claimant is a:
 - ☐ Tobacco-Victim
 - ☐ Representative of a Tobacco-Victim
2. If the Tobacco-Victim Claimant is a Representative of the Tobacco-Victim, the Tobacco-Victim Claimant has provided proof of a:
 - ☐ Mandate in case of incapacity
 - ☐ Detailed mandate
 - ☐ Power of attorney
 - ☐ Tutorship to a person of full age
 - ☐ Curatorship to a person of full age
3. The document provided in response to Question 2 shows that the Tobacco-Victim Claimant is a representative of the Tobacco-Victim:
 - ☐ Yes
 - ☐ No

If “No”, issue a **Notice of Rejection of *Blais* Claim** or a **Notice of Incomplete *Blais* Claim** or, alternatively, contact the Tobacco-Victim Claimant if the deficiency appears easily correctable.

4. The Tobacco-Victim meets the residency criteria [i.e. the Tobacco-Victim (i) if alive, resides in Quebec or, if deceased, resided in Quebec on the date of their death; (ii) was alive on November 20, 1998; and (iii) on the date of the diagnosis with a *Blais* Compensable Disease resided in Quebec]:
 - ☐ Yes
 - ☐ No
 - ☐ Further assessment required

If “No”, issue a **Notice of Rejection of *Blais* Claim**. If “Further assessment is required”, contact the Tobacco-Victim Claimant for more information.

If “Yes” proceed to confirm the Tobacco-Related Disease.

PART B OF TOBACCO-VICTIM CLAIM FORM: Proof of Diagnosis of the Tobacco-Victim’s Tobacco-Related Disease

5. The Tobacco-Victim’s Claim relates to the following disease(s) with a date(s) of initial diagnosis of:

- ☐ Primary Lung Cancer:
Date of Diagnosis: _____
- ☐ Primary squamous cell carcinoma of the larynx, oropharynx or hypopharynx (Throat Cancer):
Date of Diagnosis: _____
- ☐ Emphysema/COPD (GOLD Grade III or IV):
Date of Diagnosis: _____

If more than one Tobacco-Victim Claim in respect of each disease is asserted, indicate the number of Tobacco-Victim Claims in the space provided.

If any of this information is not provided, issue a **Notice of Incomplete *Blais* Claim** or, alternatively, contact the Tobacco-Victim Claimant if the deficiency appears easily correctable.

6. The Claimant has authorized the Claims Administrator to obtain an Official Confirmation to confirm the Diagnosis?

- ☐ Yes
- ☐ No

If “No”, issue a **Notice of Incomplete *Blais* Claim**.

7. Has the Claims Administrator obtained an Official Confirmation or has the Claimant filed Alternative Cancer Proof or Alternative Emphysema/COPD (GOLD Grade III or IV) Proof?

- ☐ Yes
- ☐ No

If “No”, issue a **Notice of Incomplete *Blais* Claim**.

If “Yes” verify the Proof of Diagnosis.

8. Is the date of diagnosis in respect of at least one of the diagnoses prior to March 12, 2012?

☐ Yes

☐ No

If “No”, issue a **Notice of Rejection of *Blais* Claim**.

If “Yes” proceed to confirm Proof of Smoking History.

Official Confirmation should only be sought in respect of diseases for which the date of diagnosis is prior to March 12, 2012.

PART C OF TOBACCO-VICTIM CLAIM FORM: Proof of Smoking History

9. Pack-year calculation between January 1, 1950 and November 20, 1998:

10. The Tobacco-Victim smoked at least 12 pack-years between January 1, 1950 and November 20, 1998:

☐ Yes

☐ No

11. The Tobacco-Victim regularly smoked the Tobacco Companies’ products:

☐ Yes

☐ No

If “No” to Questions 10 or 11, issue a **Notice of Rejection of *Blais* Claim**. If any information is missing, issue a **Notice of Incomplete *Blais* Claim** or, alternatively, contact the Claimant if the deficiency appears easily correctable.

If “Yes”, to Questions 10 and 11, proceed with Diagnosis Confirmation in Part 2 in below.

PART 2. DIAGNOSIS CONFIRMATION

12. The Diagnosis (disease(s) and date(s) of diagnosis) has been confirmed by the Official Confirmation:

☐ Yes

☐ No

If “No”, issue a **Notice to Provide Alternative Proof**.

13. The Claimant has submitted Alternative Proof:

☐ Yes

☐ No

If “No”, issue a **Notice of Rejection of *Blais* Claim**.

