



**CA46728**

**Supreme Court File No.: 144097**

**Supreme Court Registry: Victoria**

**Heard before: Madam Justice Winteringham and Jury**

## **COURT OF APPEAL**

**BETWEEN:**

**PATRICIA DAWN ELLIOTT**

**RESPONDENT  
(PLAINTIFF)**

**AND**

**RYAN McCLIGGOT and SLEGG CONSTRUCTION MATERIALS LTD.**

**APPELLANTS  
(DEFENDANTS)**

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## **APPELLANTS' APPEAL BOOK**

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| EXHIBIT CARD No. _____  |   | EXHIBIT CARD No. <u>450044</u>  |  |
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ADM 051 REV 11/00

No. 144097

Victoria Registry

IN THE SUPREME COURT OF BRITISH COLUMBIA

BETWEEN:

Patricia Dawn Elliot

PLAINTIFF

AND:

Ryan McCliggot and Slegg Construction Materials Ltd.

DEFENDANTS

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BOOK of DOCUMENTS

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## Independent Medical Examination

PHYSIATRY

**Prepared for:**

**Karl Hauer**  
**Vancouver Island Law**  
1 – 1007 Johnson Street  
Victoria, BC V8V 3N6

**Regarding:**

**Ms. Patricia Dawn Elliott**

**Date of Loss:**

November 8, 2012

**Date of Assessment:**

August 31, 2018

**Date of Report:**

September 12, 2018

**Prepared by:**

**Zeeshan Waseem, MD, FRCPC**  
*Physiatry*

IMA Solutions  
500 – 1199 West Hastings Street  
Vancouver, BC V6E 3T5 Canada



## STATEMENT OF QUALIFICATIONS

---

I am a duly qualified physician licensed to practice medicine in the provinces of Ontario and British Columbia and hold specialty certification in Physical Medicine and Rehabilitation through the Royal College of Physicians and Surgeons of Canada.

5

I have a broad based physiatry practice that includes the assessment and treatment of patients with neurologic and musculoskeletal injuries and chronic pain.

I practice physiatry in a multidisciplinary setting where I work alongside other allied health care professionals assessing musculoskeletal problems and chronic pain, and developing rehabilitative and return to work programs for patients. I am consulted when pain and/or physical impairment is preventing a patient from achieving their desired level of independence including vocational, avocational and social disability. I deploy a variety of techniques including medications, injections, modalities, therapeutic exercise, prosthetics/orthotics and adaptive devices to maximize function.

Conditions commonly diagnosed and treated include, traumatic brain injury, spinal cord injury, amputation, sprain/strain, tendinitis, tendinopathy, myofascial pain, rotator cuff tears, adhesive capsulitis, shoulder and hip labral tears, radiculopathy, peripheral nerve injury or entrapment, brachial and lumbar plexus injuries, fibromyalgia, osteoarthritis, post-fracture pain and dysfunction, complex regional pain syndrome and chronic pain syndrome. I perform and interpret Nerve Conduction Studies and Electromyography (EMG) for patients with neurologic conditions. A large component of my practice involves managing chronic pain with injection therapy including ultrasound-guided cortisone injections, nerve blocks, trigger point injections, percutaneous needle tenotomy and platelet rich plasma injections.

Annually I attend Physiatry, EMG and Pain conferences.

I was formerly a staff physiatrist of the Complex Injury Outpatient Rehabilitation Program at the Toronto Rehabilitation Institute, University of Toronto.

I was also formerly an appointed staff physician at St. Michael's Hospital in the Head Injury Clinic.

I have performed Independent Physiatry Examinations including Accident Benefit Files, Worker's Compensation Claims, Catastrophic Assessments, Disability Claims, and Independent Medical Evaluations for both Defense and Plaintiff Counsels. I am certified in Impairment and Disability Rating by the American Board of Forensic Professionals. I have been accepted as an expert witness in the provinces of Ontario and British Columbia.

## STATEMENT OF CERTIFICATION

---

I am aware that under Subrule 11-2(1) of the Rules of Court, I have a duty to assist the court and not be an advocate for any party. I have prepared this report in conformity with my duty to the court as articulated in Subrule 11-2(1) of the Rules of Court. If I am called upon to give oral or written testimony in relation to this matter, I will give that testimony in conformity with my duty to the court as articulated in Subrule 11-2(1) of the Rules of Court.

45

I certify that I have no conflict of interest in this case.





I am solely responsible for the content of this report.

#### **NATURE OF OPINION BEING SOUGHT**

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50

I have been requested by Karl Hauer of Vancouver Island Law to conduct an independent medical examination of Ms. Patricia Dawn Elliott in order to provide an opinion from a Psychiatry perspective on the matter of the motor vehicle accident of November 8, 2012. Please see the attached letter for the specific instructions provided to me.

55

#### **FACTS AND ASSUMPTIONS**

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*Please note, unless otherwise stated, the following Facts and Assumptions were obtained via direct interview of Ms. Elliott.*

60

Ms. Patricia Dawn Elliott is a 42-year-old right hand dominant woman who was involved in a motor vehicle accident on November 8, 2012.

#### **Pre-Accident Medical History**

65

There were no prior ongoing concerns of a musculoskeletal nature.

Ms. Elliott had no prior ongoing medical concerns and did not require the use of medication.

70

There is no history of coronary concerns, renal disease or gastrointestinal bleeds, and no ongoing use of anti-coagulant medication.

There are no known medication allergies.

#### **75 Previous Accidents or Injuries**

There is no history of prior traumatic injuries.

#### **Previous Surgeries**

80

- Cholecystectomy (2007)
- Tubal ligation (2011)

#### **Habits**

85

There is no history of addictions to or abuse of alcohol, medications or illicit drugs.

#### **Pre-Accident Functional Status**

90

At the time of the accident, Ms. Elliott resided in a house with her 3 children currently ages 22, 17 and 11.



She was independent with respect to personal care, mobility transfers, ambulation and operating a motor vehicle.

95

Ms. Elliott participated in housekeeping tasks including grocery shopping, cooking, dishwashing, vacuuming, kitchen and bathroom cleaning, floor washing, laundry and garbage removal, and outdoor maintenance including snow shoveling, cutting the grass and gardening/yardwork.

100 Ms. Elliott was responsible for caregiving for her youngest child.

She attended a gym twice weekly for cardiovascular exercise for 30 minutes and using weight machines for 60 minutes. She went bowling once weekly.

#### 105 **Pre-Accident Education and Employment**

Ms. Elliott has a high school level of education.

110 At the time of the accident, Ms. Elliott worked as the owner/operator of her own home-based daycare, working 50 hours weekly. She cared for 5 children between the ages of 1-5 which involved dressing, feeding, toileting as well as supervision, play and education. A small component of her work was performing administrative work. The physical job demands included: frequent dynamic standing, walking and bending/stooping; and occasional sitting, forward reaching, squatting and kneeling. She lifted and carried children on a frequent basis. She would pull/push strollers holding 4 children on  
115 occasion. She had been working in this capacity for 5 years and enjoyed her work.

She aspired to expand her business. She was in the process of obtaining a license to run her daycare that would have allowed her to care for more children.

#### 120 **Accident History – November 8, 2012**

Ms. Elliott was the restrained driver of a vehicle that was at a complete stop when a truck in front of her reversed into the front of her vehicle. Airbags did not deploy. She did not strike her head or any part of her body against the interior of the vehicle. She did not lose consciousness. She denied any  
125 immediate pain complaints. She denied sustaining physical signs of external trauma such as cuts, bleeding or bruising. She was able to exit the vehicle independently and was ambulatory on the scene. She experienced neck, upper back and mid back pain and headaches after a few hours and went to a walk-in clinic.

#### 130 **Post-Accident Course**

The following is of note from the medical records of Gordon Head Emergency Medical Centre on November 8, 2012:

- Treatment Centre Record Sheet: headache; neck pain
- 135 Impression: whiplash

Ms. Elliott attended Victoria General Hospital because her pain became acutely worse.



The following is of note from the hospital records of Victoria General Hospital on December 12, 2012:

- 140
- Triage Assessment: back pain
  - Emergency Department Physician Assessment and Treatment Record: soft tissue injury back secondary to MVC
  - X-ray thoracic spine: normal

145 Ms. Elliott followed up with her regular family physician, Dr. Darcy Nielsen.

The following is of note from the medical records of Dr. Darcy Nielsen, Family Medicine (August 20, 2010 to March 2, 2018):

- 150
- The records have been redacted
  - November 9, 2012: MVA; headache; tender trapezius, rhomboids
  - November 13, 2012: neck, upper arm, mid back pain; headaches
  - November 21, 2012: headache
  - November 30, 2012: improving; shoulder, back, neck pain
  - December 14, 2012: back spasm; left hip pain

155

  - January 7, 2013: left hip pain; headaches
  - January 21, 2013: decreased left hip, left leg, neck pain; mid back pain
  - February 6, 2013: improving; mid back/shoulder pain; hip, neck, leg not bothersome
  - February 20, 2013: left leg and hip, neck better; ready to return to work with limited lifting
  - June 27, 2013: left leg, hip better; mid back pain increased; upper back, shoulder, neck pain; headaches; fatigue

160

  - December (illegible) 2013: recurrence back pain; never fully resolved
  - December 10, 2013: admitted to hospital for suicidal ideation
  - January 20, 2014: reduced energy; headaches; tearful
  - October 16, 2014: back pain

165

  - No entries in the interim
  - March 3, 2015: back feeling "horrible"; spasm right shoulder and neck; right hip pain; numbness and tingling both arms, right greater than left
  - December 21, 2015: back pain; tingling in right hand and arm
  - May 29, 2016: back pain and stiffness; headaches; neck stiffness

170

  - March 15, 2018: neck, upper back, mid back stiffness; numbness and tingling in right arm
  - July 10, 2018: right wrist pain; right shoulder pain

The medical records indicate Ms. Elliott has undergone the following diagnostic investigations:

- 175
- X-ray cervical spine on March 3, 2015: reversal of the cervical lordosis
  - X-ray cervical spine with flexion/extension views on June 14, 2016: normal



The medical records indicate Ms. Elliott has seen the following medical specialists:

- Dr. Lena Galimova, Psychiatrist:
  - Dr. Galimova's handwritten clinical notes are largely illegible
  - July 12, 2016: mechanical neck pain with myofascial component; continue with the exercise program; consider trigger point injections; consider cognitive behavioural therapy to improve pain coping skills
  - July 27, 2016: trigger point injections

180

185

Ms. Elliott underwent electrodiagnostic testing of the upper extremity 3-4 years ago and was unsure of the results.

She is scheduled to undergo MRI of the cervical and thoracic spines on September 4, 2018.

190

She underwent 2-3 sessions of trigger point injections performed by Dr. Galimova that relieved pain by about 30%, absent side effects, with the benefit lasting a few weeks before symptoms returned to the prior baseline level. Further injections were not offered as Dr. Galimova was not satisfied that the degree of improvement warranted repeated injections.

195

#### Subsequent History

Ms. Elliott has since been diagnosed with psoriasis.

There is no history of subsequent accidents or injuries.

200

#### Medications

| CURRENT MEDICATIONS |                              |                 |                |          |              |
|---------------------|------------------------------|-----------------|----------------|----------|--------------|
| Name & Dose         | Frequency                    | Duration of use | Indications    | Efficacy | Side Effects |
| Tylenol 500 mg      | 1 tablet once or twice a day | Over 5 years    | Pain, headache | Helpful  | None         |
| Advil 400 mg        | 1 tablet once or twice a day | Over 5 years    | Pain, headache | Helpful  | None         |

Ms. Elliott previously took cyclobenzaprine which was discontinued due to altered sensorium.

205

#### Rehabilitation & Treatments To-Date

Ms. Elliott initially attended physiotherapy, 3 times per week, and massage therapy, 3 times per week alternating with physiotherapy, for three months following the accident. Physiotherapy consisted of electrotherapy, spinal manipulative therapy, soft tissue therapy and mobilization as well as stretches, core strengthening, resistance band exercises and stability ball exercises. She was encouraged by her physiotherapist to swim which she did until the end of last year before discontinuing after she broke out with psoriasis. She found physiotherapy and massage therapy helpful in facilitating a return to work. She has continued to attend physiotherapy and massage therapy for the purposes of combating flare ups a few times per year.

215

She tried 6-7 sessions of acupuncture that she found temporarily helpful, with the benefit lasting for no more than one day. She discontinued due to limited efficacy.



Ms. Elliott was apparently advised to take months off work and attend specialized treatments to ameliorate her nerves but declined because the proposed time off work was impractical.

220

She underwent an assessment by a chiropractor last year but did not pursue the recommended treatments due to financial considerations.

225

Ms. Elliott currently attends yoga twice per week for one-hour classes and performs stretches as recommended by her physiotherapist nightly for up to 20 minutes. She has been provided resistance bands and light weights that are used when performing independent exercises.

#### Current Symptoms (in order of severity)

230

##### 1. Neck/upper back/mid back pain

- Diffuse cervical paraspinal muscles, upper fibers of the trapezius muscles, upper/mid thoracic paraspinal muscles
- Same day onset
- Constant at intensity 1-2 of 10 on average and 3-5 of 10 when more severe
- Worsened with repetitive movements of the upper extremities, physical exertion, prolonged sitting
- Alleviated by medication, heat, stretches
- Symptoms have been present continuously since onset
- 20-30% improved since onset and stable for past 4-5 years

240

##### 2. Headaches

- Suboccipital
- Same day onset
- Constant at intensity 1-2 of 10 on average and 3-5 of 10 when more severe
- Aching, tight sensation
- Worsened with neck pain
- Alleviated by medication
- Symptoms have been present continuously since onset
- No better and no worse since onset
- 20-30% improved since onset and stable for past 4-5 years

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250

Ms. Elliott experiences numbness and paraesthesias involving both of her upper extremities, right greater than left, extending from the shoulders radiating down to the hands affecting either the 1<sup>st</sup> and 2<sup>nd</sup> digits or the 4<sup>th</sup> and 5<sup>th</sup> digits.

255

Ms. Elliott experiences difficulty maintaining sleep due to pain. She reported her sleep is disrupted 4-5 times nightly. She estimated obtaining a total of 7-8 hours of sleep per night. She does not feel refreshed upon awaking in the morning and experiences daytime fatigue.



260 Ms. Elliott reported the following functional tolerances:

- Sitting: 30-45 minutes (pre-loss unrestricted)
- Standing: unrestricted (unchanged)
- Walking: unrestricted (unchanged)

265 Ms. Elliott reported having gained 25-30 pounds since the accident (currently weighing 165 pounds), for unspecified reasons.

#### **Post-Accident Functional Status**

270 Ms. Elliott and her children have since moved into a different house due to financial shortcomings attributed to the accident.

Ms. Elliott has remained independent with respect to personal care, mobility transfers and ambulation, and has resumed driving.

275

She was completely unable to perform her normal housekeeping tasks for 4 months following the accident during which time she hired external assistance. Since then she has resumed her normal tasks, though largely at a reduced frequency, slower pace, using load splitting, taking breaks and with pain. Tasks are not performed to her usual standards. As physical exertion increases her pain, she has

280 changed the manner with which she performs these tasks.

Ms. Elliott has relinquished her normal athletic and recreational activities. She had attempted these but was unable to tolerate the increased pain from physical exertion and repetitive upper extremity movements.

285

#### **Post-Accident Education & Employment History**

Following the motor vehicle accident, Ms. Elliott took approximately four months off work. She hired a substitute 6 weeks into her absence to try and keep her daycare centre afloat, however parents pulled their children out once they learned she would be absent for a prolonged period of time.

290

Ms. Elliott switched careers and began working as a secretary performing clerical work for a property management company. Her employer was aware she had been in an accident and was understanding and offered her the flexibility to work fewer hours and miss work to recuperate from pain and headaches as needed. She took a 3-month medical leave of absence for situational depression. She remained in this position for 2 years, eventually leaving for a position that had extended health benefits.

295

Since 2016, she has been working full-time in a sedentary capacity as a bookkeeper, gaining promotions along the way, for Craftsmans Collision. The inherent nature of her work permits her to move around and avoid a seated position for prolonged periods of time. Her employer is noted to be supportive and understanding, allowing her to make up missed time for medical or rehabilitation appointments as needed. She has been provided a comfortable office chair.

300



### Physical Examination

305

Ms. Elliott walked with a normal biomechanical gait pattern. She was observed to stand 40 minutes into the assessment. She was overweight. There was no focal muscular atrophy. She had normal alignment of the axial spine and upper and lower extremities. There was no pelvic obliquity or leg length discrepancy. She was able to walk with a tandem gait pattern. Romberg testing was normal. She was able to squat normally and perform a single leg stance on the right and left sides. She was able to walk on her heels and toes.

310

On examination of the cervical spine, pain was noted to palpation of the suboccipital, cervical paraspinal, upper fibers of the trapezius, levator scapula and splenius capitis/cervicis muscles bilaterally. In these areas, muscle stiffness, increased muscle tone, spasms, taut bands and trigger points were notable. Cervical spine range of motion (flexion, extension, bilateral lateral bending and bilateral rotation) was within normal limits and symmetric. There was no crepitus noted during range of motion testing. Cervical spine movements did increase her pain. Kemp's test was negative bilaterally. Spurling's test was negative bilaterally. Special tests for lesser occipital and greater occipital neuralgia were negative bilaterally. Tinel's sign over the posterior auricular nerve was absent bilaterally.

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320

On examination of the thoracic spine, pain was noted to palpation of the thoracic multifidus and paraspinal muscles bilaterally in the suprascapular and interscapular regions spanning from T1 to T6. In these areas, muscle stiffness, increased muscle tone, spasms, taut bands and trigger points were notable. Thoracic spine range of motion (bilateral rotation) was within normal limits and symmetric. There was no crepitus noted during range of motion testing. Thoracic spine movements did increase her pain.

325

On examination of the lumbar spine, no pain was noted to palpation of the lumbar paraspinal, quadratus lumborum and the upper fibers of the gluteus maximus muscles bilaterally. In these areas, muscle stiffness, increased muscle tone, spasms, taut bands and trigger points were not notable. There was no pain to palpation of the sacroiliac joints (SI) bilaterally and there was no hypomobility or hypermobility of the bilateral SI joints on Gillet test. Lumbar spine range of motion (flexion, extension and bilateral lateral bending) was within normal limits and symmetric. There was no crepitus noted during range of motion testing. Lumbar spine movements did not increase her pain. Kemp's test was negative bilaterally. Nerve root tension tests (straight leg raise in both seated and supine positions, Lasègue, femoral stretch, bowstring, seated slump test) were negative bilaterally. Special tests for piriformis syndrome (FAIR) and SI joint pathology (open book, compression, Gaenslen's, FABER, thigh thrust) were negative bilaterally.