14. If “Yes”, does the Alternative Proof confirm the Diagnosis:

☐ Yes

☐ No

If “No”, issue a **Notice of Rejection of *Blais* Claim**.

15. The date of diagnosis in respect of at least one diagnosis is prior to March 12, 2012 as confirmed by the Official Confirmation or the Alternative Proof:

☐ Yes

☐ No

If “No”, issue a **Notice of Rejection of *Blais* Claim**.

If “Yes”, proceed to establish the Claim Amount in Part 3 below.

PART 3. AMOUNT OF COMPENSATION PAYMENT

16. The Claimant is entitled to compensation for a:

☐ Lung or Throat Cancer Claim

☐ Emphysema/COPD (GOLD Grade III or IV) Claim

17. The Tobacco-Victim started smoking before January 1, 1976:

☐ Yes

☐ No

18. Is the maximum amount of the Compensation Payment reduced by 20% because

the Tobacco-Victim started smoking on or after January 1, 1976?

☐ Yes

☐ No

19. The maximum net Compensation Payment (subject to possible reduction for pro-ration) is: _____

Issue a **Notice of Acceptance of *Blais* Claim** indicating the Compensation Payment.

APPENDIX “J”

Quebec Class Action Administration Plan

PROOF OF CLAIM REVIEW CHECKLIST FOR SUCCESSION CLAIMS

PART 1. REVIEW OF SUCCESSION CLAIM FORM

PART A OF SUCCESSION CLAIM FORM: Information about the Succession Claimant

1. The Succession Claimant is a:
 - ☐ Liquidator of the Estate of the deceased Tobacco-Victim
 - ☐ An Heir of the deceased Tobacco-Victim
 - ☐ A representative of a Succession Claimant
2. If the Claimant is a representative of the Succession Claimant, the Succession Claimant has provided proof of a:
 - ☐ Mandate in case of incapacity
 - ☐ Detailed mandate
 - ☐ Power of attorney
 - ☐ Tutorship to person of full age
 - ☐ Curatorship to a person of full age
 - ☐ Tutorship to a person of minor age
3. The document provided in response to Question 2 shows that the Claimant is a representative of the Succession Claimant:
 - ☐ Yes
 - ☐ No

If “No”, issue a **Notice of Rejection of *Blais* Claim** or a **Notice of Incomplete *Blais* Claim** or, alternatively, contact the Succession Claimant if the deficiency appears easily correctable.
4. The Tobacco-Victim meets the residency criteria [i.e. the Tobacco-Victim (i) if alive, resides in Quebec or, if deceased, resided in Quebec on the date of their death; (ii) was alive on November 20, 1998; and (iii) on the date of the diagnosis with a *Blais* Compensable Disease resided in Quebec]:

- ☐ Yes
- ☐ No
- ☐ Further assessment required

If “No”, issue a **Notice of Rejection of *Blais* Claim**. If “Further assessment is required”, contact the Claimant for more information.

If “Yes” proceed to confirm the Tobacco-Related Disease.

PART B OF SUCCESSION CLAIM FORM: Proof of Diagnosis of the Tobacco-Victim’s Tobacco-Related Disease

5. The Tobacco-Victim’s Claim relates to one of the following disease(s) with a date(s) of initial diagnosis of:

- ☐ Primary Lung Cancer;
Date of Diagnosis: _____
- ☐ Primary squamous cell carcinoma of the larynx, oropharynx or hypopharynx (Throat Cancer);
Date of Diagnosis: _____
- ☐ Emphysema/ COPD (GOLD Grade III or IV);
Date of Diagnosis: _____

If more than one Claim in respect of each disease is asserted, indicate the number of Claims in the space provided. If any of this information is not provided, issue a **Notice of Incomplete *Blais* Claim** or, alternatively, contact the Claimant if the deficiency appears easily correctable.

6. Has the Claimant authorized the Claims Administrator to obtain an Official Confirmation to confirm the Diagnosis:

- ☐ Yes
- ☐ No

If “No”, issue a **Notice of Incomplete *Blais* Claim**.

7. Has the Claims Administrator obtained an Official Confirmation or has the Claimant filed Alternative Cancer Proof or Alternative Emphysema/COPD (GOLD Grade III or IV) Proof?

- ☐ Yes
- ☐ No

If “No”, issue a **Notice of Incomplete *Blais* Claim**.

If “Yes” verify the Proof of Diagnosis.

8. Is the date of diagnosis in respect of at least one diagnosis prior to March 12, 2012?

☐ Yes

☐ No

If “No”, issue a **Notice of Rejection of *Blais* Claim**.

If “Yes” proceed to confirm Proof of Smoking History.

Official confirmation should only be sought in respect of diseases for which the date of diagnosis is prior to March 12, 2012.

PART C OF SUCCESSION CLAIM FORM: Proof of Smoking History

9. Pack-year calculation between January 1, 1950 and November 20, 1998:

10. The Deceased Tobacco-Victim smoked at least 12 pack-years between January 1, 1950 and November 20, 1998:

☐ Yes

☐ No

11. The Deceased Tobacco-Victim regularly smoked the Defendants’ products:

☐ Yes

☐ No

If “No” to Questions 10 or 11, issue a **Notice of Rejection of *Blais* Claim**. If any information is missing, issue a **Notice of Incomplete *Blais* Claim** or, alternatively, contact the Claimant if the deficiency appears easily correctable.

If “Yes”, to Questions 10 and 11, proceed to confirm Proof of Succession Status.

PART D OF SUCCESSION CLAIM FORM: Proof of Succession Status

12. The Succession Claimant is:

- ☐ The liquidator to the estate of the deceased Tobacco-Victim
- ☐ An heir to the estate of the deceased Tobacco-Victim
- ☐ An heir by representation

13. Has the correct sub-form together with all of the appropriate supporting documents been submitted?

- ☐ Yes
- ☐ No

If “No”, issue a **Notice of Incomplete *Blais* Claim** or, alternatively, contact the Succession Claimant if the deficiency appears easily correctable.

14. If yes, do the documents submitted confirm that the status of the Succession Claimant as liquidator or heir, as the case may be:

- ☐ Yes
- ☐ No
- ☐ Further assessment required

If “No”, issue a **Notice of Rejection of *Blais* Claim**. If further assessment is required, issue a **Notice of Incomplete *Blais* Claim** or, alternatively, contact the Succession Claimant for additional information.

If “Yes”, proceed with Diagnosis Confirmation in Part 2 in below.

PART 2. DIAGNOSIS CONFIRMATION

15. The Diagnosis (disease(s) and date(s) of initial diagnosis) has been confirmed by the Official Confirmation:

- ☐ Yes
- ☐ No

If “No”, issue a **Notice to Provide Alternative Proof**.

16. The Succession Claimant has submitted Alternative Proof:

- ☐ Yes
- ☐ No

If “No”, issue a **Notice of Rejection of *Blais* Claim**.

17. If “Yes”, the Alternative Proof, does the Alternative Proof confirm the Diagnosis:

☐ Yes

☐ No

If “No”, issue a **Notice of Rejection of *Blais* Claim**.

18. The date of diagnosis in respect of at least one diagnosis being prior to March 12, 2012 is confirmed by the Official Confirmation or the Alternative Proof:

☐ Yes

☐ No

If “No”, issue a **Notice of Rejection of *Blais* Claim**.

If “Yes”, proceed to establish the Claim Amount in Part 3 below.

PART 3. CLAIM AMOUNT

19. The Succession Claimant is entitled to compensation for a:

☐ Lung or Throat Cancer Claim

☐ Emphysema/COPD (GOLD Grade III or IV) Claim

20. The Tobacco-Victim started smoking before January 1, 1976:

☐ Yes

☐ No

21. Is the maximum amount of the Compensation Payment reduced by 20% because the Tobacco-Victim started smoking on or after January 1, 1976?

☐ Yes

☐ No

22. The maximum net Compensation Payment (subject to possible reduction for pro-ration) is: ____

23. If the Succession Claimant is an Heir, do the Supporting Documents submitted disclose any other heirs entitled to a share of the compensation?

☐ Yes

☐ No

☐ Further assessment required.

24. If “Yes” what is the distribution of the Net Claim Amount amongst all disclosed

Heirs?

☐ _____

Issue a **Notice of Acceptance of *Blais* Claim** indicating the Net Claim Amount. If the Claimant is an Heir, and the compensation allocation was determined above, this information should be included on the Notice.