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335

On examination of the upper extremities, there was no pain with palpation of the joint lines, muscles, ligaments and tendons or with active and passive movement. There was no evidence of muscle stiffness, increased muscle tone, spasms, taut bands or trigger points. There was no scapular winging bilaterally. There was no joint crepitus or effusion. There was no joint laxity/instability (negative sulcus sign of the shoulders, negative varus and valgus stress tests of the elbows for medial and lateral instability, negative piano key and ballottement tests of the wrists for distal radio-ulnar joint instability, negative Watson's test for instability of the proximal carpal row of the hand). Special tests for tendinitis (empty can for supraspinatus tendinitis, lift-off for subscapular tendinitis, resisted external rotation for infraspinatus tendinitis, Speed's and Yergason's for biceps tendinitis, Cozen's and Mill's for lateral epicondylitis of the elbows, Finkelstein's for de Quervain's tenosynovitis of the wrists) and/or subacromial impingement of the shoulders (Neer's, Hawkins-Kennedy, Painful Arc) were negative bilaterally. Tinel's sign over the ulnar nerves at the elbows and wrists and Tinel's sign over the median

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345

350



355 nerves at the wrists were negative bilaterally. Phalen's sign for median nerve entrapment at the wrists was absent bilaterally. Range of motion was within normal limits and symmetric of the shoulders (abduction, adduction, forward flexion, extension and combined dynamic movements), elbows (flexion, extension, forearm pronation and forearm supination) and wrists (flexion, extension, radial deviation and ulnar deviation).

360 On examination of the lower extremities, there was no pain with palpation of the joint lines, muscles, ligaments and tendons or with active and passive movement. There was no evidence of muscle stiffness, increased muscle tone, spasms, taut bands or trigger points. The Trendelenburg sign was absent bilaterally. There were no varicosities or pitting edema. There was no joint crepitus or effusion. There was no joint laxity/instability (negative varus and valgus stress tests of the knees for medial and lateral instability, negative Lachman test of the knees for anterior cruciate ligament pathology, negative posterior drawer test of the knees for posterior cruciate ligament pathology, negative anterior drawer tests of the ankles for pathology of the lateral collateral ligaments). Special tests for tendinitis (iliopsoas/snapping hip, iliotibial band of the lateral thigh, quadriceps and patellar tendons of the knees, Achilles tendon of the ankle) were negative bilaterally. There was no bursitis (greater trochanter of the hips, prepatellar/pes anserine of the knees, metatarsal bursa of the feet) bilaterally. Range of motion was within normal limits and symmetric of the hips (abduction, adduction, flexion, extension, internal rotation and external rotation), knees (flexion and extension) and ankles (dorsiflexion, plantarflexion, eversion and inversion).

370

On neurological examination, reflexes were within normal limits. There were no objective motor deficits within peripheral nerve or myotomal distributions. No sensory abnormalities were noted within peripheral nerve or dermatomal distributions. Upper motor neuron signs (sustained clonus, hypertonicity, Babinski reflex, Hoffmann's sign) were absent bilaterally.

375

Ms. Elliott did not have any pain behaviors and did not appear to amplify or magnify her complaints. Specifically, she did not report pain to superficial palpation, axial loading did not elicit low back pain, distracted straight leg raise in a seated position was negative, non-anatomic sensory changes were absent, there was no give-way weakness and there was no overreaction to painful stimuli.

380

### Questionnaires

385 Ms. Elliott completed the Pain Disability Index and identified disturbances in many aspects of her life due to chronic pain. For example, she indicated moderate disability in family/home responsibilities, recreation, social activity, occupation, sexual behavior, self-care and life-support activities because of chronic pain.

390 Ms. Elliott completed the Headache Impact Test (HIT-6) to assess the impact of headache on her life. She scored 64/78 indicating her headaches are having a very severe impact on her life.

- She indicated "very often" to the following questions:
    - When you have headaches, how often is the pain severe?
    - How often do headaches limit your ability to do usual daily activities including household work, work, school, or social activities?
    - In the past 4 weeks, how often have you felt too tired to do work or daily activities because of your headaches?
    - In the past 4 weeks, how often did headaches limit your ability to concentrate on work or daily activities?
- 395



400 **OPINIONS**

1. **The nature and extent of the injuries sustained by our Client, if any, in the Collision, (the "Injuries");**

405 Based on the history obtained and review of provided medical records, Ms. Elliott appears to have initially sustained sprain/strain soft tissue injuries predominantly of the cervical and thoracic spines and developed headaches as a result of the subject motor vehicle accident.

2. **Your diagnosis with respect to the symptoms, if any, exhibited by our Client from the Collision;**

410 The injuries noted above have resulted in chronic myofascial pain of the affected regions, cervicogenic headaches and generalized deconditioning.

3. **Your prognosis regarding the degree and duration of any symptoms and/or disability from the Injuries received in the Collision;**

415 The prognosis for a full symptomatic recovery is poor given the long-standing nature of her symptoms that have persisted for over 5 years post-accident despite appropriate conservative measures and medical attention. She continues to have objective signs of injury on her examination suggesting her course will remain refractory to medical management. While some further improvement with the outlined treatment recommendations is possible, she will continue to experience pain. Her physical condition would be considered chronic and unremitting and, therefore, permanent.

4. **The effect the Injuries, if any, have had, presently have, and will or may have on our Client's ability to work;**

425 The injuries prevented her from returning to her pre-accident occupation, upended her expressed plans to expand her home daycare business and prompted her to transition to working in a sedentary capacity.

5. **The effect the Injuries, if any, have had, presently have, and will or may have on our Client's ability to function outside of work, regarding activities of daily living and recreation;**

435 The injuries have caused, and will continue to cause, her to perform her usual housekeeping activities in a diminished and altered capacity while depriving her from her previously enjoyed recreational activities.

6. **The effect any pre-existing injuries, if any, have had, presently have, and will or may have on the injuries sustained by our Client, our Client's ability to function at work and outside of work, regarding activities of daily living and recreation;**

445 There is no evidence of any relevant pre-existing injuries or conditions.



7. Your diagnosis regarding any degenerative changes, if any, that have or may subsequently occur as a result of our Client's Injuries; and

450 Ms. Elliott is not at increased risk of developing degenerative changes as a result of her injuries.

8. Your advice as to our Client's need for future care.

455 My recommendations for future treatments include returning to swimming for cardiovascular exercise when medically cleared, use of over-the-counter analgesics as per her current regimen for pain management and intermittent access to physiotherapy and massage therapy 4-6 times per year for the purposes of combating symptom exacerbation.

460 Sincerely,

465 Zeeshan Waseem, MD, FRCP (C)  
Physical Medicine & Rehabilitation

*The signature contained in this report may be electronically scanned. Original signature for this individual is on file should it be required. The practitioner listed herein has given her authorization for the use of her scanned signature as she has read and agreed with the content of this report.*



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**APPENDIX I – LETTER OF INSTRUCTION & LIST OF DOCUMENTS**


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Enclosed.

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**APPENDIX II – CURRICULUM VITAE**


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Enclosed.

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**APPENDIX III – INDEX/GLOSSARY OF TECHNICAL TERMS**


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|    | <b>TERM</b>                         | <b>EXPLANATION</b>   |
|----|-------------------------------------|--|
| 1  | Abrasion                            | Superficial damage to the skin   |
| 2  | Acromioclavicular joint dysfunction | An injury to the joint that connects the shoulder blade to the collarbone  |
| 3  | Active movement                     | Joint range of motion by the person alone  |
| 4  | Active rehabilitation               | Supervised exercise program that addresses injury via progressively monitored exercises including targeting of postural imbalances, core instability and muscle weakness designed to avoid aggravating symptoms and restore pre-injury function  |
| 5  | Axial spine                         | The part of the human skeleton that consists of the vertebral column or the neck and backbone  |
| 6  | Bowstring's sign                    | Special test used to evaluate for lumbosacral nerve root irritation  |
| 7  | Bursitis                            | Inflammation of one or more bursae (fluid filled sacs that cushion bones, tendons and muscles near joints)   |
| 8  | Cerebellar deficits                 | Objective signs of dysfunction of the cerebellum including ataxia (unsteadiness or incoordination of limbs, posture and/or gait), inability to perform rapid alternating movements and disordered control of the force and timing of movements leading to abnormalities of speed, range, rhythm, starting and stopping |
| 9  | Cervicogenic                        | Emanating from the neck  |
| 10 | Cervical spine                      | Neck; comprised of 7 vertebral segments labelled C1 through C7   |



|    |                                |   |
|----|--------------------------------|---|
| 11 | Central sensitization          | A state in which decreased production of pain-inhibiting neurotransmitters and/or increased production of pain-augmenting pathways results in amplification of central nervous system sensory stimuli such as pain, touch, smell, sound and/or light. Over time, this increased sensory input causes structural changes to the central nervous system wherein the region of the spinal column that receives pain stimuli enlarges and the parts of the brain that perceive and process pain become increasingly active. Consequently, painful areas expand beyond the original territories of injury and pain can be experienced with little or no noxious stimuli. |
| 12 | Chronic myofascial pain        | A form of chronic pain that emanates from muscle and the overlying fascial structures and is local, contiguous and/or regional with the area of injury. The pain persists long after the clinical resolution of the injury, is characterized by objective abnormal findings (increased muscle tone, muscle stiffness, spasms, taut bands and trigger points) detected by digital pressure during examination by the clinician and heralds a sensitized state in which the pain itself is the impairment.  |
| 13 | Chronic pain                   | Pain lasting more than 6 months   |
| 14 | Chronic pain syndrome          | Chronic pain complicated by psychological and/or socioeconomic concerns   |
| 15 | Complex regional pain syndrome | A form of chronic pain that usually affects an arm or a leg where the pain is out of proportion to the severity of the initial injury and is associated with swelling, limited range of motion and changes to the colour and temperature of the skin  |
| 16 | Concussion                     | See mild traumatic brain injury   |
| 17 | Contusion                      | Injury from a blow causing bruising   |
| 18 | Cranial nerves II-XII          | The set of paired nerves that emanate directly from either side of the brain; there are 12 such pairs, conventionally labelled by Roman numerals; physical examination typically do not include assessment of the first cranial nerve   |
| 19 | Dermatomal distributions       | Sensation in a pattern or area supplied by a single spinal nerve  |
| 20 | Edema                          | Swelling or puffiness of parts of the body  |
| 21 | Effusion                       | Excess fluid accumulation in or around a joint  |
| 22 | FABER                          | Special test used to evaluate for hip labral tear or sacroiliac joint dysfunction. FABER = Flexion, ABduction and External Rotation of the hip  |
| 23 | Facetogenic pain               | Pain that emanates from the facet joints that form an articulation between two adjacent vertebrae in the spinal column.   |



|    |  |   |
|----|--|---|
| 24 | FADIR  | Special test used to evaluate for hip labral tear or piriformis syndrome. FADIR = Flexion, ADduction and Internal Rotation of the hip   |
| 25 | Fibromyalgia                                     | Widespread musculoskeletal pain accompanied by fatigue, disordered sleep, cognitive symptoms and myriad other non-specific symptoms   |
| 26 | Focal muscular atrophy                           | Muscle wasting localized to one particular site in the body   |
| 27 | Impingement Syndrome                             | Compression of the shoulder rotator cuff or hip muscles and/or bursa causing pain and movement problems   |
| 28 | Internal derangement                             | Internal damage of a joint caused by trauma or degeneration   |
| 29 | Joint crepitus                                   | Grinding, cracking, grating, crunching or popping sounds that occur when moving a joint   |
| 30 | Joint instability                                | Insufficiently supported joint no longer held in proper place by ligaments, tendons and muscles   |
| 31 | Joint laxity                                     | Excessive joint movement  |
| 32 | Kemp's test                                      | Special test to evaluate for facetogenic pain   |
| 33 | Kinesiophobia                                    | Fear of movement, usually when a person believes movement can cause more injury   |
| 34 | Labrum   | Ring of cartilage attached to the outside rim of the socket of the shoulder or hip joint  |
| 35 | Leg length discrepancy                           | Difference between the length of the legs   |
| 36 | Lesser occipital and greater occipital neuralgia | Irritation of nerves of spinal origin that traverse the space between the occiput (i.e. back of the head) and the scalp causing posterior headaches that radiate toward one eye |
| 37 | Levator scapulae muscles                         | Muscles situated at the back and side of the neck that inserts onto the inner part of the scapula and primarily functions to elevate the shoulder blades                        |
| 38 | Ligament   | Fibrous band of tissue that connects two bones or cartilage and holds together a joint  |
| 39 | Lumbar spine                                     | Lower back; comprised of 5 vertebral segments labelled L1 through L5  |
| 40 | Mechanical pain                                  | Neck, back or joint pain that is linked with movement   |
| 41 | Meniscus   | Fibrocartilaginous structure that cushions various joints, notably the knee   |
| 42 | Mobility transfers                               | Movement of the body or body parts from one position to another, i.e. in/out of bed, bath or car, on/off toilet, sit/stand  |
| 43 | Morton's neuroma                                 | Inflammation of the nerves between the toes   |
| 44 | Muscle atrophy                                   | Muscle wasting  |
| 45 | Muscle spasms                                    | Involuntary muscle contractions   |
| 46 | Muscle stiffness                                 | The degree of tightness noted in muscle fibers  |
| 47 | Muscle tone                                      | The degree of tension noted in muscle fibers  |
| 48 | Myofascia  | The muscles (myo) and surrounding tissue (fascia)   |



|    |                                    |  |
|----|------------------------------------|--|
| 49 | Myofascial release                 | A form of manual therapy that treats muscle immobility and pain by relaxing contracted muscles and improving circulation to enhance the stretch reflexes in muscles  |
| 50 | Myotomal distributions             | Muscle strength in a pattern or area supplied by a single spinal nerve   |
| 51 | Nerve root tension                 | Abnormal increase in tension of spinal nerves when they become caught or restricted anywhere along their path manifesting as pain, weakness or sensory disturbance   |
| 52 | Neuropathic pain                   | Pain caused by damage, disease or injury to nerve fibers   |
| 53 | Normal biomechanical gait pattern  | A normal manner of walking   |
| 54 | Normal body habitus                | Normal physique or body build  |
| 55 | Pain                               | An unpleasant sensory and emotional experience associated with actual or potential tissue damage, or described in terms of such damage   |
| 56 | Pain behaviour                     | Behaviours that overtly demonstrate to others how much pain one is in, including limping, rubbing painful spots, guarding, and vocalizations (sighing, moaning or groaning).                                   |
| 57 | Palpation                          | Examination with the hands to examine the body   |
| 58 | Paraspinal muscles                 | The muscles that run next to the cervical, thoracic and lumbar spines to support the spinal column, support movements of the vertebrae and coordinate movements with the rest of the body                      |
| 59 | Pathognomonic                      | Specifically characteristic or indicative of a particular disease or condition   |
| 60 | Passive modalities/treatment       | A treatment not requiring active participation and one that is given to the person by the treating therapist   |
| 61 | Passive movement                   | Joint range of motion with no effort from the person   |
| 62 | Pelvic obliquity                   | Misalignment of the pelvis   |
| 63 | Peripheral nerve                   | Nerve outside the brain and spinal cord  |
| 64 | Piriformis syndrome                | Compression of the sciatic nerve by a tight piriformis muscle causing buttock pain and/or referred pain radiating down the back of the thigh/leg   |
| 65 | Plantar fascia                     | Band of tissue connecting the heel bone to the toes  |
| 66 | Posterior auricular nerve          | Nerve supplying the muscles behind the ear   |
| 67 | Prolonged post-concussive symptoms | Persistent, physical, cognitive and emotional symptoms that persist after a traumatic brain injury   |
| 68 | Pronator drift                     | A pathological sign indicative of neurological injury where the outstretched arm(s) with palms facing upward drift when the eyes are closed  |
| 69 | Quadratus lumborum muscles         | Muscles of the posterior abdominal wall that originate from the pelvis, insert onto the lower back and the last rib and primarily function to assist with movements of the lumbar spine and elevate the pelvis |



|    |  |   |
|----|--|---|
| 70 | Radiculitis  | Chemical or mechanical inflammation and irritation of a spinal nerve root causing radiating pain in the distribution of the nerve root  |
| 71 | Radiculopathy  | Spinal nerve root dysfunction causing radiating pain, numbness, weakness and/or impaired deep tendon reflexes in the distribution of the nerve root   |
| 72 | Radiofrequency ablation  | A procedure used to reduce pain where an electric current produced by a radio wave is used to heat up nerve tissue to decrease pain signals   |
| 73 | Radiofrequency rhizotomy   | Radiofrequency ablation applied to spinal nerves that innervate the facet joints  |
| 74 | Range of motion  | The full movement potential of a joint  |
| 75 | Revised Oswestry Low Back Pain and Disability Questionnaire            | Standardized and validated questionnaire to evaluate functional outcomes in patients with low back pain; the original version was updated to create the revised version   |
| 76 | Romberg testing  | A test of balance   |
| 77 | Rotator cuff   | A group of four muscles (supraspinatus, infraspinatus, teres minor, subscapularis) and their respective tendons that surround and stabilize the shoulder  |
| 78 | Rotator cuff pathology   | Any type of injury to the rotator cuff muscles and/or tendons including tendinitis, sprains, strains or tears   |
| 79 | Sacroiliac joint pathology (open book, compression, Gaenslen's, FABER) | Too much (hypermobility) or too little (hypomobility) mobility of the sacroiliac joint which can be a source of low back/buttock pain   |
| 80 | Scalene muscles  | A group of three pairs of muscles in the side of the neck that primarily function to elevate the first rib and bend the neck to the same side   |
| 81 | Scapular winging   | Protrusion of the shoulder blade from a person's back   |
| 82 | Soft tissue injury   | Damage of the muscles, ligaments and tendons  |
| 83 | Spinal nerves  | Nerves that exit the spinal cord at the different vertebral levels that carry information to and from the axial spine and extremities; 8 cervical spinal nerves (labelled C1 through C8), 12 thoracic spinal nerves (labelled T1 through T12) and 5 lumbar spinal nerves (labelled L1 through L5) |
| 84 | Splenius capitus/cervicis muscles                                      | Deep muscles located close to the midline of the cervical spine that support movements of the neck  |
| 85 | Sprain   | Stretching or tearing of one or more ligaments often caused by trauma or the joint being taken beyond its functional range of motion  |
| 86 | Sternocleidomastoid muscles  | Large and superficial muscles of the side of the neck that primarily functions to rotate the head to the opposite side  |
| 87 | Strain   | Stretching or tearing of muscles and/or tendons caused by overstretch, excessive pressure or overuse  |



|     |   |   |
|-----|---|---|
| 88  | Suboccipital                              | Muscles located below the base of the skull that support the cervical spinal column   |
| 89  | Tandem gait pattern                       | Heel to toe walking to evaluate balance   |
| 90  | Taut bands                                | Contracted bands of muscle fibers   |
| 91  | Tendinitis/tendonitis                     | Inflammation or irritation of a tendon  |
| 92  | Tendon                                    | Fibrous band of tissue that connects muscles to bones   |
| 93  | Thoracic multifidus muscles               | Muscles that run next to the thoracic spine to support the thoracic spinal column, support movements of the vertebrae and coordinate movements with the rest of the body  |
| 94  | Thoracic spine                            | Upper and mid back; comprised of 12 vertebral segments labelled T1 through T12  |
| 95  | Tinel's sign                              | Light tapping over peripheral nerves to test for a sensation of paraesthesia (i.e. pins and needles) in the distribution of the nerve indicative of an irritated nerve  |
| 96  | Topical medication                        | A medication that is applied directly to a part of the body   |
| 97  | Traumatic brain injury                    | A disruption in the normal function of the brain that can be caused by a bump, blow, or jolt to the head or a penetrating head injury   |
|     | Mild traumatic brain injury               | A history of head trauma with any one of the following: <ul style="list-style-type: none"> <li>• Loss of consciousness for up to 30 minutes</li> <li>• Alteration of consciousness for less than 24 hours</li> <li>• Post-traumatic amnesia for less than 24 hours</li> <li>• Glasgow Coma Scale score of 13-15 at 30 minutes after the injury</li> </ul> |
|     | "Complicated" mild traumatic brain injury | • A mild traumatic brain injury with findings of structural brain damage on neuroimaging  |
|     | Moderate traumatic brain injury           | A history of head trauma with any one of the following: <ul style="list-style-type: none"> <li>• Loss of consciousness for 30 minutes to 24 hours</li> <li>• Alteration of consciousness/post-traumatic amnesia for 24 hours to 7 days</li> <li>• Glasgow Coma Scale score of 9-12 at 30 minutes after the injury</li> </ul>                              |
|     | Severe traumatic brain injury             | A history of head trauma with any one of the following: <ul style="list-style-type: none"> <li>• Loss of consciousness for greater than 24 hours</li> <li>• Alteration of consciousness/post-traumatic amnesia greater than 7 days</li> <li>• Glasgow Coma Scale score of less than 9</li> </ul>  |
| 98  | Trendelenburg sign                        | Sign of weak or paralyzed hip muscles   |
| 99  | Triangular fibrocartilage complex         | Ligamentous and cartilaginous structure found in the wrist that cushions and stabilizes the joint   |
| 100 | Trigger finger                            | Catching, snapping or locking of the finger   |
| 101 | Trigger points                            | Discrete tender nodules (i.e. knots) found in muscle fibers   |





|     |   |  |
|-----|---|--|
| 102 | Upper fibers of the gluteus maximus muscles | Muscle of the buttock that supports the lumbar spine and helps coordinate movements of the lower back and hips   |
| 103 | Upper fibers of the trapezius muscles       | Muscles extending from the base of the skull to the neck, upper back and shoulders that support the cervical and thoracic spines and helps coordinate movements of the shoulder blades |
| 104 | Upper motor neuron signs                    | Objective signs of damage to the descending motor pathways transmitted from the brain and/or spinal cord   |
| 105 | Varicosities                                | Swollen and tortuous veins   |
| 106 | Whiplash                                    | An acceleration-deceleration mechanism where the head and neck are suddenly forced backward and then forward from a rapid jolt or jerk   |
| 107 | Whiplash Associated Disorder (WAD)          | A collection of symptoms resulting from injury to the cervical spine structures (joints, ligaments, muscles, nerves, tendons) following a whiplash                                     |

\*Not all terms in this glossary may appear in the report



## Dr. Zeeshan Waseem MD, FRCPC

### Physiatry

*(Up to date as of 2018)*

#### Clinical Practice:

I am a duly qualified physician licensed to practice medicine in the provinces of Ontario and British Columbia and hold specialty certification in Physical Medicine and Rehabilitation through the Royal College of Physicians and Surgeons of Canada.

I have a broad based physiatry practice that includes the assessment and treatment of patients with neurologic and musculoskeletal injuries and chronic pain.

I practice physiatry in a multidisciplinary setting in Oakville, Ontario where I work alongside other allied health care professionals assessing musculoskeletal problems and chronic pain, and developing rehabilitative and return to work programs for patients. I am consulted when pain and/or physical impairment is preventing a patient from achieving their desired level of independence including vocational, avocational and social disability. I deploy a variety of techniques including medications, injections, modalities, therapeutic exercise, prosthetics/orthotics and adaptive devices to maximize function. Conditions commonly diagnosed and treated include, traumatic brain injury, spinal cord injury, amputation, sprain/strain, tendinitis, radiculopathy, myofascial pain, rotator cuff tears, adhesive capsulitis, shoulder and hip labral tears, fibromyalgia, peripheral nerve injury or entrapment, brachial and lumbar plexus injuries, osteoarthritis, post-fracture pain and dysfunction, complex regional pain syndrome and chronic pain syndrome. I perform and interpret Nerve Conduction Studies and Electromyography (EMG) for patients with neurologic conditions. A large component of my practice involves managing chronic pain with injection therapy including ultrasound-guided cortisone injections, nerve blocks, trigger point injections, percutaneous needle tenotomy and platelet rich plasma injections.

Annually I attend Physiatry, EMG and Pain conferences.

I was formerly a staff physiatrist of the Complex Injury Outpatient Rehabilitation Program at the Toronto Rehabilitation Institute, University of Toronto.

I was also formerly an appointed staff physician at St. Michael's Hospital in the Head Injury Clinic.

I have performed Independent Physiatry Examinations including Accident Benefit Files, Worker's Compensation Claims, Catastrophic Assessments, Disability Claims, and Independent Medical Evaluations for both Defense and Plaintiff Counsels. I am certified in Impairment and Disability Rating by the American Board of Forensic Professionals. I have been accepted as an expert witness in the provinces of Ontario and British Columbia.



**Appointments:**

|                |   |
|----------------|---|
| 2014 – Present | <b>Physiatrist, Orvosi Medical</b>  |
| 2011 – 2014    | <b>Physiatrist, Bronte Medical</b>  |
| 2011 - 2013    | <b>Physiatrist, University Health Network</b><br>University of Toronto<br>Toronto Rehabilitation Institute<br>Department of Medicine<br>Complex Injury Outpatient Rehab |
| 2011 - 2013    | <b>Physiatrist, St. Michael's Hospital</b><br>University of Toronto<br>Head Injury Clinic<br>Department of Neurosurgery   |
| 2011 - 2016    | <b>Physiatrist, Oakville Trafalgar Memorial Hospital</b><br>Department of Medicine<br>Electromyography  |

**Clinical Interests and Physiatry Practice:**

- Acquired Traumatic Brain Injury
- Spinal Cord Injury
- Chronic Pain
- Musculoskeletal and Sports Medicine
- Electromyography
- Independent Medical Evaluations


**Education:**

|             |   |
|-------------|---|
| 2005 - 2011 | <b>Residency</b><br>Physical Medicine and Rehabilitation<br>Department of Medicine<br>University of Toronto<br>Toronto, Ontario   |
| 2001 - 2005 | <b>Doctor of Medicine</b><br>Faculty of Medicine<br>University of Toronto<br>Toronto, Ontario                                     |
| 1997 - 2001 | <b>Honours Bachelor of Arts with High Distinction</b><br>Faculty of Arts and Science<br>University of Toronto<br>Toronto, Ontario |

**Professional Memberships:**

Canadian Association of Physical Medicine and Rehabilitation 2012 - 2018  
 American Association of Physical Medicine and Rehabilitation 2012 - 2018  
 American Association of Electrodiagnostic and Neuromuscular Medicine 2012 - 2018  
 American College of Sports Medicine 2012  
 College of Physicians and Surgeons of Ontario 2011 - 2018  
 Ontario Medical Association 2011 - 2018  
 Canadian Society of Medical Evaluators 2012 - 2018

**Conferences/Courses:**

4<sup>th</sup> Annual Meeting and Review Workshop World Academy of Pain Medicine 2018  
 World Academy of Pain Medicine Ultrasonography Musculoskeletal and Neurological Ultrasound  
 in Pain Medicine 2017  
 Annual Chronic Pain Conference Harvard 2017  
 Musculoskeletal Medicine Review Course Harvard 2017  
 Neuromuscular Medicine Review Course 2017  
 AAPMR 2016  
 World Academy of Pain Medicine Ultrasonography Chronic Neck & Headache Interventional Pain  
 Workshop 2016  
 Annual Chronic Pain Conference Harvard 2015  
 AAPMR Regenerative Medicine Symposium 2015  
 8<sup>th</sup> Annual McMaster Pain Program 2014  
 11<sup>th</sup> Annual Academic Pain Day 2014  
 23<sup>rd</sup> Annual Mayo Clinic Symposium on Sports Medicine 2013  
 Electromyography and Neuromuscular Medicine 2013  
 AAPMR Advanced Diagnostic & Interventional Ultrasound Techniques for Tendinopathy 2013  
 AAPMR High Yield Musculoskeletal and Spine Ultrasound Applications 2013  
 Fundamentals of MSK Ultrasound 2013



Canadian Neuromusculoskeletal Ultrasound Symposium 2012  
 CAPMR 2012  
 ACSM 2012  
 AANEM 2012  
 AAPMR 2011, 2012  
 Botox for Chronic Migraine Program 2012  
 Canadian Society for Neurotoxins in Pain Annual Conference 2012

**Honours, Awards, and Scholarships:**

|                |  |
|----------------|--|
| 2004           | <b>OSOTF Medicine Annual Fund</b><br>Faculty of Medicine, University of Toronto  |
| 2003           | <b>Faculty of Medicine Summer Research Scholarship</b><br><i>Completed under Dr. Ralph Gilbert</i><br>Faculty of Medicine, University of Toronto   |
| 2002           | <b>Dr. Irwin Hillard Scholarship</b><br>Faculty of Medicine, University of Toronto   |
| 2002           | <b>Dr. Janey McLeod Award</b><br>Faculty of Medicine, University of Toronto  |
| 2002           | <b>Faculty of Medicine Summer Research Scholarship</b><br><i>Completed under Dr. Jeremy L Freeman</i><br>Faculty of Medicine, University of Toronto  |
| 2001 - Present | <b>International Development Bank (IDB) Scholarship</b><br>International Development Bank (IDB), Toronto   |
| 2001           | <b>University of Toronto Alumni Association Scholar</b><br><i>Awarded to graduates short-listed for John Moss Scholarship, prestigious graduating scholarship</i><br>Faculty of Arts and Sciences, University of Toronto |
| 2000           | <b>Hudson's Bay Company Scholarship</b><br><i>Highest average at end of year three in arts-based program</i><br>Faculty of Arts and Sciences, University of Toronto  |
| 2000           | <b>E. A. Robinson Silver Medal</b><br><i>Highest graduating grade point average in social sciences</i><br>Faculty of Arts and Sciences, University of Toronto  |
| 1999           | <b>The Associates of Erindale College Scholarship</b><br>Faculty of Arts and Sciences, University of Toronto   |
| 1998 - 2000    | <b>University of Toronto Scholar</b><br>Faculty of Arts and Sciences, University of Toronto  |
| 1998           | <b>Golden Key National Honor Society Scholarship</b>   |



University of Toronto Chapter, Golden Key Society

1997

**Erindale College Dean's Admission Scholarship**  
Faculty of Arts and Sciences, University of Toronto

**Research:**

**A Sample of Headache Incidence in Post Concussive Patients**

Ouchterlony D, Johnson P, Wong A, Michalak Alicja, Topolovec-Vranic J, Masanic C, **Waseem, Z**

Presented at the 4<sup>th</sup> International Conference on Concussion in Sport November 2012.

**Botulinum Toxin Injections for Low-Back pain and Sciatica**

**Waseem Z**, Boulias C, Gordon A, Ismail F, Sheean G, Furlan AD.

Cochrane Database Syst Rev. 2011 Jan 19;(1):CD008257.

**Chronic Non-Union in a Patient with Bilateral Supracondylar Distal Femur Fractures Treated Successfully with Twice Daily Low Intensity Pulsed Ultrasound**

**Waseem Z**, Ford M, Syed K, Flannery J.

PM R. 2010 Feb;2(2):159-61.

**Dr. Bassam A. Masri, Inc.***Orthopaedic Surgery*

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October 22, 2019

Privileged - Prepared for Counsel

Michael O'Meara  
**Michael O'Meara & Company Barristers**  
 109B Fort Street  
 Victoria, BC V8W 1G2

Dear Mr. O'Meara:

|            |                                   |                             |
|------------|-----------------------------------|-----------------------------|
| <b>RE:</b> | Patricia Elliott                  |                             |
|            | Date of Birth:                    | August 28, 1976             |
|            | <i>Elliott v. McCliggot et al</i> |                             |
|            | MVA Date:                         | November 8, 2012            |
|            | Claim No.:                        | P743450-0                   |
|            | Your File:                        | 10971                       |
|            | Date of Examination:              | October 21, 2019 at 9:00 am |
|            | Location of Examination:          | Diamond Health Care Centre  |

Thank you for your letter dated October 18, 2019 requesting an independent medical examination of Patricia Elliott with reference to the motor vehicle accident of November 8, 2012. I saw her in my office in the Diamond Health Care Centre in Vancouver on October 21, 2019 at 9:00 am.

**PURPOSE**

The purpose of this report is to identify the orthopaedic injuries suffered by Patricia Elliott as a result of the motor vehicle accident of November 8, 2012. In particular, I was asked to set out my opinion as to the questions posed to me in your Letter of Instruction dated October 18, 2019, which is attached as Appendix I for ease of reference.

**Patricia Elliott****MVA Date: November 8, 2012****Date of Examination: October 21, 2019****Date of Report: October 22, 2019****2**

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**QUALIFICATIONS**

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By way of introduction, I am a certified orthopaedic surgeon fully licensed to practice Medicine in the Province of British Columbia, and have been so since 1989. I graduated from the University of British Columbia, Faculty of Science, with a degree of Bachelor of Science, in 1985. Subsequently, I received a Doctor of Medicine degree from the same university in 1988. After a one year rotating internship at the Gray Nuns Hospital, University of Alberta, Edmonton, Alberta, I returned to Vancouver and completed a five year residency in Orthopaedics at the University of British Columbia, Department of Orthopaedics. I successfully graduated from this post-graduate training program in June, 1994. On November 7, 1994, I became a Fellow of the Royal College of Physician and Surgeons of Canada (Orthopaedic Surgery), having successfully passed all examinations and completed all requirements for this qualification. Between July and December 1994, I completed a post-graduate fellowship in the area of adult reconstructive orthopaedics and musculoskeletal oncology, under the direction of Dr. Clive P. Duncan. Between January 1995 and July 1995, I completed a second fellowship in adult reconstructive orthopaedics, at the Hospital for Special Surgery (affiliated with Cornell University College of Medicine) in New York City. On August 1, 1995, I commenced the practice of Orthopaedics in Vancouver. I am currently Professor and Head, Department of Orthopaedics at the University of British Columbia and at Vancouver Acute Health Services Delivery Area. I am a member of the Active Staff at the British Columbia Cancer Agency, Vancouver. From November 2011 through May 2018, I served as the Surgeon-in-Chief at Vancouver Acute Health Services, and I am Past President of the Canadian Orthopaedic Association, having served in 2014-2015. Since 2018, I have served as Chief Medical Officer for the Canadian Football League Players Association. I have provided hundreds of medical legal opinions for both the plaintiff and the defense, and have testified in the Supreme Court of BC accordingly. I am the author of numerous peer-reviewed original research articles, review articles and book chapters. My curriculum vitae is enclosed for your review.

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**DECLARATION**

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I am personally responsible for the contents of this report, which is within the field of orthopaedic surgery.



Patricia Elliott

MVA Date: November 8, 2012

Date of Examination: October 21, 2019

Date of Report: October 22, 2019

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I am aware that under Subrule 11-2(1) of the Rules of Court, I have a duty to assist the court and not be an advocate for any party. I have prepared this report in conformity with my duty to the court as articulated in Subrule 11-2(1) of the Rules of Court. If I am called upon to give oral or written testimony in relation to this matter, I will give that testimony in conformity with my duty to the court as articulated in Subrule 11-2(1) of the Rules of Court.

#### **FACTS & ASSUMPTIONS**

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This report is based on my interview and examination of Ms. Elliott in my office in the Diamond Health Care Centre in Vancouver on October 21, 2019 at 9:00 am.

In addition, I reviewed the medical records that you sent to me, and these are attached as Appendix II.

From the above, the following can be inferred:

1. Ms. Elliott is a 43-year-old woman who resides in Victoria.
2. She was involved in a motor vehicle accident on November 8, 2012 (MVA #1). She had a subsequent motor vehicle accident on May 20, 2019 (MVA #2).
3. Prior to MVA #1, she denies any problems with her neck, upper or mid back, headaches, or right arm tingling and numbness. She was not involved in any prior motor vehicle accidents. She was not involved in any prior work-related accidents, and has not had any prior musculoskeletal pain of concern.
4. **Details of MVA #1:** On November 8, 2012, she was driving a minivan with a number of children in the minivan on Cedar Hill Road in Victoria. She was stopped behind a flatbed lumber truck when the truck backed up and collided against the front of her minivan, collapsing the hood. She drove the minivan home which was 6-7 blocks away, and then it became undrivable due to fluid leaking.
5. **Initial medical consultations:** She complained of immediate pain in the neck, trapezius muscles and upper to mid back and she presented to the Gordon Head Emergency Medical Clinic on November 8, 2012 where she was

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diagnosed with soft tissue injuries and was prescribed ice, heat, and Advil. She saw her family physician, Dr. Darcie Nielsen on November 9, 2012 who diagnosed the same and noted that she had spasm in the trapezius and the rhomboids muscles on physical examination.

6. **Initial treatment:** She was treated with massage therapy from November 13, 2012 for a total of 17 sessions until June 2, 2016. She then had intermittent treatments subsequently, and she currently gets approximately 6-12 massage sessions per year. She was also treated with physiotherapy at CBI regularly from November 20, 2012 until December 2012 approximately 3 times per week. Treatment then became more sporadic and between December 2012 and January 2013 she had approximately 9 sessions. She was taught how to do exercises, which she does. Since then, she has had intermittent sessions of physiotherapy, but mostly massage therapy. The latest physiotherapy in 2019 was primarily related to right forearm and wrist injuries from MVA #2.