PART 4 – MULTIPLE HEIR CLAIMS: In respect of Succession Claims filed by Heirs only:

25. Was the Claim filed by or on behalf of an Heir or an Heir by Representation?

☐ Yes

☐ No

26. If “Yes” to question 25, by the *Blais* Claims Application Deadline, were any other Claims filed by a Succession Claimant in respect of the same deceased Tobacco-Victim?

☐ Yes

☐ No

27. If “No” to question 25, are there other indicia (including in the Supporting Documents) that would suggest that the Succession Claimant is not the sole Heir entitled to compensation?

☐ Yes

☐ No

If “no”, the Notice of Acceptance should indicate that payment of compensation shall be made to the sole disclosed Heir.

28. If the answer to either question 26 or 27 is “Yes”, can the Quebec Administrator easily determine how the compensation shall be split amongst the Heirs?

☐ Yes

☐ No

If “yes”, the Quebec Administrator shall indicate on the Notice of Acceptance how the compensation will be split amongst the Heirs. If no, the Notice of Acceptance shall indicate that the compensation shall be paid in the name of the estate of the deceased Tobacco-Victim.

APPENDIX “K”

Quebec Class Action Administration Plan**NOTICE OF INCOMPLETE *BLAIS* CLAIM**

[on Claims Administrator’s Letterhead]

BY [METHOD OF COMMUNICATION]

Claimant’s Name

Claim Number

Claimant’s Address

Dear [Full name of Tobacco-Victim Claimant / Succession Claimant or representative],

By way of the present Notice, we hereby advise you that your claim [claim number] in respect of [your/ the Tobacco-Victim’s name] diagnosis of [lung cancer/throat cancer/Emphysema/COPD (GOLD Grade III or IV)] is incomplete for the following reason(s): [chose appropriate reason(s) from the list below, or insert others]

- ☐ You have not completed section [insert appropriate section] of the [Tobacco-Victim or Succession] Claim Form.
- ☐ You have not provided your/[insert Tobacco-Victim’s name]’s health insurance card number.
- ☐ You have not provided complete Proof of Succession status i.e. you have not provided the following supporting document(s) required to be submitted by a Succession Claimant:
 - ☐ XX
 - ☐ XX
- ☐ You have filed the Claim as a Representative of the Tobacco-Victim Claimant/Succession Claimant, but you not provided supporting document(s) proving you are the Representative of the Tobacco-Victim Claimant/Succession Claimant:
 - ☐ XX
 - ☐ XX
- ☐ You have not provided the supporting document(s) required of the representative of the heir of a Tobacco-Victim:

- XX
- XX
- ☐ You have not authorized the Claims Administrator to confirm your/the Tobacco-Victim's diagnosis of disease(s) and/or date(s) of diagnosis with the Ministère de la Santé et des Services sociaux and the Régie de l'assurance maladie du Québec.
- ☐ You have not signed the Claim Form.

You must refile your revised and completed Proof of Claim [at any time prior to [date], the *Blais* Claims Application Deadline for filing claims in this Claims Process / by no later than sixty (60) days from the date of this Notice of Incomplete *Blais* Claim.]

If you do not submit a completed Proof of Claim by this deadline, your claim will be rejected without further notice.

Your revised and completed Proof of Claim must be sent to the Claims Administrator either by:

- Electronically via the website at: [URL for website of Claims Administrator];
- Email to: [insert Claims Administrator's email address];
- Fax to: [insert Claims Administrator's fax number]; OR
- Registered mail to the following address: [insert Claims Administrator's address];

You cannot submit your revised and completed Proof of Claim by hand delivery or by regular mail and you must keep a record of transmission until you receive a written Acknowledgment of Receipt of Claim from the Claims Administrator.

If you have questions in respect of the Claims Process, including the status of your claim, under the Quebec Administration Plan, please consult the Claims Administrator's website at [\[URL for website of Claims Administrator\]](#) or call the Claims Administrator's Call Center at [\[Call Centre toll-free number\]](#) or send an email to [\[Claims Administrator's email\]](#).

If you require any assistance to prepare your response to this Notice of Incomplete *Blais* Claim, please call the Quebec Class Action Call Centre at 1-888-880-1844 or send an email to tabac@tjl.quebec or visit the Quebec Tobacco Class Action website at www.recourstabac.com

[Place], this ● day of ●, 202●

Claims Administrator

APPENDIX “L”

Quebec Class Action Administration Plan**NOTICE OF ACCEPTANCE OF *BLAIS* CLAIM**

[on Claims Administrator’s Letterhead]

BY [METHOD OF COMMUNICATION]

Claimant’s Name

Claim Number

Claimant’s Address

Dear [Full name of Tobacco-Victim Claimant / Succession Claimant or representative],

We are pleased to advise you that your claim [claim number] in respect of [your/ the Tobacco-Victim’s name] diagnosis of [lung cancer/throat cancer/Emphysema/COPD (GOLD Grade III or IV)] has been accepted.