7. **Medical consultations:**

- a) **Physiatry:** She was seen by 2 physiatrists, initially by Dr. Corrie Graboski on May 27, 2015. Dr. Graboski performed an EMG (nerve test) which was negative. She then started to see Dr. Lena Galimova in July 2016. Dr. Galimova gave her a few trigger point injections, and Ms. Elliott told me that they helped a bit, but Dr. Galimova was not convinced of their efficacy in alleviating muscle spasm, and therefore they were stopped. She has not seen Dr. Galimova past the summer of 2016. Finally, she started treatment at the Helmcken Pain Clinic in Victoria beginning on February 4, 2019, with subsequent treatments on March 22, May 17, June 18, and July 19, 2019. In each of these visits she received trigger point injections. She finds that the trigger point injections give her a 30-40% decrease in pain lasting approximately 2 weeks, and she finds that these injections are worthwhile, and she continues with them.
- b) **Family doctor recommendation:** In addition, at the recommendation of her family physician, Dr. Nielsen, she started swimming in 2013. This was helpful, but she had to stop swimming in the spring of 2018 when she was diagnosed with psoriasis, which responds well to hydrocortisone cream.

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8. Symptom progression and current symptoms:

- a) Since The Accident, she has complained of pain in the neck, trapezius muscles, upper and mid back to the level of the shoulder blades worse on the right than on the left.
- b) This is also associated with headaches in the back of the head that are worse when the neck and back symptoms are worse.
- c) She also complained of occasional intermittent tingling in the right upper extremity with occasional numbness going to the long and index fingers, also when the neck and back symptoms are worse.
- d) Initially, after The Accident, she complained of low back pain that resolved within a short period of time. She no longer has any low back pain.
- e) Apart from the low back pain which resolved, she feels that there has been an improvement in symptoms of approximately 20-30% since the motor vehicle accident, and these symptoms stabilized approximately 5-6 years ago.

9. Current symptoms:

- a) **Neck/back pain:** She complains of a constant pain in the neck and upper and mid back going into the trapezius muscles, worse on the right than on the left, that is a low-grade ache rated at 1-2 out of 10 on average. With aggravation, it can go up to 3-5 out of 10 (mild to moderate pain). The aggravating factors include repetitive movement such as repetitive heavy lifting, repetitive movements of the upper extremity such as sweeping her entire 1500-2000 ft.<sup>2</sup> house. If she paces herself, the symptoms are better. Sitting in a static position for more than 30 minutes also worsens her pain, and as long as she changes positions and stretches the pain is improved. On occasion, she has random more severe exacerbations that happen every 2-3 months and last approximately one week. When she has these random exacerbations, she takes more Tylenol and anti-inflammatories, which she already takes regularly one to 2 times per day. She also goes to massage therapy once or twice, which improves the aggravation.

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- b) **Headaches:** She complains of occipital headaches that are constant and are generally a dull ache that is not disabling. However, when her neck and back symptoms are worse, the headaches are worse.
- c) **Numbness and tingling right upper extremity:** She complains of tingling going down the right upper extremity from the shoulder all the way down but this only happens once every 2-3 months when the neck and the back symptoms are much more severe. There is occasional numbness that is transient in the index and long fingers, but neither the tingling nor the numbness is accompanied by pain, and neither is disabling.
10. **Details of MVA #2:** On May 20, 2019, she was driving in a row of 4 cars in a parkade in Victoria, and she was the third car in line. The first car backed up, and the second car backed up to avoid a collision against the first car but unfortunately, it collided against her car. She was hitting the horn with her right hand, and complained of pain in the right forearm and the right wrist as a result of the impact. She was treated with physiotherapy and this has gradually improved and has mostly resolved with no further disability. In terms of the effect on her neck and upper to mid back symptoms, these were aggravated for 1 day, and returned to baseline. She has not had any subsequent injuries.
11. **Social arrangements:** She is a single mother of 3 children ages 23, 18, and 13. The 23-year-old moved out 1 month ago, and the 18-year-old moved out approximately 1 year ago to live with his father. She currently only lives with the 13-year-old in a rented house in Victoria of 1500-2000 ft.<sup>2</sup>. At the time of the motor vehicle accident, she was living with her children in a rented house in Victoria and was operating a day care. After The Accident, she was unable to return to operating a day care, and was ultimately evicted in February 2013 and moved to another rented house. She was responsible for the yardwork in the initial house, but since moving to the subsequent house, she is not required to do any yard work as this was the responsibility of the landlord. She subsequently moved to another rental house, which is her current home, and she is also not responsible for any yardwork.

After MVA #1, she had difficulty with housework and yardwork, and she had to hire help until April 2013, when she returned to work. After MVA #2, she

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also had some difficulty with housework because of pain in the right upper extremity, but she has resumed doing her housework. She is able to do it although she has to pace herself. For seasonal and heavier cleaning, her best friend helps her. She also required assistance with hiring movers.

12. **Recreational pursuits:** She used to enjoy going to the gym, but she has been unable to return to the gym because the exercises that she was doing before aggravate her pain. She also enjoyed playing ten pin bowling, and she has been unable to return to those activities due to the pain induced by the heavy bowling ball. She has no other recreational pursuits that she is unable to do.
13. **Work:** Prior to 2007, she was working in an office setting. In 2007, she started a home-based daycare business, which she was running until 2012. After MVA #1, she had to shut down her day care, and in April 2013, she started doing office work at Bradshaw Property Management. In the fall of 2015, her son was having difficulties with depression, and she took 2 months off work, and she quit working at Bradshaw Property Management. In January 2016, she became a bookkeeper at Craftsman Collision where she worked full time until MVA #2. After MVA #2, she was off work for 3 weeks and then she returned working 4 hours per day in July 2019 and 5 hours per day in August 2019. For personal reasons, she switched jobs and started working for Harbour Door Company doing bookkeeping in September 2019 on a full-time basis. She does not have a sit/stand desk, and she is able to tolerate the pain although prolonged sitting aggravates her pain.
14. **Relevant imaging:**
  - a) **Cervical spine:** She had x-rays of the cervical spine with flexion and extension views on June 14, 2016, and these were reported as normal.
  - b) **Cervical spine:** She had x-rays of the cervical spine on March 3, 2015 and this were reported as showing slight reversal of the normal spinal curvature with no other features of an acute bone or joint injury.
15. The relevant features on **physical examination**, which was performed in the presence of my assistant, Ms. Julie Szendrey, were as follows:

Patricia Elliott

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- She is 156 cm tall and weighs 63 kg.
  - She walks with a normal gait and is able to walk on her toes, on her heels, and squat without difficulty.
  - Her posture when she is sitting is that of a slight shoulder forward position.
  - Examination of the cervical spine revealed normal spinal contours. Range of motion of the cervical spine was full, although rotation to the left as well as lateral flexion to the left aggravated pain in the right trapezius muscle as well as pain at the base of the skull at the paraspinal muscles.
  - She had markedly tender trigger points in the paraspinal muscles, the mid trapezius muscles above the clavicles, and in the periscapular muscles, especially on the right much more so than the left. She had a tender bulge consistent with muscle spasm at the right rhomboid/levator scapulae insertion into the scapula.
  - Lumbar spine examination was normal.
  - Bilateral shoulder examination was normal.
  - Spurling's sign was negative bilaterally.
  - Thoracic outlet testing showed features of mild neurogenic thoracic outlet syndrome. Adson's test was negative. The Roos test (aka EAST test) was positive for some numbness and tingling in the right index and long fingers. The military brace position was negative.
  - Nerve and blood vessel examination was otherwise normal.
  - Examination of the right forearm and right wrist showed slight swelling over the *abductor pollicis longus* and *extensor pollicis longus* tendons just proximal to the wrist laterally with a positive Finkelstein's test. She was slightly tender to palpation as well.

Patricia Elliott

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## OPINION

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1. **Injuries from MVA #1:** As a result of MVA #1, Ms. Elliott suffered from Whiplash Associated Disorder Type II affecting her neck leading to myofascial pain affecting the neck, trapezius muscles, upper and mid back to the level of the shoulder blades, with associated cervicogenic headaches. This stabilized quite a few years ago, and gives her a mild ache on an ongoing basis, with moderate chronic pain aggravations with repetitive use and with prolonged sitting. The spasm as well as her postural maladaptation (shoulder forward posture) has resulted in very mild post-traumatic neurogenic thoracic outlet syndrome affecting the right upper extremity but only causing mild numbness and tingling symptoms every 2-3 months without pain. She had to take a few months off work after MVA #1 and resumed work in early April 2013.
2. **Injuries from MVA #2:** MVA #2 only aggravated the symptoms from MVA #1 for a day or so, and for all intents and purposes did not have any material effect on the injuries from MVA #1. In addition, she suffered an injury affecting the right forearm leading to tendinitis as evidenced by the positive Finkelstein's test and the slight residual swelling and tenderness at the confluence of the *abductor pollicis longus* and *extensor pollicis brevis* tendons as noted on physical examination. The effect of the injuries to her right upper extremity after MVA #2 have pretty well resolved and do not cause her any disability. She had a disability lasting approximately 1-2 months, the most severe of which was the initial 3 weeks, for which she had to take time off work.
3. **Causation:** The majority of her ongoing chronic myofascial pain affecting the neck, upper, and mid back are caused by MVA #1. The only effect of MVA #2 is a transient aggravation for 1 day. Therefore, her ongoing symptoms in those areas are solely caused by MVA #1.
4. **Prognosis:** As it has been many years since The Accident, I do not believe that her symptoms will change over time. They will not necessarily significantly improve nor will they worsen over time. She is not at risk of developing any degenerative conditions. She is not at risk of requiring any surgery.
5. **Treatment recommendations:** She found that swimming was quite helpful, and as is common with these conditions, exercise-based therapy is also very

Patricia Elliott

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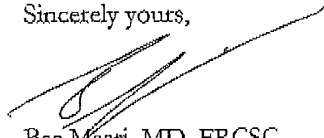
Date of Report: October 22, 2019

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helpful. I would recommend that she return to swimming as swimming should not have an adverse effect on her psoriasis, especially if the psoriasis is not active. When the psoriasis is active, and if she does not feel comfortable swimming, then she can stop swimming while she is treating the psoriasis. In addition, I would recommend a course of active rehabilitation with a kinesiologist or trainer, ideally to work with her in the gym to allow her to gradually get back to the gym as she used to enjoy going to the gym. This should consist of sessions three times a week for the first 2 months, then reducing frequency with monthly monitoring over one year to ensure that she is doing the exercises in a manner that does not aggravate her pain. She also needs to continue to perform postural exercises to improve her posture especially when sitting.

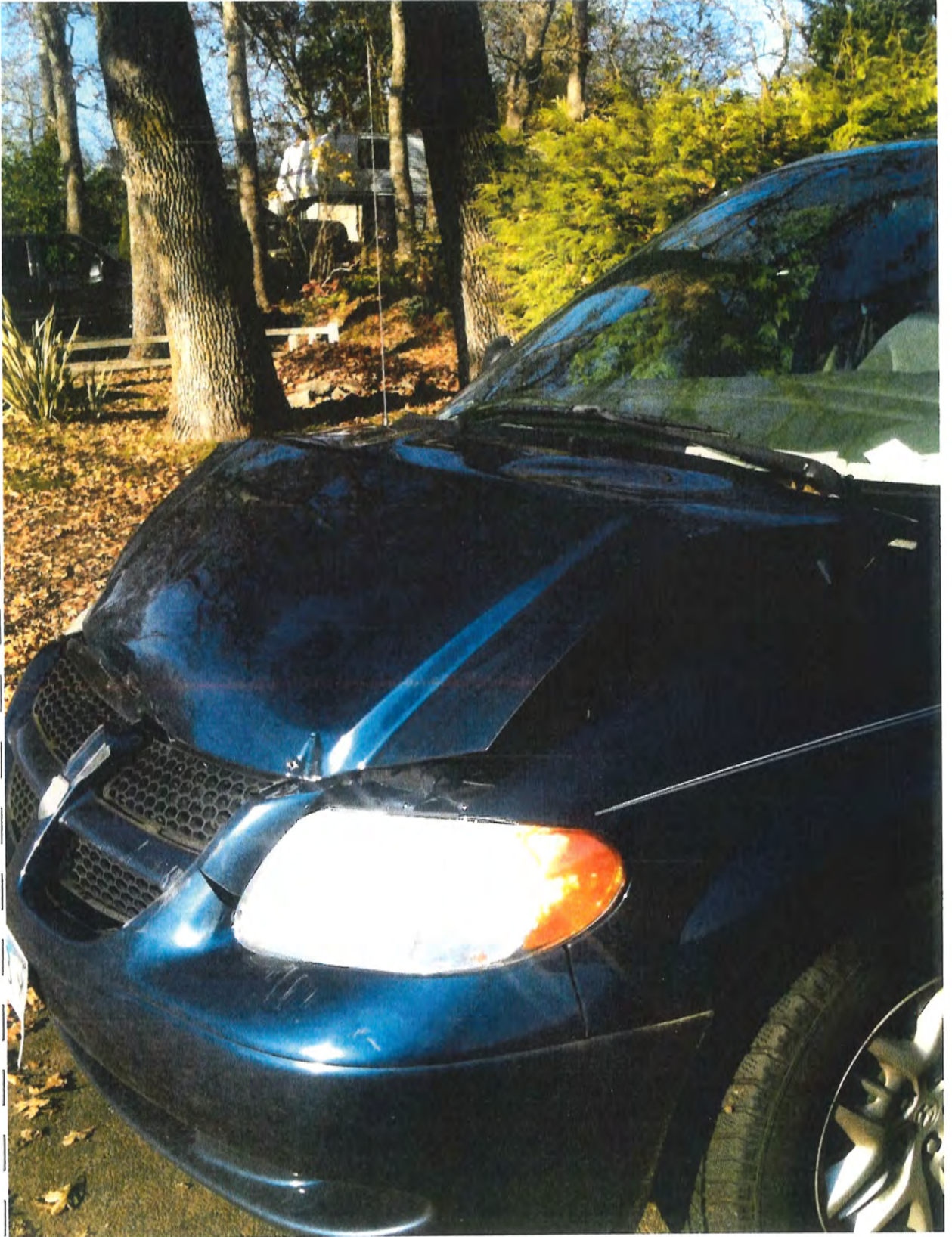
6. **Impairment:** She has a slight impairment in terms of housework and yard work in that she requires assistance with seasonal work from her best friend. As long as her friend is willing to help, she does not require any specific professional assistance. If her friend is unable to help, then she may require some assistance with seasonal housework. Also, she does not have to do any yard work at the present time, and therefore, no assistance is required. However, if she had to do yard work, she might require assistance in that regard. Finally, if she were to move again, I do not believe that she will be able to move the furniture on her own and she will need to hire movers.
7. **Work:** I would recommend that she be provided with a sit/stand desk to make her work more comfortable. As long as she works in a sedentary capacity, I do not believe that she will have difficulties with work in the future. She is not suited to work in a daycare due to the more physical nature of the work in a daycare.

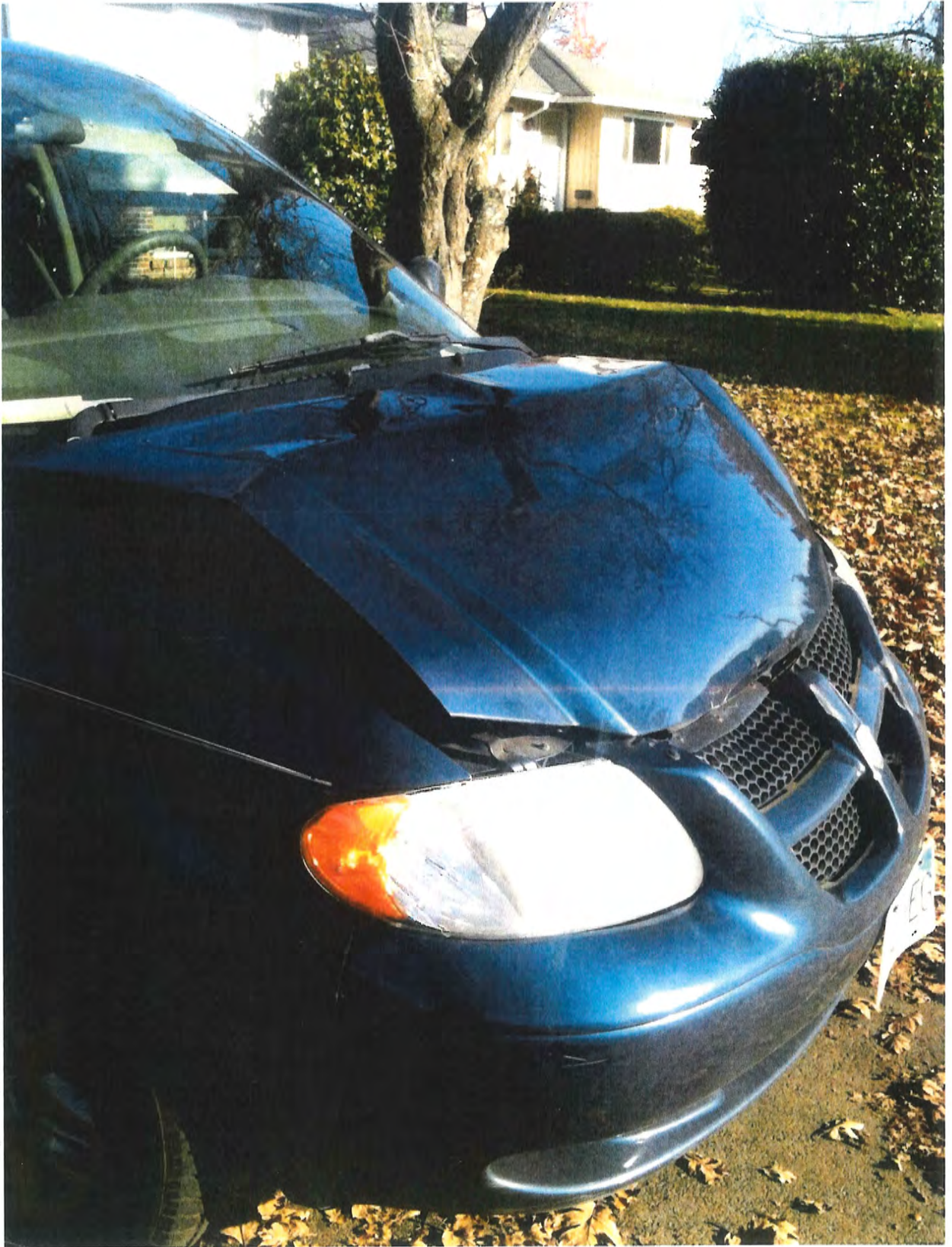
Sincerely yours,



Bas Masti, MD, FRCSC  
 Professor and Head, Department of Orthopaedics  
 University of BC and Vancouver Acute  
 :msp











Canada Revenue Agency

Agence du revenu du Canada

**T1 GENERAL 2009**

BC 7

**Identification**

**Income Tax and Benefit Return**

First name: Patricia D.  
 Last name: Elliott  
 Mailing Address:  
 Apt. No. \_\_\_\_\_  
 No./Street: 990 Ambassador Avenue  
 PO Box, RR \_\_\_\_\_  
 City: Victoria  
 Prov./Terr.: BC Postal code: V8X 3N2

**Information about you**  
 Your social insurance number: \_\_\_\_\_  
 Your date of birth: 1976/08/28  
 Your language of correspondence:  
 Votre langue de correspondance : English  Français   
 Marital status on December 31, 2009: 6. Single

**Information about your residence**  
 Province or territory of residence on December 31, 2009: British Columbia  
 Province/territory where you currently reside if not the same as your mailing address above: \_\_\_\_\_  
 Province or territory of self-employment: British Columbia  
 If you became or ceased to be a resident of Canada in 2009, give the date of: entry \_\_\_\_\_ or departure: \_\_\_\_\_

**Information about your spouse or common-law partner (if applicable)**  
 His or her SIN: \_\_\_\_\_  
 His/her first name: \_\_\_\_\_  
 Enter his or her net income for 2009 to claim certain credits: \_\_\_\_\_  
 Enter amount of Universal Child Care Benefit included on line 117 of his or her return: \_\_\_\_\_  
 Enter the amount of Universal Child Care Benefit repayment included on line 213 of his or her return: \_\_\_\_\_  
 Tick this box if he or she was self-employed in 2009: 1

If this return is for a deceased person, enter the date of death: \_\_\_\_\_  
 Do not use this area

**Elections Canada (see Help)**  
 A) Are you a Canadian citizen? Yes  1 No  2  
 Answer the following question only if you are a Canadian citizen.  
 B) As a Canadian citizen, do you authorize the Canada Revenue Agency to give your name, address, date of birth, and citizenship to Elections Canada to update the National Register of Electors? Yes  1 No  2  
 Your authorization is valid until you file your next return. Your information will only be used for purposes permitted under the *Canada Elections Act* which includes sharing the information with provincial/territorial election agencies, Members of Parliament and registered political parties, as well as candidates at election time.

**Goods and services tax/harmonized sales tax (GST/HST) credit application**  
 See Help for details.  
 Are you applying for the GST/HST credit (including any related provincial credit)? Yes  1 No  2



|                      |     |  |  |  |  |     |  |  |  |  |
|----------------------|-----|--|--|--|--|-----|--|--|--|--|
| Do not use this area | 172 |  |  |  |  | 171 |  |  |  |  |
|----------------------|-----|--|--|--|--|-----|--|--|--|--|



Name: Patricia Elliott

T2125

**Statement of Business or Professional Activities**

- For each business or profession, complete a **separate** Form T2125.
- File each completed Form T2125 with your *Income Tax and Benefit Return*.
- For more information, see **Help**.

| Identification        |                     |                     |   |
|-----------------------|---------------------|---------------------|---|
| Your name             | Patricia Elliott    |                     | SIN <span style="background-color: black; color: black;">[REDACTED]</span>                  |
| From:                 | 2009/01/01          | to: 2009/12/31      | Final year of business? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> |
| Business name         | Tricia's Toybox     |                     | Main product or service child care  |
| Business address      | 1267 Lonsdale Place |                     | Industry code 624410  |
| City or town          | Victoria            |                     |   |
| Province or territory | BC                  | Postal code V8P 5L3 | Partnership ID #  |
| Preparer's name       |                     |                     | Tax shelter ID #  |
| Address               |                     |                     |   |
| Business number       |                     |                     | Your percentage of the partnership %  |

**Part 1 – Business income**

2.  If you have business income, tick this box and complete this part. **Do not complete parts 1 and 2 on the same form.**

|   |        |    |   |
|---|--------|----|---|
| Sales, commissions, or fees   | 33,502 | 00 | A |
| Foreign business income (from T3 slips)   |        |    |   |
| Self employment income reported on T4 slips (Box 81, 82, or 83)   |        |    |   |
| <b>Minus</b>  |        |    |   |
| Goods and services tax/harmonized sales tax (GST/HST) and provincial sales tax (PST) (if included in sales above) |        |    |   |
| Returns, allowances, and discounts (if included in sales above)   |        |    |   |
| <b>Total of above two lines</b>   |        |    | B |
| <b>Adjusted gross sales (line A minus line B)</b> (enter this amount on line 8000 in below)                       | 33,502 | 00 | C |

**Part 2 – Professional income**

3.  If you have professional income, tick this box and complete this part. **Do not complete parts 1 and 2 on the same form.**

|  |  |  |   |
|--|--|--|---|
| Professional fees (includes work-in-progress)  |  |  | D |
| <b>Minus</b>   |  |  |   |
| Goods and services tax and provincial sales tax (GST and PST) or harmonized sales tax (HST) (if included in sales above) |  |  |   |
| Work-in-progress (WIP), end of the year, per election to exclude WIP (see Help)  |  |  |   |
| <b>Total of above two lines</b>  |  |  | E |
| <b>Plus</b>  |  |  |   |
| Work-in-progress (WIP), start of the year, per election to exclude WIP (see Help)  |  |  |   |
| <b>Adjusted professional fees (total of the above two lines)</b> (enter this amount on line 8000 in Part 3, below)       |  |  | F |

**Part 3 – Gross business or professional income**

|  |      |        |    |   |
|--|------|--------|----|---|
| Adjusted gross sales (from line C in Part 1) or adjusted professional fees (from line F in Part 2) | 8000 | 33,502 | 00 | G |
| <b>Plus</b>  |      |        |    |   |
| Reserves deducted last year  | 8290 |        |    |   |
| Other income   | 8230 |        |    |   |
| Recapture of capital cost allowance  |      |        |    |   |
| <b>Gross business or professional income (line G plus line H)</b>                                  | 8299 | 33,502 | 00 | H |

Enter this amount on the appropriate line of your income tax and benefit return: business on line 162, professional on line 164, or commission on line 166.

Name: Patricia Elliott SIN: [REDACTED]

T2125  
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**Statement of Business or Professional Activities**

**Part 4 – Cost of goods sold and gross profit**

If you have business income, complete this part. Enter only the business part of the costs.

|   |      |  |        |        |    |
|---|------|--|--------|--------|----|
| Gross business income from line 8299 in Part 3 on page 1                        |      |  | 33,502 | 00     | I  |
| Opening inventory (include raw materials, goods in process, and finished goods) | 8300 |  |        |        |    |
| Purchases during the year (net of returns, allowances, and discounts)           | 8320 |  |        |        |    |
| Direct wage costs   | 8340 |  |        |        |    |
| Subcontracts  | 8360 |  |        |        |    |
| Other costs, specify:   | 8450 |  |        |        |    |
| <b>Total of above five lines</b>  |      |  |        |        |    |
| <b>Minus</b>  |      |  |        |        |    |
| Closing inventory (include raw materials, goods in process, finished goods)     | 8500 |  |        |        |    |
| <b>Cost of goods sold</b>   | 8518 |  |        |        | J  |
| <b>Gross profit (line I minus line J)</b>                                       |      |  | 8519   | 33,502 | 00 |

**Part 5 – Net income (loss) before adjustments**

Gross profit from line 8519 in Part 4 above, or gross income from line 8299 in Part 3 on page 1

|   |      |   |         |        |        |    |
|---|------|---|---------|--------|--------|----|
|   |      |   |         | 33,502 | 00     | K  |
| <b>Expenses (enter only the business part)</b>                                      |      |   |         |        |        |    |
| Advertising   | 8521 |   |         |        |        |    |
| Meals and entertainment   | 8523 | X | 50.00 % |        |        |    |
| Meals and entertainment - long haul truck drivers                                   | 8523 | X | 70.00 % |        |        |    |
| Bad debts   | 8590 |   |         |        |        |    |
| Insurance   | 8690 |   |         |        |        |    |
| Interest  | 8710 |   |         |        |        |    |
| Business tax, fees, licences, dues, memberships                                     | 8760 |   |         |        |        |    |
| Office expenses   | 8810 |   |         |        |        |    |
| Supplies  | 8811 |   |         | 3,595  | 97     |    |
| Legal, accounting, and other professional fees                                      | 8860 |   |         |        |        |    |
| Management and administration fees  | 8871 |   |         | 144    | 00     |    |
| Rent  | 8910 |   |         |        |        |    |
| Maintenance and repairs   | 8960 |   |         | 5,267  | 98     |    |
| Salaries, wages, and benefits (including employer's contributions)                  | 9060 |   |         |        |        |    |
| Property taxes  | 9180 |   |         |        |        |    |
| Travel (including transportation fees, accommodations, and allowable part of meals) | 9200 |   |         |        |        |    |
| Telephone and utilities   | 9220 |   |         |        |        |    |
| Fuel costs (except for motor vehicles)  | 9224 |   |         |        |        |    |
| Delivery, freight, and express  | 9275 |   |         |        |        |    |
| Motor vehicle expenses (not including CCA) (see Chart A on page 5)                  | 9281 |   |         | 4,992  | 99     |    |
| Allowance on eligible capital property  | 9935 |   |         |        |        |    |
| Capital cost allowance (from Area A on page 4)                                      | 9936 |   |         |        |        |    |
| Other expenses (specify)  | 9270 |   |         |        |        |    |
| <b>Total business expenses</b>  | 9368 |   |         | 14,000 | 94     | L  |
| <b>Net income (loss) before adjustments (line K minus line L)</b>                   |      |   |         | 9369   | 19,501 | 06 |

**Part 6 – Your net income (loss)**

Your share of the amount on line 9369 in Part 5 above

|  |      |  |  |        |    |   |
|--|------|--|--|--------|----|---|
|  |      |  |  | 19,501 | 06 | M |
| <b>Plus:</b> GST/HST rebate for partners received in the year (see Help)   | 9974 |  |  |        |    | N |
| <b>Total (line M plus line N)</b>  |      |  |  | 19,501 | 06 | O |
| <b>Minus:</b> Other amounts deductible from your share of net partnership income (loss) (from the chart on page 3) | 9943 |  |  |        |    | P |
| <b>Net income (loss) after adjustments (line O minus line P)</b>   |      |  |  | 19,501 | 06 | Q |
| <b>Minus:</b> Business-use-of-home expenses (your share of line 3 from the chart on page 3)                        | 9945 |  |  | 12,725 | 52 | R |
| <b>Your net income (loss) (line Q minus line R)</b>  | 9946 |  |  | 6,775  | 54 |   |

Enter this amount on the appropriate line of your income tax and benefit return: business on line 135, professional on line 137, or commission on line 139.







Name: Patricia Elliott SIN: [REDACTED]

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**Statement of Business or Professional Activities**

**Area D - Details of equipment dispositions in the year**

| Class #         | Property details | Proceeds | Personal | Business |
|-----------------|------------------|----------|----------|----------|
|                 |                  |          |          |          |
|                 |                  |          |          |          |
|                 |                  |          |          |          |
|                 |                  |          |          |          |
| <b>Subtotal</b> |                  |          |          |          |

**Details of motor vehicle dispositions in the year**

| Class #         | Property details | Proceeds |
|-----------------|------------------|----------|
|                 |                  |          |
|                 |                  |          |
|                 |                  |          |
|                 |                  |          |
| <b>Subtotal</b> |                  |          |

Total equipment dispositions in the year 9926

**Area E - Details of building dispositions in the year**

| Class #  | Property details | Proceeds | Personal | Business |
|--|------------------|----------|----------|----------|
|  |                  |          |          |          |
|  |                  |          |          |          |
|  |                  |          |          |          |
| <b>Total building dispositions in the year</b> |                  |          |          | 9928     |

Note: If you disposed of property from your business in the year see Help.

**Area F - Details of land additions and dispositions in the year**

|   |      |
|---|------|
| Total cost of all land additions in the year          | 9923 |
| Total proceeds from all land dispositions in the year | 9924 |

Note: You cannot claim capital cost allowance on land.

**Chart A - Motor vehicle expenses**

|   | Auto A   | Auto B   |    |
|---|----------|----------|----|
| Enter the kilometres you drove in the tax year to earn business income                  | 2,152    |          | 1  |
| Enter the total kilometres you drove in the tax year                                    | 4,257    |          | 2  |
| Percentage  | 50.6     |          |    |
| Fuel and oil  | 740 11   |          | 3  |
| Interest (see Chart B below)  |          |          | 4  |
| Insurance   | 1,620 00 |          | 5  |
| Licence and registration  |          |          | 6  |
| Maintenance and repairs   | 670 58   |          | 7  |
| Leasing (see Chart C below)   | 6,836 88 |          | 8  |
| Other expenses (specify)  |          |          | 9  |
|   |          |          | 10 |
| <b>Total motor vehicle expenses (add lines 3 to 10)</b>                                 | 9,867 57 |          | 11 |
| Business use part:  | 4,992 99 |          | 12 |
| Business parking fees   |          |          | 13 |
| Supplementary business insurance  |          |          | 14 |
| Add lines 12, 13, and 14  | 4,992 99 |          |    |
| <b>Allowable motor vehicle expenses (enter amount on line 9281 in Part 5 on page 2)</b> |          | 4,992 99 |    |

Note: You can claim CCA on motor vehicles in Area A on page 4.

Name: Patricia Elliott SIN: [REDACTED]

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Statement of Business or Professional Activities

**Chart B -- Available interest expense for passenger vehicles**

|   | Auto A  | Auto B  |
|---|---------|---------|
| Total interest payable (accrual method) or paid (cash method) in the fiscal period                | _____ A | _____ A |
| Date interest payments  |         |         |
| Auto A: started: _____ ended: _____ Total days interest paid                                      | _____   |         |
| Auto B: started: _____ ended: _____ Total days interest paid                                      |         | _____   |
| Purchase date of vehicle  |         |         |
| Auto A: _____ = * _____ /day =  | _____ B |         |
| Auto B: _____ = * _____ /day =  |         | _____ B |
| <b>Available interest expense</b> (amount A or B, whichever is less) (enter on line 4 of Chart A) | _____   | _____   |

\* For passenger vehicles bought from 2001 to 2009.

**Chart C -- Eligible leasing costs for passenger vehicles**

|  | Auto A     | Auto B  |
|--|------------|---------|
| Lease commencement date  | 2006/08/01 | _____   |
| Lease termination date (if terminated in 2009)   | _____      | _____   |
| Total number of days the vehicle was leased in your 2009 and previous fiscal periods                   | 1249       | 365 1   |
| PST or HST rate  | 7.0        | 7.0     |
| Total lease charges incurred in your 2009 fiscal period for the vehicle                                | 6,836 88   | _____ 2 |
| Total lease payments deducted before your 2009 fiscal period for the vehicle                           | 10,821 42  | _____ 3 |
| Manufacturer's list price  | 18,000 00  | _____ 4 |
| Amount on line 4 or (\$35,294 + GST* and PST, or HST* on \$35,294), whichever is more x 85%            | 33,599 89  | _____ 5 |
| [\$(\$800 + GST* and PST, or HST* on \$800) x line 1] / 30 - line 3                                    | 26,482 05  | _____ 6 |
| [\$(\$30,000 + GST* and PST, or HST* on \$30,000) x line 2] / line 5                                   | 6,836 90   | _____ 7 |
| <b>Eligible leasing cost</b> (line 6 or 7, whichever is less) (enter this amount on line 8 of Chart A) | 6,836 88   | _____   |

\* Use a GST rate of 5% or HST rate of 13% starting January 1, 2008.

Name: Patricia Elliott SIN: [REDACTED]

BUS

**Business Income Summary**

|   |                          |                        |            |
|---|--------------------------|------------------------|------------|
| <b>Business #1:</b>                             |                          | Gross income           | Net income |
| Name  | Tricia's Toybox          | 33,502   00            | 6,775   54 |
| Business number                                 | Fiscal period            |                        |            |
|   | 2009/01/01 to 2009/12/31 |                        |            |
| Reconciliation of 2009 Business Income (T1139): |                          | Net income (loss) from |            |
| 2008 additional business income                 |                          | T1139 form for 2009    |            |
| (from line G of your 2008 T1139 form)           |                          | (if applicable)        |            |

|   |               |                        |            |
|---|---------------|------------------------|------------|
| <b>Business #2:</b>                             |               | Gross income           | Net income |
| Name  |               |                        |            |
| Business number                                 | Fiscal period |                        |            |
|   | to            |                        |            |
| Reconciliation of 2009 Business Income (T1139): |               | Net income (loss) from |            |
| 2008 additional business income                 |               | T1139 form for 2009    |            |
| (from line G of your 2008 T1139 form)           |               | (if applicable)        |            |

|   |               |                        |            |
|---|---------------|------------------------|------------|
| <b>Business #3:</b>                             |               | Gross income           | Net income |
| Name  |               |                        |            |
| Business number                                 | Fiscal period |                        |            |
|   | to            |                        |            |
| Reconciliation of 2009 Business Income (T1139): |               | Net income (loss) from |            |
| 2008 additional business income                 |               | T1139 form for 2009    |            |
| (from line G of your 2008 T1139 form)           |               | (if applicable)        |            |

|   |               |                        |            |
|---|---------------|------------------------|------------|
| <b>Business #4:</b>                             |               | Gross income           | Net income |
| Name  |               |                        |            |
| Business number                                 | Fiscal period |                        |            |
|   | to            |                        |            |
| Reconciliation of 2009 Business Income (T1139): |               | Net income (loss) from |            |
| 2008 additional business income                 |               | T1139 form for 2009    |            |
| (from line G of your 2008 T1139 form)           |               | (if applicable)        |            |

|   |  |              |            |
|---|--|--------------|------------|
| <b>T5013 slips:</b>                     |  | Gross income | Net income |
| Business income from your T5013 slips   |  |              |            |
| (including adjustments from form T1139) |  |              |            |

|  |                 |                |
|--|-----------------|----------------|
|  | Gross income    | Net income     |
| Business income to report on your tax return                     | 162 33,502   00 | 135 6,775   54 |
| Self-employment income for the Working Income Tax Benefit (WITB) |                 | 6,775   54     |

**Identification**

First name: Patricia D.  
 Last name: Elliott  
 Mailing Address:  
 Apt. No.: \_\_\_\_\_  
 No./Street: 990 Ambassador Avenue  
 PO Box, RR: \_\_\_\_\_  
 City: Victoria  
 Prov./Terr.: BC Postal code: V8X 3N2

**Information about you**

Your social insurance number: \_\_\_\_\_  
 Your date of birth: 1976/08/28  
 Your language of correspondence:  
 Votre langue de correspondance : English  Français   
 Marital status on December 31, 2010: 6. Single

**Information about your residence**

Province or territory of residence on December 31, 2010: British Columbia  
 Province/territory where you currently reside if not the same as your mailing address above: \_\_\_\_\_  
 Province or territory of self-employment: British Columbia  
 If you became or ceased to be a resident of Canada in 2010, give the date of: entry \_\_\_\_\_ or departure: \_\_\_\_\_

**Information about your spouse or common-law partner (if applicable)**

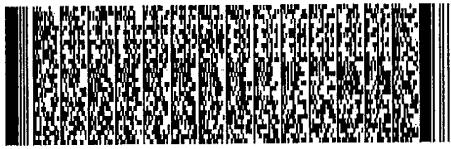
His or her SIN: \_\_\_\_\_  
 Enter his or her first name: \_\_\_\_\_  
 Enter his or her net income for 2010 to claim certain credits: \_\_\_\_\_  
 Enter amount of Universal Child Care Benefit included on line 117 of his or her return: \_\_\_\_\_  
 Enter the amount of Universal Child Care Benefit repayment included on line 213 of his or her return: \_\_\_\_\_  
 Tick this box if he or she was self-employed in 2010: 1

If this return is for a deceased person, enter the date of death: \_\_\_\_\_  
 Do not use this area

**Elections Canada (see Help)**

A) Are you a Canadian citizen? Yes  1 No  2  
 Answer the following question only if you are a Canadian citizen.  
 B) As a Canadian citizen, do you authorize the Canada Revenue Agency to give your name, address, date of birth, and citizenship to Elections Canada to update the National Register of Electors? Yes  1 No  2  
 Your authorization is valid until you file your next return. Your information will only be used for purposes permitted under the *Canada Elections Act* which includes sharing the information with provincial/territorial election agencies, Members of Parliament and registered political parties, as well as candidates at election time.