In accordance with the terms of the Quebec Administration Plan, the Claims Administrator has determined that the maximum amount of the Compensation Payment for which [you/Tobacco-Victim’s name] are eligible is \$_____.

[If applicable: Although you have proven claims in respect of more than one tobacco-related disease, your Compensation Payment has been determined based on the claim that entitles you to the highest amount of compensation under the Quebec Administration Plan.]

Please note that the Compensation Payment that will be paid to you may be less than the amount of the Compensation Payment indicated above. Compensation will be determined on a *pro rata* basis between all Class Members based on the number of Claims and the amount available for distribution to Class Members. The actual quantum of the Compensation Payment that will be paid to the Tobacco-Victim Claimant or Succession Claimant will be determined after all claims have been received, reviewed and processed by the Claims Administrator. It is anticipated that the distribution of Compensation Payments to Class Members will begin after [insert *Blais* Claims Application Deadline].

[If applicable: Your claim was filed as an Heir of the deceased Tobacco-Victim. Based on your declaration and the supporting documents submitted, the Claims Administrator has determined that the compensation owing in respect of the claim shall be allocated and paid to the following Heirs in the following proportions:

- [Name of Heir] – X%
-]

[or]

Your claim was filed as an Heir of the deceased Tobacco-Victim. Although the claim has been accepted, the Claims Administrator was unable to determine the allocation of compensation amongst the deceased Tobacco-Victim's Heirs. The compensation shall, therefore, be paid in the name of the estate of the deceased Tobacco-Victim.]

Your payment will be made to you by a cheque that will be mailed to the address that you provided on your [Tobacco-Victim Claim Form / Succession Claim Form], or direct deposit into the bank account which you identified on your [Tobacco-Victim Claim Form / Succession Claim Form].

If you have any questions, or require any further information, please contact our Call Center by telephone at [Call Centre toll-free number], or send an email to [Claims Administrator's email address] or visit the Claims Administrator's website [URL for website of Claims Administrator].

[Place], this • day of •, 202•

Claims Administrator

APPENDIX “M”

Quebec Class Action Administration Plan

REQUEST FOR REVIEW FORM

REQUEST FOR REVIEW – GENERAL INFORMATION

If you have received a Notice of Rejection of Claim, you are entitled to seek review of the Claims Administrator’s decision by the Review Officer.

To have your claim reviewed, you must file your Request for Review Form within sixty (60) days from the date of that the Claims Administrator issues the Notice of Rejection of *Blais* Claim.

Your Request for Review Form may only be submitted:

- Electronically via the website at [\[URL for website of Claims Administrator\]](#);
- By email to: [\[insert Claims Administrator’s email address\]](#);
- By fax to: [\[insert Claims Administrator’s fax number\]](#); or
- By registered mail to the following address: [\[insert Claims Administrator’s address\]](#);

A Request for Review cannot be hand delivered or sent by regular mail. You must keep a record of transmission of your Request for Review Form, until receiving an Acknowledgment of Receipt of the Request for Review in writing from the Claims Administrator.

All decisions of the Review Office rendered on Requests for Review are final, binding and cannot be appealed to any Court or other forum or tribunal.

If you have questions in respect of the Claims Process, including the status of your claim, under the Quebec Administration Plan, please consult the Claims Administrator’s website at [\[URL for website of Claims Administrator\]](#) or call the Claims Administrator’s Call Center at [\[Call Centre toll-free number\]](#) or send an email to [\[Claims Administrator’s email\]](#).

If you require any assistance to complete the Request for Review Form, please call the Quebec Class Action Call Centre at 1-888-880-1844 or send an email to tabac@tjl.quebec or visit the Quebec Tobacco Class Action website at www.recourstabac.com.

REQUEST FOR REVIEW

This Request for Review is required to be completed by the Tobacco-Victim Claimant, the Succession Claimant or their representative if they wish to have the Review Officer review the decision of the Claims Administrator to reject their Tobacco-Victim Claim or Succession Claim, as applicable, for compensation from the Quebec Class Action Administration Plan.