**Goods and services tax/harmonized sales tax (GST/HST) credit application**  
 See **Help** for details.  
 Are you applying for the GST/HST credit (including any related provincial credit)? Yes  1 No  2



|                      |     |  |  |  |  |     |  |  |  |
|----------------------|-----|--|--|--|--|-----|--|--|--|
| Do not use this area | 172 |  |  |  |  | 171 |  |  |  |
|----------------------|-----|--|--|--|--|-----|--|--|--|



Name: Patricia Elliott SIN: [REDACTED]

T2125

**Statement of Business or Professional Activities**

- For each business or profession, complete a **separate** Form T2125.
- File each completed Form T2125 with your *Income Tax and Benefit Return*.
- For more information, see **Help**.

**Identification**

|                                   |                       |             |            |                                      |   |
|-----------------------------------|-----------------------|-------------|------------|--------------------------------------|---|
| Your name                         | Patricia Elliott      |             |            | SIN                                  | [REDACTED]  |
| From:                             | 2010/01/01            | to:         | 2010/12/31 | Final year of business?              | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> X |
| Business name                     | Tricia's Toybox       |             |            | Main product or service              | child care  |
| Business address                  | 990 Ambassador Avenue |             |            | Industry code                        | 624410  |
| City or town                      | Victoria              |             |            | Partnership ID # (9 digits)          |   |
| Province or territory             | BC                    | Postal code | V8X 3N2    | Tax shelter ID #                     |   |
| Preparer's name                   |                       |             |            | Partnership ID # (9 digits)          |   |
| Address                           |                       |             |            | Tax shelter ID #                     |   |
| Account Number<br>(15 characters) |                       |             |            | Your percentage of the partnership % |   |

**Part 1 – Business income**

2.  If you have business income, tick this box and complete this part. Do not complete parts 1 and 2 on the same form.

|  |  |        |    |   |
|--|--|--------|----|---|
| Sales, commissions, or fees  |  | 28,617 | 00 | A |
| Income reported on T4A slips   |  |        |    |   |
| Self employment income reported on T4 slips (Box 81, 82, or 83)  |  |        |    |   |
| <b>Minus</b>   |  |        |    |   |
| Goods and services tax/harmonized sales tax (GST/HST) and provincial sales tax (PST)<br>(if included in sales above) |  |        |    |   |
| Returns, allowances, and discounts (if included in sales above)  |  |        |    |   |
| <b>Total of above two lines</b>  |  |        |    | B |
| <b>Adjusted gross sales (line A minus line B)</b> (enter this amount on line 8000 in Part 3 below)                   |  | 28,617 | 00 | C |

**Part 2 – Professional income**

3.  If you have professional income, tick this box and complete this part. Do not complete parts 1 and 2 on the same form.

|   |  |  |  |   |
|---|--|--|--|---|
| Professional fees (includes work-in-progress)   |  |  |  | D |
| <b>Minus</b>  |  |  |  |   |
| Goods and services tax and provincial sales tax (GST and PST) or harmonized sales tax (HST)<br>(if included in sales above) |  |  |  |   |
| Work-in-progress (WIP), end of the year, per election to exclude WIP (see Help)   |  |  |  |   |
| <b>Total of above two lines</b>   |  |  |  | E |
| <b>Subtotal (line D minus line E)</b>   |  |  |  |   |
| <b>Plus</b>   |  |  |  |   |
| Work-in-progress (WIP), start of the year, per election to exclude WIP (see Help)   |  |  |  |   |
| <b>Adjusted professional fees (total of the above two lines)</b> (enter this amount on line 8000 in Part 3 below)           |  |  |  | F |

**Part 3 – Gross business or professional income**

|  |      |        |    |   |
|--|------|--------|----|---|
| Adjusted gross sales (from line C in Part 1) or adjusted professional fees (from line F in Part 2) | 8000 | 28,617 | 00 | G |
| <b>Plus</b>  |      |        |    |   |
| Reserves deducted last year  | 8290 |        |    |   |
| Other income   | 8230 |        |    |   |
| Recapture of capital cost allowance  |      |        |    |   |
| <b>Gross business or professional income (line G plus line H)</b>                                  | 8299 | 28,617 | 00 |   |

Enter this amount on the appropriate line of your income tax and benefit return: business on line 162, professional on line 164, or commission on line 166.

Name: Patricia Elliott SIN: [REDACTED]

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**Statement of Business or Professional Activities**

If GST/HST has been remitted and/or an input tax credit has been claimed, do not include GST/HST in the calculation of cost of goods sold, expenses or net income (loss) in parts 4 to 6.

**Part 4 – Cost of goods sold and gross profit**

If you have business income, complete this part. Enter only the business part of the costs.

|   |      |  |  |        |        |    |
|---|------|--|--|--------|--------|----|
| Gross business income from line 8299 in Part 3 on page 1                        |      |  |  | 28,617 | 00     | I  |
| Opening inventory (include raw materials, goods in process, and finished goods) | 8300 |  |  |        |        |    |
| Purchases during the year (net of returns, allowances, and discounts)           | 8320 |  |  |        |        |    |
| Direct wage costs   | 8340 |  |  |        |        |    |
| Subcontracts  | 8360 |  |  |        |        |    |
| Other costs, specify:   | 8450 |  |  |        |        |    |
| Total of above five lines   |      |  |  |        |        |    |
| <b>Minus</b>  |      |  |  |        |        |    |
| Closing inventory (include raw materials, goods in process, finished goods)     | 8500 |  |  |        |        |    |
| Cost of goods sold  |      |  |  | 8518   |        | J  |
| <b>Gross profit (line I minus line J)</b>                                       |      |  |  | 8519   | 28,617 | 00 |

**Part 5 – Net income (loss) before adjustments**

Gross profit from line 8519 in Part 4 above, or gross income from line 8299 in Part 3 on page 1

|   |   |       |      |       |        |        |    |   |
|---|---|-------|------|-------|--------|--------|----|---|
|   |   |       |      |       |        | 28,617 | 00 | K |
| <b>Expenses (enter only the business part)</b>                                      |   |       |      |       |        |        |    |   |
| Advertising   |   |       | 8521 |       |        |        |    |   |
| Meals and entertainment   | X | 50.00 | %    | 8523  |        |        |    |   |
| Meals and entertainment - long haul truck drivers                                   | X | 75.00 | %    | 8523  |        |        |    |   |
| Bad debts   |   |       | 8590 |       |        |        |    |   |
| Insurance   |   |       | 8690 |       |        |        |    |   |
| Interest  |   |       | 8710 |       |        |        |    |   |
| Business tax, fees, licences, dues, memberships                                     |   |       | 8760 |       |        |        |    |   |
| Office expenses   |   |       | 8810 |       |        |        |    |   |
| Supplies  |   |       | 8811 | 2,147 | 59     |        |    |   |
| Legal, accounting, and other professional fees                                      |   |       | 8860 |       |        |        |    |   |
| Management and administration fees  |   |       | 8871 | 144   | 00     |        |    |   |
| Rent  |   |       | 8910 |       |        |        |    |   |
| Maintenance and repairs   |   |       | 8960 | 1,356 | 78     |        |    |   |
| Salaries, wages, and benefits (including employer's contributions)                  |   |       | 9060 |       |        |        |    |   |
| Property taxes  |   |       | 9180 |       |        |        |    |   |
| Travel (including transportation fees, accommodations, and allowable part of meals) |   |       | 9200 |       |        |        |    |   |
| Telephone and utilities   |   |       | 9220 |       |        |        |    |   |
| Fuel costs (except for motor vehicles)  |   |       | 9224 |       |        |        |    |   |
| Delivery, freight, and express  |   |       | 9275 |       |        |        |    |   |
| Motor vehicle expenses (not including CCA) (see Chart A on page 5)                  |   |       | 9281 | 4,870 | 41     |        |    |   |
| Allowance on eligible capital property  |   |       | 9935 |       |        |        |    |   |
| Capital cost allowance (from Area A on page 4)                                      |   |       | 9936 |       |        |        |    |   |
| Other expenses (specify)  |   |       | 9270 |       |        |        |    |   |
| Total business expenses   |   |       |      | 9368  | 8,518  | 78     |    |   |
| <b>Net income (loss) before adjustments (line K minus line L)</b>                   |   |       |      | 9369  | 20,098 | 22     |    |   |

**Part 6 – Your net income (loss)**

Your share of the amount on line 9369 in Part 5 above

|  |      |      |        |    |   |
|--|------|------|--------|----|---|
|  |      |      | 20,098 | 22 | M |
| <b>Plus:</b> GST/HST rebate for partners received in the year (see Help)   | 9974 |      |        |    | N |
| Total (line M plus line N)   |      |      | 20,098 | 22 |   |
| <b>Minus:</b> Other amounts deductible from your share of net partnership income (loss) (from the chart on page 3) | 9943 |      | 20,098 | 22 | O |
| <b>Net income (loss) after adjustments (line O minus line P)</b>   |      |      | 20,098 | 22 | Q |
| <b>Minus:</b> Business-use-of-home expenses (your share of line 3 from the chart on page 3)                        | 9945 |      | 11,997 | 19 | R |
| <b>Your net income (loss) (line Q minus line R)</b>  |      | 9946 | 8,101  | 03 |   |

Enter this amount on the appropriate line of your income tax and benefit return: business on line 135, professional on line 137, or commission on line 139.







Name: Patricia Elliott SIN: [REDACTED]

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**Statement of Business or Professional Activities**

**Area D - Details of equipment dispositions in the year**

| Class #         | Property details | Proceeds |  | Personal |  | Business |  |  |
|-----------------|------------------|----------|--|----------|--|----------|--|--|
|                 |                  |          |  |          |  |          |  |  |
|                 |                  |          |  |          |  |          |  |  |
|                 |                  |          |  |          |  |          |  |  |
|                 |                  |          |  |          |  |          |  |  |
|                 |                  |          |  |          |  |          |  |  |
| <b>Subtotal</b> |                  |          |  |          |  |          |  |  |

**Details of motor vehicle dispositions in the year**

| Class #   | Property details | Proceeds |
|---|------------------|----------|
|   |                  |          |
|   |                  |          |
|   |                  |          |
|   |                  |          |
| <b>Subtotal</b>                                 |                  |          |
| <b>Total equipment dispositions in the year</b> |                  | 9926     |

**Area E - Details of building dispositions in the year**

| Class #  | Property details | Proceeds |  | Personal |  | Business |      |  |
|--|------------------|----------|--|----------|--|----------|------|--|
|  |                  |          |  |          |  |          |      |  |
|  |                  |          |  |          |  |          |      |  |
|  |                  |          |  |          |  |          |      |  |
|  |                  |          |  |          |  |          |      |  |
| <b>Total building dispositions in the year</b> |                  |          |  |          |  |          | 9928 |  |

Note: If you disposed of property from your business in the year see Help.

**Area F - Details of land additions and dispositions in the year**

|   |      |  |  |
|---|------|--|--|
| Total cost of all land additions in the year          | 9923 |  |  |
| Total proceeds from all land dispositions in the year | 9924 |  |  |

Note: You cannot claim capital cost allowance on land.

**Chart A - Motor vehicle expenses**

|   | Auto A |    | Auto B |    |    |
|---|--------|----|--------|----|----|
| Enter the kilometres you drove in the tax year to earn business income                  | 2,217  |    |        |    | 1  |
| Enter the total kilometres you drove in the tax year                                    | 4,563  |    |        |    | 2  |
| Percentage  | 48.6   |    |        |    |    |
| Fuel and oil  | 811    | 32 |        |    | 3  |
| Interest (see Chart B below)  |        |    |        |    | 4  |
| Insurance   | 1,620  | 00 |        |    | 5  |
| Licence and registration  |        |    |        |    | 6  |
| Maintenance and repairs   | 753    | 21 |        |    | 7  |
| Leasing (see Chart C below)   | 6,836  | 88 |        |    | 8  |
| Other expenses (specify)  |        |    |        |    | 9  |
|   |        |    |        |    | 10 |
| <b>Total motor vehicle expenses (add lines 3 to 10)</b>                                 | 10,021 | 41 |        |    | 11 |
| Business use part:  | 4,870  | 41 |        |    | 12 |
| Business parking fees   |        |    |        |    | 13 |
| Supplementary business insurance  |        |    |        |    | 14 |
| Add lines 12, 13, and 14  | 4,870  | 41 |        |    |    |
| <b>Allowable motor vehicle expenses (enter amount on line 9281 in Part 5 on page 2)</b> |        |    | 4,870  | 41 |    |

Note: You can claim CCA on motor vehicles in Area A on page 4.

Name: Patricia Elliott SIN: [REDACTED]

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Statement of Business or Professional Activities

**Chart B – Available interest expense for passenger vehicles**

|   | Auto A | Auto B |
|---|--------|--------|
| Total interest payable (accrual method) or paid (cash method) in the fiscal period                | A      | A      |
| Date interest payments  |        |        |
| Auto A: started: _____ ended: _____ Total days interest paid                                      |        |        |
| Auto B: started: _____ ended: _____ Total days interest paid                                      |        |        |
| Purchase date of vehicle  |        |        |
| Auto A: _____ = * _____ /day =  | B      |        |
| Auto B: _____ = * _____ /day =  |        | B      |
| <b>Available interest expense</b> (amount A or B, whichever is less) (enter on line 4 of Chart A) |        |        |

\* For passenger vehicles bought from 2001 to 2010.

**Chart C – Eligible leasing costs for passenger vehicles**

|  | Auto A     | Auto B |
|--|------------|--------|
| Lease commencement date  | 2006/08/01 |        |
| Lease termination date (if terminated in 2010)   |            |        |
| Total number of days the vehicle was leased in your 2010 and previous fiscal periods                   | 1614       | 365    |
| PST or HST rate  | 7.0        | 7.0    |
| Total lease charges incurred in your 2010 fiscal period for the vehicle                                | 6,836 88   |        |
| Total lease payments deducted before your 2010 fiscal period for the vehicle                           | 17,658 30  |        |
| Manufacturer's list price  | 18,000 00  |        |
| Amount on line 4 or (\$35,294 + GST* and PST, or HST* on \$35,294), whichever is more x 85%            | 33,599 89  |        |
| [((\$800 + GST* and PST, or HST* on \$800) x line 1) / 30] - line 3                                    | 30,546 50  |        |
| [((\$30,000 + GST* and PST, or HST* on \$30,000) x line 2] / line 5                                    | 6,836 90   |        |
| <b>Eligible leasing cost</b> (line 6 or 7, whichever is less) (enter this amount on line 8 of Chart A) | 6,836 88   |        |

\* Use a GST rate of 5% or HST rate applicable to your province.

Name: Patricia Elliott SIN: [REDACTED]

BUS

**Business Income Summary**

|   |                          |                        |            |
|---|--------------------------|------------------------|------------|
| <b>Business #1:</b>                             |                          | Gross income           | Net income |
| Name  | Tricia's Toybox          | 28,617   00            | 8,101   03 |
| Account Number (15 characters)                  | Fiscal period            |                        |            |
|   | 2010/01/01 to 2010/12/31 |                        |            |
| Reconciliation of 2010 Business Income (T1139): |                          | Net income (loss) from |            |
| 2009 additional business income                 |                          | T1139 form for 2010    |            |
| (from line G of your 2009 T1139 form)           |                          | (if applicable)        |            |

|   |               |                        |            |
|---|---------------|------------------------|------------|
| <b>Business #2:</b>                             |               | Gross income           | Net income |
| Name  |               |                        |            |
| Account Number (15 characters)                  | Fiscal period |                        |            |
|   | to            |                        |            |
| Reconciliation of 2010 Business Income (T1139): |               | Net income (loss) from |            |
| 2009 additional business income                 |               | T1139 form for 2010    |            |
| (from line G of your 2009 T1139 form)           |               | (if applicable)        |            |

|   |               |                        |            |
|---|---------------|------------------------|------------|
| <b>Business #3:</b>                             |               | Gross income           | Net income |
| Name  |               |                        |            |
| Account Number (15 characters)                  | Fiscal period |                        |            |
|   | to            |                        |            |
| Reconciliation of 2010 Business Income (T1139): |               | Net income (loss) from |            |
| 2009 additional business income                 |               | T1139 form for 2010    |            |
| (from line G of your 2009 T1139 form)           |               | (if applicable)        |            |

|   |               |                        |            |
|---|---------------|------------------------|------------|
| <b>Business #4:</b>                             |               | Gross income           | Net income |
| Name  |               |                        |            |
| Account Number (15 characters)                  | Fiscal period |                        |            |
|   | to            |                        |            |
| Reconciliation of 2010 Business Income (T1139): |               | Net income (loss) from |            |
| 2009 additional business income                 |               | T1139 form for 2010    |            |
| (from line G of your 2009 T1139 form)           |               | (if applicable)        |            |

|  |              |            |
|--|--------------|------------|
| <b>T5013 slips:</b>  | Gross income | Net income |
| Business income from your T5013 slips<br>(including adjustments from form T1139) |              |            |

|  |                 |                |
|--|-----------------|----------------|
|  | Gross income    | Net income     |
| Amounts reported on T3 slips                                     |                 |                |
| Business income to report on your tax return                     | 162 28,617   00 | 135 8,101   03 |
| Self-employment income for the Working Income Tax Benefit (WITB) |                 | 8,101   03     |

Name: Patricia Elliott SIN:731 095 873 Printed on:2012/06/18 01:01

Canada Revenue Agency / Agence du revenu du Canada **T1 GENERAL 2011**  
**Income Tax and Benefit Return**

Complete all the sections that apply to you in order to benefit from amounts to which you are entitled. BC **7**  
 For more information, see the guide.

**Identification**

**Attach your personal label here. Correct any wrong information. If you are not attaching a label, print your name and address below.**

First name and initial  
 Patricia

Last name  
 Elliott

Mailing address: Apt No – Street No Street name  
 990 Ambassador Avenue

PO Box \_\_\_\_\_ RR \_\_\_\_\_

City \_\_\_\_\_ Prov./Terr. \_\_\_\_\_ Postal code \_\_\_\_\_  
 Victoria **B C** **V 8 X 3 N 2**

**Information about your residence**


Enter your province or territory of residence on December 31, 2011: British Columbia

Enter the province or territory where you currently reside if it is not the same as your mailing address above: \_\_\_\_\_

If you were self-employed in 2011, enter the province or territory of self-employment: British Columbia

If you became or ceased to be a resident of Canada for income tax purposes in 2011, enter the date of:  
 entry Month Day or departure Month Day

**Information about you**

Enter your social insurance number (SIN) if it is not on the label or if you are not attaching a label:   
 Year Month Day

Enter your date of birth: 1 9 7 6 0 8 2 8  
 Year Month Day

Your language of correspondence: English  Français   
 Votre langue de correspondance :

**Marital status**  
 Tick the box that applies to your marital status on December 31, 2011.

1  Married 2  Living common-law 3  Widowed  
 4  Divorced 5  Separated 6  Single

**Information about your spouse or common-law partner** (if you ticked box 1 or 2 above)

Enter his or her SIN if it is not on the label or if you are not attaching a label: \_\_\_\_\_

Enter his or her first name: \_\_\_\_\_

Enter his or her net income for 2011 to claim certain credits: \_\_\_\_\_

Enter the amount of Universal Child Care Benefit (UCCB) from line 117 of his or her return: \_\_\_\_\_

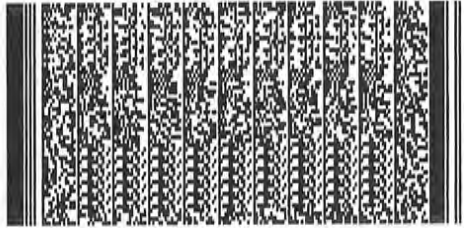
Enter the amount of UCCB repayment from line 213 of his or her return: \_\_\_\_\_

Tick this box if he or she was self-employed in 2011: 1


**Person deceased in 2011**

If this return is for a deceased person, enter the date of death: \_\_\_\_\_  
 Year Month Day

Do not use this area \_\_\_\_\_



|                      |     |  |  |  |  |     |  |  |  |  |
|----------------------|-----|--|--|--|--|-----|--|--|--|--|
| Do not use this area | 172 |  |  |  |  | 171 |  |  |  |  |
|----------------------|-----|--|--|--|--|-----|--|--|--|--|

 **Elections Canada** (see the Elections Canada page in the tax guide for details or visit [www.elections.ca](http://www.elections.ca))

A) Are you a Canadian citizen? ..... Yes  1 No  2

Answer the following question **only if you are a Canadian citizen.**

B) As a Canadian citizen, do you authorize the Canada Revenue Agency to give your name, address, date of birth, and citizenship to Elections Canada to update the National Register of Electors?..... Yes  1 No  2

Your authorization is valid until you file your next return. Your information will only be used for purposes permitted under the *Canada Elections Act*, which include sharing the information with provincial/territorial election agencies, members of Parliament and registered political parties, as well as candidates at election time.

**Goods and services tax/harmonized sales tax (GST/HST) credit application**

See the guide for details.

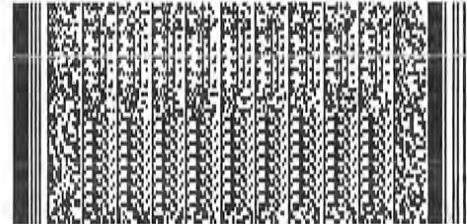
Are you applying for the GST/HST credit (including any related provincial credit)? ..... Yes  1 No  2

**Please answer the following question:**

Did you own or hold foreign property at any time in 2011 with a total cost of more than CAN\$100,000? (see the "Foreign income" section in the guide for details) ..... **266** Yes  1 No  2

If **yes**, complete and attach Form T1135 to your return.

If you had dealings with a non-resident trust or corporation in 2011, see the "Foreign income" section in the guide.



Name: Patricia Elliott SIN: [REDACTED] Printed on: 2012/06/18 01:01

3

The guide contains valuable information to help you complete your return.  
When you come to a line on the return that applies to you, go to the line number in the guide for more information.

As a resident of Canada, you have to report your income from all sources both inside and outside Canada.

### Total income

|   |           |        |                                |                    |
|---|-----------|--------|--------------------------------|--------------------|
| Employment income (box 14 of all T4 slips)  |           | 101    |                                |                    |
| Commissions included on line 101 (box 42 of all T4 slips)   | 102       |        |                                |                    |
| Other employment income   |           | 104    | +                              |                    |
| Old Age Security pension (box 18 of the T4A(OAS) slip)  |           | 113    | +                              |                    |
| CPP or QPP benefits (box 20 of the T4A(P) slip)   |           | 114    | +                              |                    |
| Disability benefits included on line 114 (box 16 of the T4A(P) slip)  | 152       |        |                                |                    |
| Other pensions or superannuation  |           | 115    | +                              |                    |
| Elected split-pension amount (attach Form T1032)  |           | 116    | +                              |                    |
| Universal Child Care Benefit (UCCB)   |           | 117    | +                              |                    |
| UCCB amount designated to a dependant   | 185       | 1,200  | 00                             |                    |
| Employment Insurance and other benefits (box 14 of the T4E slip)  |           | 119    | +                              |                    |
| Taxable amount of dividends (eligible and other than eligible) from taxable Canadian corporations (attach Schedule 4) |           | 120    | +                              |                    |
| Taxable amount of dividends other than eligible dividends, included on line 120, from taxable Canadian corporations   | 180       |        |                                |                    |
| Interest and other investment income (attach Schedule 4)  |           | 121    | +                              |                    |
| Net partnership income: limited or non-active partners only (attach Schedule 4)                                       |           | 122    | +                              |                    |
| Registered disability savings plan income   |           | 125    | +                              |                    |
| Rental income   | Gross 160 |        | Net 126                        | +                  |
| Taxable capital gains (attach Schedule 3)   |           |        | 127                            | +                  |
| Support payments received   | Total 156 |        | Taxable amount 128             | +                  |
| RRSP income (from all T4RSP slips)  |           |        | 129                            | +                  |
| Other income  | Specify:  |        | 130                            | +                  |
| Self-employment income  |           |        |                                |                    |
| Business income   | Gross 162 | 26,886 | 00                             | Net 135 + 6,153 61 |
| Professional income   | Gross 164 |        |                                | Net 137 +          |
| Commission income   | Gross 166 |        |                                | Net 139 +          |
| Farming income  | Gross 168 |        |                                | Net 141 +          |
| Fishing income  | Gross 170 |        |                                | Net 143 +          |
| Workers' compensation benefits (box 10 of the T5007 slip)   | 144       |        |                                |                    |
| Social assistance payments  | 145       | +      |                                |                    |
| Net federal supplements (box 21 of the T4A(OAS) slip)   | 146       | +      |                                |                    |
| Add lines 144, 145, and 146 (see Line 250 in the guide).  | =         |        | ▶ 147                          | +                  |
| Add lines 101, 104 to 143, and 147.   |           |        | This is your total income. 150 | = 6,153 61         |



Name: Patricia Elliott SIN: [REDACTED] Printed on: 2012/06/18 01:01

**Attach your Schedule 1 (federal tax) and Form 428 (provincial or territorial tax) here. Also attach here any other schedules, information slips, forms, receipts, and documents that you need to include with your return.**

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### Net income

|   |           |  |                |
|---|-----------|--|----------------|
| Enter your <b>total income</b> from line 150.   | 150       | 6,153  | 61             |
| Pension adjustment<br>(box 52 of all T4 slips and box 034 of all T4A slips)   | 206       |  |                |
| Registered pension plan deduction (box 20 of all T4 slips and box 032 of all T4A slips)   | 207       |  |                |
| RRSP deduction (see Schedule 7, and attach receipts)  | 208 +     |  |                |
| Deduction for elected split-pension amount (attach Form T1032)  | 210 +     |  |                |
| Annual union, professional, or like dues (box 44 of all T4 slips, and receipts)   | 212 +     |  |                |
| Universal Child Care Benefit repayment (box 12 of all RC62 slips)   | 213 +     |  |                |
| Child care expenses (attach Form T778)  | 214 +     |  |                |
| Disability supports deduction   | 215 +     |  |                |
| Business investment loss  | Gross 228 | Allowable deduction                                | 217 +          |
| Moving expenses   |           |  | 219 +          |
| Support payments made   | Total 230 | Allowable deduction                                | 220 +          |
| Carrying charges and interest expenses (attach Schedule 4)  |           |  | 221 +          |
| Deduction for CPP or QPP contributions on self-employment and other earnings<br>(attach Schedule 8)   |           |  | 222 + 131 36   |
| Exploration and development expenses (attach Form T1229)  |           |  | 224 +          |
| Other employment expenses   |           |  | 229 +          |
| Clergy residence deduction  |           |  | 231 +          |
| Other deductions Specify:   |           |  | 232 +          |
| Add lines 207 to 224, 229, 231, and 232.  |           |  | 233 = 131 36   |
| Line 150 minus line 233 (if negative, enter "0")  |           | This is your <b>net income before adjustments.</b> | 234 = 6,022 25 |
| Social benefits repayment (if you reported income on line 113, 119, or 146, see Line 235 in the guide).<br>Use the federal worksheet to calculate your repayment. |           |  | 235 -          |
| Line 234 minus line 235 (if negative, enter "0")  |           |  | 236 = 6,022 25 |
| If you have a spouse or common-law partner, see Line 236 in the guide.  |           | This is your <b>net income.</b>                    | 236 = 6,022 25 |

### Taxable income

|   |       |                                     |                |
|---|-------|-------------------------------------|----------------|
| Canadian Forces personnel and police deduction (box 43 of all T4 slips)                     | 244   |                                     |                |
| Employee home relocation loan deduction (box 37 of all T4 slips)                            | 248 + |                                     |                |
| Security options deductions   | 249 + |                                     |                |
| Other payments deduction<br>(if you reported income on line 147, see Line 250 in the guide) | 250 + |                                     |                |
| Limited partnership losses of other years   | 251 + |                                     |                |
| Non-capital losses of other years   | 252 + |                                     |                |
| Net capital losses of other years   | 253 + |                                     |                |
| Capital gains deduction   | 254 + |                                     |                |
| Northern residents deductions (attach Form T2222)   | 255 + |                                     |                |
| Additional deductions Specify:  | 256 + |                                     |                |
| Add lines 244 to 256.   | 257 = |                                     |                |
| Line 236 minus line 257 (if negative, enter "0")  |       | This is your <b>taxable income.</b> | 260 = 6,022 25 |

**Use your taxable income to calculate your federal tax on Schedule 1 and your provincial or territorial tax on Form 428.**

Name: Patricia Elliott SIN: [REDACTED] Printed on: 2012/06/18 01:01



### Statement of Business or Professional Activities

- For each business or profession, complete a **separate** Form T2125.
- File each completed Form T2125 with your *Income Tax and Benefit Return*.
- For more information on how to complete this form, see Guide T4002, *Business and Professional Income*.

|  |  |      |   |   |   |                                       |   |
|--|--|------|---|---|---|---------------------------------------|---|
| <b>Identification</b>                                  |  |      |   | Your social insurance number  |   |                                       |   |
| Your name<br>Elliott, Patricia                         |  |      |   | [REDACTED]  |   |                                       |   |
| Business name<br>Tricia's Toybox                       |  |      |   | Account number<br>(15 characters)   |   |                                       |   |
| Business address<br>990 Ambassador Avenue              |  |      |   | City, province or territory<br>Victoria BC  |   | Postal code<br>V 8 X 3 N 2            |   |
| Fiscal period  |  | Year |   | Month   |   | Day                                   |   |
| From:  |  | 2    | 0 | 1   | 1 | 0                                     | 1 |
| To:  |  | 2    | 0 | 1   | 1 | 1                                     | 2 |
| Main product or service<br>child care                  |  |      |   | Industry code<br>(see the appendix in Guide T4002,<br><i>Business and Professional Income</i> ) |   |                                       |   |
| Tax shelter identification number                      |  |      |   | Partnership business number<br>(9 digits)   |   | Your percentage<br>of the partnership |   |
|  |  |      |   |   |   | 100.00%                               |   |
| Name and address of person or firm preparing this form |  |      |   |   |   |                                       |   |

**Part 1 – Business income**

2.  If you have business income, tick this box and complete this part. **Do not complete parts 1 and 2 on the same form.**

|   |        |    |       |
|---|--------|----|-------|
| Gross sales, commissions, or fees (including GST/HST collected or collectible) .....  | 26,886 | 00 | A     |
| <b>Minus</b> PST, GST/HST, returns, allowances, discounts included in sales, and GST/HST adjustments .....  |        |    | (i)   |
| <b>Subtotal (line A minus line (i))</b> .....   | 26,886 | 00 | B     |
| <b>(For those using the Quick Method) Government assistance calculated as follows:</b>  |        |    |       |
| GST/HST collected or collectible on sales, commissions and fees eligible for the Quick Method, .....  |        |    | (ii)  |
| For each applicable remittance rate, include (sales, commissions and fees eligible for the Quick Method plus GST/HST collected or collectible) multiplied by Quick Method remittance rate ..... |        |    | (iii) |
| <b>Subtotal (line (ii) minus line (iii))</b> .....  |        |    | (iv)  |
| <b>Adjusted gross sales (line B plus line (iv)) (enter this amount on line 8000 in Part 3 below)</b> .....  | 26,886 | 00 | C     |

**Part 2 – Professional income**

3.  If you have professional income, tick this box and complete this part. **Do not complete parts 1 and 2 on the same form.**

|   |  |  |       |
|---|--|--|-------|
| Gross professional fees including work-in-progress (WIP) and GST/HST collected or collectible .....   |  |  | D     |
| <b>Minus</b> PST, GST/HST included in the fees, GST/HST adjustments and WIP at the end of the year if you elect to exclude it (see Chapter 2 of the guide) .....                      |  |  | (i)   |
| <b>Subtotal (line D minus line (i))</b> .....   |  |  | E     |
| <b>(For those using the Quick Method) Government assistance calculated as follows:</b>  |  |  |       |
| GST/HST collected or collectible on professional fees eligible for the Quick Method .....   |  |  | (ii)  |
| For each applicable remittance rate, include (professional fees eligible for the Quick Method plus GST/HST collected or collectible) multiplied by Quick Method remittance rate ..... |  |  | (iii) |
| <b>Subtotal (line (ii) minus line (iii))</b> .....  |  |  | (iv)  |
| Work-in-progress (WIP), start of the year, per election to exclude WIP (see Chapter 2 of the guide) .....   |  |  | (v)   |
| <b>Adjusted professional fees (line E plus lines (iv) and (v)) (enter this amount on line 8000 in Part 3 below)</b> .....   |  |  | F     |

**Part 3 – Gross business or professional income**

|  |      |        |    |   |
|--|------|--------|----|---|
| Adjusted gross sales (from line C in Part 1) or adjusted professional fees (from line F in Part 2) ..... | 8000 | 26,886 | 00 | G |
| <b>Plus</b>  |      |        |    |   |
| Reserves deducted last year .....  | 8290 |        |    |   |
| Other income .....   | 8230 |        |    |   |
| <b>Total of the above two lines</b> .....  |      |        |    | H |
| <b>Gross business or professional income (line G plus line H)</b> .....                                  | 8299 | 26,886 | 00 |   |

Enter this amount on the appropriate line of your income tax and benefit return: business on line 162, professional on line 164, or commission on line 166.





Name: Patricia Elliott SIN: [REDACTED] Printed on: 2012/06/18 01:01

**Area A – Calculation of capital cost allowance (CCA) claim**

| 1<br>Class<br>number | 2<br>Undepreciated<br>capital cost (UCC)<br>at the start of the year | 3<br>Cost of additions<br>in the year<br>(see areas B and C<br>below) | 4<br>Proceeds of<br>dispositions<br>in the year (see<br>areas D and E below) | 5*<br>UCC after additions<br>and dispositions<br>(col. 2 plus col. 3<br>minus col. 4) | 6<br>Adjustment for<br>current-year additions<br>$1/2 \times (\text{col. 3 minus}$<br>$\text{col. 4})$ . If negative,<br>enter "0." | 7<br>Base amount<br>for CCA<br>(col. 5 minus col. 6) | 8<br>Rate<br>% | 9<br>CCA for the year<br>(col. 7 x col. 8 or an<br>adjusted amount) | 10<br>UCC at the end of the<br>year<br>(col. 5 minus col. 9) |
|----------------------|--|---|--|---|---|--|----------------|---|--|
|                      |  |   |  |   |   |  |                |   |  |
|                      |  |   |  |   |   |  |                |   |  |
|                      |  |   |  |   |   |  |                |   |  |
|                      |  |   |  |   |   |  |                |   |  |

Total CCA claim for the year (enter this amount, minus any personal part and any CCA for business-use-of-home expenses, on line 9936 in Part 5 on page 2\*\*)

\* If you have a negative amount in this column, add it to income as a recapture on line 8230, "Other income," in Part 3 on page 1. If no property is left in the class and there is a positive amount in the column, deduct the amount from income as a terminal loss on line 9270, "Other expenses," in Part 5 on page 2. Recapture and terminal loss do not apply to a class 10.1 property. For more information, see Chapter 4 of Guide T4002, *Business and Professional Income*.