If you require any assistance to complete the Request for Review Form, please call the Quebec Class Action Call Centre at 1-888-880-1844 or send an email to tabac@til.quebec or visit the Quebec Tobacco Class Action website at www.recourstabac.com.

Deadline to submit your completed Request for Review: This Request for Review and any supporting documents must be submitted to the Claims Administrator by no later than 5:00 p.m. Eastern Time sixty days from the date of the Notice of Rejection of *Blais* Claim which you received from the Claims Administrator.

SUBMIT YOUR REQUEST FOR REVIEW BY REGISTERED MAIL: Your Request for Review must be postmarked no later than sixty days from the date of the Notice of Rejection of Claim which you received from the Claims Administrator and mailed to: [Address of Claims Administrator].

OR

SUBMIT YOUR REQUEST FOR REVIEW ONLINE: Your Request for Review must be submitted online and all documents must be uploaded online at [URL for website of Claims Administrator] by no later than 5:00 p.m. Eastern Time sixty days from the date of the Notice of Rejection of Claim which you received from the Claims Administrator.

OR

SUBMIT YOUR REQUEST FOR REVIEW BY EMAIL: Your Request for Review and any supporting documents must be emailed to the Claims Administrator to [Email address of Claims Administrator] by no later than 5:00 p.m. Eastern Time sixty days from the date of the Notice of Rejection of Claim which you received from the Claims Administrator.

OR

SUBMIT YOUR REQUEST FOR REVIEW BY FAX: Your Request to Review must be faxed to the Claims Administrator to [Fax Number of Claims Administrator] by no later than 5:00 p.m. Eastern Time sixty days from the date of the Notice of Rejection of Claim which you received from the Claims Administrator.

Section I: Name and Claim Number of Tobacco-Victim Claimant or Succession Claimant	
Claim Number:	
Full Name of Tobacco-Victim Claimant or Succession Claimant (First Name, Middle Name and Last Name):	
Full Name of representative of Tobacco-Victim Claimant or Succession Claimant (First Name, Middle Name and Last Name), if applicable:	
Section II: Claims Administrator's Decision	
Date of Notice of Rejection of Claim:	
Reason provided on the Notice of Rejection of Claim for the Claim being rejected:	
Section III: Statement of Tobacco-Victim Claimant or Succession Claimant, as applicable, regarding Error alleged to have been made by Claims Administrator in determining the Tobacco-Victim Claim or Succession Claim	
The Claims Administrator made the following error(s) in the review of the Tobacco-Victim Claim or Succession Claim: Note: You must explain why you believe that the	

Claims Administrator made an error in rejecting the Claim. You may submit any document which you believe proves that an error was made.	

Section IV: Certification

I certify that the information provided on the Request to Review is true and correct. Where someone has helped me with this Request to Review, or where an interpreter was used, that person has read to me everything they wrote and included with this Request to Review, if necessary to allow me to understand the content of this completed Request to Review and any attachments to it, and I confirm that this information is true and correct.

I am not making any false or exaggerated Claims to obtain compensation that I (the Tobacco-Victim Claimant, or Succession Claimant), is not entitled to receive.

Date signed

Signature of Tobacco-Victim Claimant /
Succession Claimant

Section V: Interpreter Information (only complete this Section if it is applicable).

Full Name (First Name, Middle Name and Last Name):	
Mailing Address:	
Unit/Apartment Number:	
Town/City/Municipality:	

Province/Territory	
Postal Code:	
Occupation:	
Business Phone:	
Email:	

APPENDIX “N”

Quebec Class Action Administration Plan

ACKNOWLEDGMENT OF RECEIPT OF REQUEST FOR REVIEW

[on Claims Administrator’s Letterhead]

BY [METHOD OF COMMUNICATION]

Claimant’s Name
 Claim Number
 Claimant’s Address

Dear [Full name of Tobacco-Victim Claimant / Succession Claimant or representative],

This Acknowledgement of Receipt of Request for Review is your record that [\[Name of Claims Administrator\]](#), the Claims Administrator for the Quebec Class Action Administration Plan (“**Quebec Administration Plan**”), has received your Request for Review of the decision of the Claims Administrator to deny [your/ Tobacco-Victim Claimant’s / Succession Claimant’s Full Name] Claim dated _____.

The Review Officer will review your Request for Review as quickly as possible to determine whether the decision of the Claims Administrator regarding your [Tobacco-Victim Claim / Succession Claim] will be confirmed, reversed or varied.

We will notify you in writing once a decision has been made regarding your Request for Review.

In the interim, if you have questions regarding your Request for Review or the review process, please consult the Claims Administrator’s website at [\[URL for website of Claims Administrator\]](#) or call the Claims Administrator’s Call Center at [\[Call Centre toll-free number\]](#) or send an email to [\[Claims Administrator’s email\]](#).

You may also contact the Quebec Class Counsel through the Quebec Class Action Call Centre at 1-888-880-1844 or send an email to tabac@tjl.quebec or visit the Quebec Tobacco Class Action website at www.recourstabac.com.

[Place], this ● day of ●, 202●

 Claims Administrator

APPENDIX "O"

Quebec Class Action Administration Plan

1. Brands of Cigarettes sold by the Tobacco Companies between January 1, 1950 and November 20, 1998

Accord	Dunhill	North American Spirit
B&H	Export LD	Spirit
Belmont	Macdonald	Number 7
Belvedere	Mark Ten	Peter Jackson
Camel	Matinee	Players
Cameo	Medallion	Rothmans
Craven "A"	More	Vantage
Craven "M"		Viscount
du Maurier		Winston

2. Sub-brands of Cigarettes sold by the Tobacco Companies between January 1, 1950 and November 20, 1998

Accord KF	du Maurier Special	Peter Jackson Extra
Avanti/Light	du Maurier Ultra Light	Light KF
B&H 100	Dunhill KF	Player's Extra Light
Del.UL.LT/MEN	Export "A"	Player's Filter
B&H 100 F	Export "A" Lights	Player's Light
B&H 100 F Menthol	Export "A" Medium	Player's Medium
B&H Light Menthol	Export "A" Extra Light	Player's Plain
B&H Lights	Export "A" Special Edition	Rothmans Extra Light
B&H Special KF	Export "A" Ultra Light	Rothmans KF
B&H Special Lights	Export Mild	Rothmans Light
KF	Export Plain	Rothmans Special
Belmont KF	John Player's Special	Rothmans UL LT KF
Belvedere Extra Mild	Macdonald Menthol	Select Special/Ultra
Cameo Extra Mild	Mark Ten Filter	Mild/Menthol
Craven "A" Special	Matinee Extra Mild	Vantage KF
Craven "M" KF	Matinee	Vantage
Craven "M" Special	Slims/Menthol	Light/Menthol
Craven "A" Light	Matinee	Viscount #1 KF
Craven "A" Ultra	Special/Menthol	Viscount Extra
Light/Mild	Number 7 Lights	Mild/Menthol
du Maurier Extra Light		
du Maurier Light		

APPENDIX “P”

Quebec Class Action Administration Plan

NOTICE TO PROVIDE ALTERNATIVE PROOF

[on Claims Administrator’s Letterhead]

BY [METHOD OF COMMUNICATION]

Claimant’s Name

Claim Number

Claimant’s Address

Dear [Full name of Tobacco-Victim Claimant / Succession Claimant or representative],

You are receiving this Notice to Provide Alternative Proof in respect your claim [claim number] in respect of [your/ the Tobacco-Victim’s name] diagnosis of [lung cancer/throat cancer/emphysema/COPD (GOLD Grade III or IV)].

When you submitted your Proof of Claim, you authorized the Claims Administrator to obtain Proof of Diagnosis of [your/ the Tobacco-Victim’s/the deceased Tobacco-Victim’s] [lung cancer/ throat cancer/ Emphysema/COPD (GOLD Grade III or IV)] through the Ministère de la Santé et des Services sociaux and the Régie de l’assurance maladie du Québec from [the Quebec Cancer Registry/ MED-ÉCHO].

The Claims Administrator was unable to obtain the required proof from [the Quebec Cancer Registry/ MED-ÉCHO].

To avoid rejection of your Proof of Claim, you must submit one of the following as Alternative Proof in order to establish the diagnosis of the tobacco-related disease asserted in your Proof of Claim and the date of such diagnosis, within one hundred and twenty (120) days of the date of this Notice:

[In respect of a Lung Cancer or Throat Cancer claim]

- a copy of a pathology report which confirms that the Tobacco-Victim was diagnosed with Lung Cancer or Throat Cancer, as applicable, before March 12, 2012; or
- a copy of an extract from [your/ the Tobacco-Victim’s/the deceased Tobacco-Victim’s] medical file confirming the diagnosis of [Lung Cancer/Throat Cancer] before March 12, 2012; or
- a written statement from a Physician with access to [your/ the Tobacco-Victim’s/the deceased Tobacco-Victim’s] medical record confirming the diagnosis of a [Lung Cancer/Throat Cancer] before March 12, 2012 and providing at least one of the following records to verify the diagnosis and date of diagnosis: pathology report,

operative report, biopsy report, MRI report, CT scan report, PET scan report, x-ray report and/or sputum cytology report.

[In respect of an Emphysema/COPD (GOLD Grade III or IV) claim]

- a copy of a report of a spirometry test performed on the Tobacco-Victim before March 12, 2012, demonstrating a FEV1 (non-reversible) of less than 50% of the predicted value;
- a copy of an extract from [your/ the Tobacco-Victim's/the deceased tobacco victim's] medical file confirming the diagnosis of Emphysema/COPD (GOLD Grade III or IV) before March 12, 2012;
- a written statement from a Physician with access to [your/ the Tobacco-Victim's/the deceased Tobacco-Victim's] medical record confirming the diagnosis of Emphysema/COPD (GOLD Grade III or IV) before March 12, 2012 and providing at least one of the following records to verify the diagnosis and date of diagnosis: spirometry report or CT scan report;
- a copy of a radiological report from a chest x-ray performed on [you/the Tobacco-Victim/the deceased Tobacco-Victim] before March 12, 2012 indicating the presence of Emphysema;
- a copy of a radiological report from a thoracic computed tomography (CT-scan) performed on [you/ the Tobacco-Victim/the deceased Tobacco-Victim] before March 12, 2012 indicating the presence of centrilobular Emphysema; or
- a copy of a respiratory functional assessment carried out on [you/ the Tobacco-Victim/the deceased Tobacco-Victim] before March 12, 2012, including spirometry and measurement of dispersion, indicating the presence of an obstruction of bronchitis that is irreversible and a decrease in diffusion or that corresponds to stage 3 or 4 on the GOLD Grading System.

Alternative Proof must be sent to the Claims Administrator:

- Electronically via the website at [URL for website of Claims Administrator];
- By email to: [insert Claims Administrator's email address];
- By fax to: [insert Claims Administrator's fax number]; or
- By registered mail to the following address: [insert Claims Administrator's address].

You cannot submit the required Alternative Proof by hand delivery or by regular mail, and you must keep a record of transmission of the Alternative Proof until you receive a written Acknowledgment of Receipt of Alternative Proof from the Claims Administrator.

In order to obtain the required Alternative Proof, we strongly recommend you request [your/ the Tobacco-Victim's/the deceased Tobacco-Victim's] medical files or communicate with [your/ the Tobacco-Victim's/the deceased Tobacco-Victim's] Physician without delay. The procedure to follow to request medical files can usually be found on the website of the medical institution or can be obtained by calling their archive/medical records department.

If you do not submit any Alternative Proof to the Claims Administrator within 120 days after the date of this Notice, your Proof of Claim will be rejected without further notice.

If you do submit Alternative Proof by this deadline, the Claims Administrator will consider such Alternative Proof when reviewing your Proof of Claim. If any further information is required, you will be contacted by the Claims Administrator .

If you have questions in respect of this notice or the Claims Process, including the status of your claim, under the Quebec Administration Plan, please consult the Claims Administrator's website at [\[URL for website of Claims Administrator\]](#) or call the Claims Administrator's Call Center at [\[Call Centre toll-free number\]](#) or send an email to [\[Claims Administrator's email\]](#).

If you require any assistance to prepare your Alternative Proof for submission to the Claims Administrator, you may contact the Quebec Class Counsel through the Quebec Class Action Call Centre at 1-888-880-1844 or send an email to tabac@tjl.quebec or visit the Quebec Tobacco Class Action website at www.recourstabac.com.

Please note that the Claims Administrator cannot make any requests on your behalf for medical information that would satisfy the requirement to provide Alternative Proof.

[Place], this • day of •, 202•

Claims Administrator

**ONTARIO
SUPERIOR COURT OF JUSTICE (COMMERCIAL
LIST)**

Proceeding commenced at Toronto

**MOTION RECORD OF THE CLAIMS
ADMINISTRATOR,
EPIQ CLASS ACTIONS SERVICES CANADA INC.
(Motion for Claims Administrator Order)**

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