\*\* For information on CCA for "Calculation of business-use-of-home expenses" on page 3, see "Special Situations" in Chapter 4 of Guide T4002, *Business and Professional Income*.

**Area B – Details of equipment additions in the year**

| 1<br>Class<br>number | 2<br>Property<br>details | 3<br>Total cost | 4<br>Personal part<br>(if applicable) | 5<br>Business part<br>(column 3 minus<br>column 4) |
|----------------------|--------------------------|-----------------|---------------------------------------|--|
|                      |                          |                 |                                       |  |
|                      |                          |                 |                                       |  |

Total equipment additions in the year 9925

**Area C – Details of building additions in the year**

| 1<br>Class<br>number | 2<br>Property<br>details | 3<br>Total cost | 4<br>Personal part<br>(if applicable) | 5<br>Business part<br>(column 3 minus<br>column 4) |
|----------------------|--------------------------|-----------------|---------------------------------------|--|
|                      |                          |                 |                                       |  |
|                      |                          |                 |                                       |  |

Total building additions in the year 9927

**Area D – Details of equipment dispositions in the year**

| 1<br>Class<br>number | 2<br>Property<br>details | 3<br>Proceeds of disposition<br>(should not be more than<br>the capital cost) | 4<br>Personal part (if<br>applicable) | 5<br>Business part<br>(column 3 minus<br>column 4) |
|----------------------|--------------------------|---|---------------------------------------|--|
|                      |                          |   |                                       |  |
|                      |                          |   |                                       |  |

Note: If you disposed of property from your business in the year, see Chapter 4 of Guide T4002, *Business and Professional Income*, for information about your proceeds of disposition. Total equipment dispositions in the year 9926

**Area E – Details of building dispositions in the year**

| 1<br>Class<br>number | 2<br>Property<br>details | 3<br>Proceeds of disposition<br>(should not be more than<br>the capital cost) | 4<br>Personal part (if<br>applicable) | 5<br>Business part<br>(column 3 minus<br>column 4) |
|----------------------|--------------------------|---|---------------------------------------|--|
|                      |                          |   |                                       |  |
|                      |                          |   |                                       |  |

Note: If you disposed of property from your business in the year, see Chapter 4 of Guide T4002, *Business and Professional Income*, for information about your proceeds of disposition. Total building dispositions in the year 9928

**Area F – Details of land additions and dispositions in the year**

|   |      |
|---|------|
| Total cost of all land additions in the year          | 9923 |
| Total proceeds from all land dispositions in the year | 9924 |

Note: You cannot claim capital cost allowance on land.

|   |   |   |
|---|---|---|
|  | Canada Revenue Agency<br>Agence du revenu du Canada | <h1 style="margin: 0;">T1 GENERAL 2012</h1> <h2 style="margin: 0;">Income Tax and Benefit Return</h2> |
|---|---|---|

Complete all the sections that apply to you. For more information, see the guide.

BC 7

**Identification**

**Print your name and address below.**

First name and initial  
Patricia

Last name  
Elliott

Mailing address: Apt No -- Street No Street name  
1410 Lang St

PO Box \_\_\_\_\_ RR \_\_\_\_\_

City \_\_\_\_\_ Prov./Terr. \_\_\_\_\_ Postal code \_\_\_\_\_  
Victoria BC V8L 2S7

**Information about your residence**

Enter your province or territory of residence on **December 31, 2012**: British Columbia

Enter the province or territory where you **currently** reside if it is not the same as your mailing address above: \_\_\_\_\_

If you were self-employed in 2012, enter the province or territory of self-employment: British Columbia

If you **became** or **ceased** to be a resident of Canada for income tax purposes in 2012, enter the date of:

entry Month Day or departure Month Day

**Information about you**

Enter your social insurance number (SIN): \_\_\_\_\_

Year Month Day  
1 9 7 6 0 8 2 8

Enter your date of birth: \_\_\_\_\_

Your language of correspondence: English  Français   
 Votre langue de correspondance:

**Marital status**

Tick the box that applies to your marital status on December 31, 2012:

1  Married    2  Living common-law    3  Widowed  
 4  Divorced    5  Separated    6  Single

**Information about your spouse or common-law partner (if you ticked box 1 or 2 above)**

Enter his or her SIN: \_\_\_\_\_

Enter his or her first name: \_\_\_\_\_

Enter his or her net income for 2012 to claim certain credits: \_\_\_\_\_

Enter the amount of universal child care benefit (UCCB) from line 117 of his or her return: \_\_\_\_\_

Enter the amount of UCCB repayment from line 213 of his or her return: \_\_\_\_\_


Tick this box if he or she was self-employed in 2012:

**Person deceased in 2012**

If this return is for a deceased person, enter the date of death: \_\_\_\_\_

Year Month Day

**Do not use this area**

 **Elections Canada** (see the Elections Canada page in the tax guide for details or visit [www.elections.ca](http://www.elections.ca))

A) Are you a Canadian citizen? ..... Yes  1 No  2

Answer the following question **only if you are a Canadian citizen**.

B) As a Canadian citizen, do you authorize the Canada Revenue Agency to give your name, address, date of birth, and citizenship to Elections Canada to update the National Register of Electors? ..... Yes  1 No  2

Your authorization is valid until you file your next return. Your information will only be used for purposes permitted under the *Canada Elections Act*, which include sharing the information with provincial/territorial election agencies, members of Parliament, and registered political parties, as well as candidates at election time.

**Goods and services tax (GST/HST) credit application**

See the guide for details.

Are you applying for the GST/HST credit (including any related provincial credit)? ..... Yes  1 No  2

|                      |     |  |  |  |  |     |  |  |  |
|----------------------|-----|--|--|--|--|-----|--|--|--|
| Do not use this area | 172 |  |  |  |  | 171 |  |  |  |
|----------------------|-----|--|--|--|--|-----|--|--|--|

The guide contains valuable information to help you complete your return.  
When you come to a line on the return that applies to you, go to the line number in the guide for more information.

Did you own or hold foreign property at any time in 2012 with a total cost of more than CAN\$100,000? see "Foreign income" section in the guide for more information ..... **266** Yes  1 No  2

If **yes**, complete Form T1135 and attach it to your return.

If you had dealings with a non-resident trust or corporation in 2012, see "Foreign income" in the guide.

As a resident of Canada, you have to report your income from all sources both inside and outside Canada.

**Total income**

|   |                            |           |                      |          |
|---|----------------------------|-----------|----------------------|----------|
| Employment income (box 14 of all T4 slips)  |                            | 101       |                      |          |
| Commissions included on line 101 (box 42 of all T4 slips)   | 102                        |           |                      |          |
| Other employment income   |                            | 104 +     |                      |          |
| Old age security pension (box 18 of the T4A(OAS) slip)  |                            | 113 +     |                      |          |
| CPP or QPP benefits (box 20 of the T4A(P) slip)   |                            | 114 +     |                      |          |
| Disability benefits included on line 114 (box 16 of the T4A(P) slip)  | 152                        |           |                      |          |
| Other pensions or superannuation  |                            | 115 +     |                      |          |
| Elected split-pension amount (attach Form T1032)  |                            | 116 +     |                      |          |
| Universal child care benefit (UCCB)   |                            | 117 +     | 1,000                | 00       |
| UCCB amount designated to a dependant   | 185                        |           |                      |          |
| Employment insurance and other benefits (box 14 of the T4E slip)  |                            | 119 +     |                      |          |
| Taxable amount of dividends (eligible and other than eligible) from taxable Canadian corporations (attach Schedule 4) |                            | 120 +     |                      |          |
| Taxable amount of dividends other than eligible dividends, included on line 120, from taxable Canadian corporations   | 180                        |           |                      |          |
| Interest and other investment income (attach Schedule 4)  |                            | 121 +     |                      |          |
| Net partnership income: limited or non-active partners only   |                            | 122 +     |                      |          |
| Registered disability savings plan income   |                            | 125 +     |                      |          |
| Rental income   | Gross 160                  |           | Net 126 +            |          |
| Taxable capital gains (attach Schedule 3)   |                            |           | 127 +                |          |
| Support payments received   | Total 156                  |           | Taxable amount 128 + |          |
| RRSP income (from all T4RSP slips)  |                            |           | 129 +                |          |
| Other income  |                            |           | 130 +                |          |
| Self-employment income  |                            |           |                      |          |
| Business income   | Gross 162                  |           | Net 135 +            |          |
| Professional income   | Gross 164                  | 29,565 00 | Net 137 +            | 2,667 68 |
| Commission income   | Gross 166                  |           | Net 139 +            |          |
| Farming income  | Gross 168                  |           | Net 141 +            |          |
| Fishing income  | Gross 170                  |           | Net 143 +            |          |
| Workers' compensation benefits (box 10 of the T5007 slip)   | 144                        |           |                      |          |
| Social assistance payments  | 145 +                      |           |                      |          |
| Net federal supplements (box 21 of the T4A(OAS) slip)   | 146 +                      |           |                      |          |
| Add lines 144, 145, and 146 (see line 250 in the guide).  | =                          |           | ▶ 147 +              |          |
| Add lines 101, 104 to 143, and 147.   | This is your total income. | 150 =     | 3,667                | 68       |



## Statement of Business or Professional Activities

- For each business or profession, complete a **separate** Form T2125.
- File each completed Form T2125 with your income tax and benefit return.
- For more information on how to complete this form, see Guide T4002, *Business and Professional Income*.

|  |  |   |  |  |  |                            |  |
|--|--|---|--|--|--|----------------------------|--|
| <b>Identification</b>                                  |  |   |  | Your social insurance number   |  |                            |  |
| Your name<br>Elliott, Patricia                         |  |   |  | [redacted]   |  |                            |  |
| Business name<br>Tricia's Toybox                       |  |   |  | Account number<br>(15 characters)  |  |                            |  |
| Business address<br>990 Ambassador Avenue              |  |   |  | City, province or territory<br>Victoria BC   |  | Postal code<br>V 8 X 3 N 2 |  |
| Fiscal period  |  | Year                                      |  | Year   |  | Month                      |  |
| From:  |  | 2 0 1 2                                   |  | 2 0 1 2  |  | 3 1                        |  |
| Main product or service<br>child care                  |  |   |  | Was 2012 your last year of business? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> |  |                            |  |
| Industry code<br>(see the appendix in Guide T4002)     |  |   |  | 6 2 4 4 1 0  |  |                            |  |
| Tax shelter identification number                      |  | Partnership business number<br>(9 digits) |  | Your percentage<br>of the partnership<br>100.00%   |  |                            |  |
| Name and address of person or firm preparing this form |  |   |  |  |  |                            |  |

**Part 1 – Business income**

If you have business income, tick this box and complete this part. Do not complete parts 1 and 2 on the same form.

|  |       |
|--|-------|
| Gross sales, commissions, or fees (including GST/HST collected or collectible) .....   | A     |
| <b>Minus</b> PST, GST/HST, returns, allowances, discounts included in sales, and GST/HST adjustments .....   | (i)   |
| <b>Subtotal (line A minus line (i))</b> .....  | B     |
| <b>For those using the Quick Method – Government assistance calculated as follows:</b>   |       |
| GST/HST collected or collectible on sales, commissions and fees eligible for the Quick Method .....  | (ii)  |
| GST/HST remitted, calculated on (sales, commissions, and fees eligible for the Quick Method plus GST/HST collected or collectible) multiplied by the applicable Quick Method remittance rate ..... | (iii) |
| <b>Subtotal (line (ii) minus line (iii))</b> .....   | (iv)  |
| <b>Adjusted gross sales (line B plus line (iv)) – Enter this amount on line 8000 in Part 3 below</b> .....   | C     |

**Part 2 – Professional income**

If you have professional income, tick this box and complete this part. Do not complete parts 1 and 2 on the same form.

|   |           |   |
|---|-----------|---|
| Gross professional fees including work-in-progress (WIP) and GST/HST collected or collectible .....   | 29,565 00 | D |
| <b>Minus</b> PST, GST/HST included in the fees, GST/HST adjustments and WIP at the end of the year if you elect to exclude it (see Chapter 2 of Guide T4002) .....                      | (i)       |   |
| <b>Subtotal (line D minus line (i))</b> .....   | 29,565 00 | E |
| <b>For those using the Quick Method – Government assistance calculated as follows:</b>  |           |   |
| GST/HST collected or collectible on professional fees eligible for the Quick Method .....   | (ii)      |   |
| GST/HST remitted, calculated on (professional fees eligible for the Quick Method plus GST/HST collected or collectible) multiplied by the applicable Quick Method remittance rate ..... | (iii)     |   |
| <b>Subtotal (line (ii) minus line (iii))</b> .....  | (iv)      |   |
| Work-in-progress (WIP), start of the year, per election to exclude WIP (see Chapter 2 of Guide T4002) .....   | (v)       |   |
| <b>Adjusted professional fees (line E plus lines (iv), and (v)) – Enter this amount on line 8000 in Part 3 below</b> .....  | 29,565 00 | F |

**Part 3 – Gross business or professional income**

|  |      |           |   |
|--|------|-----------|---|
| Adjusted gross sales (from line C in Part 1) or adjusted professional fees (from line F in Part 2) ..... | 8000 | 29,565 00 | G |
| <b>Plus</b>  |      |           |   |
| Reserves deducted last year .....  | 8290 |           |   |
| Other income .....   | 8230 |           |   |
| <b>Total of the above two lines</b> .....  |      |           | H |
| <b>Gross business or professional income (line G plus line H)</b> .....                                  | 8299 | 29,565 00 |   |

Enter this amount on the appropriate line of your income tax and benefit return: business on line 162, professional on line 164, or commission on line 166.



If GST/HST has been remitted or an input tax credit has been claimed, do not include GST/HST when you calculate the cost of goods sold, expenses, or net income (loss) in parts 4 to 6.

**Part 4 – Cost of goods sold and gross profit**

If you have business income, complete this part. Enter only the business part of the costs.

|   |      |  |      |
|---|------|--|------|
| Gross business income from line 8299 in Part 3 on page 1                        |      |  |      |
| Opening inventory (include raw materials, goods in process, and finished goods) | 8300 |  |      |
| Purchases during the year (net of returns, allowances, and discounts)           | 8320 |  |      |
| Direct wage costs   | 8340 |  |      |
| Subcontracts  | 8360 |  |      |
| Other costs   | 8450 |  |      |
| <b>Minus</b>  |      |  |      |
| Closing inventory (include raw materials, goods in process, and finished goods) | 8500 |  |      |
| <b>Cost of goods sold</b>   | 8518 |  |      |
| <b>Gross profit (line I minus line J)</b>                                       |      |  | 8519 |

**Part 5 – Net income (loss) before adjustments**

Gross profit from line 8519 in Part 4 above, or gross income from line 8299 in Part 3 on page 1 29,565 00 K

Expenses (enter only the business part)

|   |      |          |           |
|---|------|----------|-----------|
| Advertising   | 8521 |          |           |
| Meals and entertainment (allowable part only)                                       | 8523 |          |           |
| Bad debts   | 8590 |          |           |
| Insurance   | 8690 |          |           |
| Interest  | 8710 |          |           |
| Business tax, fees, licences, dues, memberships, and subscriptions                  | 8760 |          |           |
| Office expenses   | 8810 |          |           |
| Supplies  | 8811 | 1,946 91 |           |
| Legal, accounting, and other professional fees                                      | 8860 |          |           |
| Management and administration fees  | 8871 | 300 00   |           |
| Rent  | 8910 |          |           |
| Maintenance and repairs   | 8960 | 1,187 26 |           |
| Salaries, wages, and benefits (including employer's contributions)                  | 9060 |          |           |
| Property taxes  | 9180 |          |           |
| Travel (including transportation fees, accommodations, and allowable part of meals) | 9200 |          |           |
| Telephone and utilities   | 9220 |          |           |
| Fuel costs (except for motor vehicles)  | 9224 |          |           |
| Delivery, freight, and express  | 9275 |          |           |
| Motor vehicle expenses (not including CCA)  | 9281 | 5,838 56 |           |
| Allowance on eligible capital property  | 9935 |          |           |
| Capital cost allowance (CCA) (from Area A on page 4)                                | 9936 |          |           |
| Other expenses (specify)  | 9270 |          |           |
| <b>Total business expenses</b>  | 9368 | 9,272 73 |           |
| <b>Net income (loss) before adjustments (line K minus line L)</b>                   | 9369 |          | 20,292 27 |

**Part 6 – Your net income (loss)**

|  |      |             |   |
|--|------|-------------|---|
| Your share of the amount on line 9369 in Part 5 or the amount from your T5013 or T5013 slip                        |      | 20,292 27 M |   |
| <b>Plus:</b> GST/HST rebate for partners received in the year (see Chapter 3)                                      | 9974 |             | N |
| <b>Total (line M plus line N)</b>  |      | 20,292 27   |   |
| <b>Minus:</b> Other amounts deductible from your share of net partnership income (loss) (from the chart on page 3) | 9943 |             | P |
| <b>Net income (loss) after adjustments (line O minus line P)</b>   |      | 20,292 27   | Q |
| <b>Minus:</b> Business-use-of-home expenses (your share of line 3 from the chart on page 3)                        | 9945 | 17,624 59   | R |
| <b>Your net income (loss) (line Q minus line R)</b>  | 9946 | 2,667 68    |   |

Enter this amount on the appropriate line of your income tax and benefit return: business on line 135, professional on line 137, or commission on line 139.

**Other amounts deductible from your share of the net partnership income (loss)**

Claim expenses you incurred that were not included in the partnership statement of income and expenses, and for which the partnership did not reimburse you.

|   |  |  |
|---|--|--|
|   |  |  |
|   |  |  |
|   |  |  |
|   |  |  |
|   |  |  |
|   |  |  |
| <b>Other amounts deductible from your share of the partnership (total of the above lines)</b> |  |  |
| Enter this amount on line 9943, in Part 6 on page 2   |  |  |

**Calculation of business-use-of-home expenses**

|   |               |           |          |
|---|---------------|-----------|----------|
| Heat .....  | 2,457         | 11        |          |
| Electricity .....   |               |           |          |
| Insurance .....   |               |           |          |
| Maintenance .....   |               |           |          |
| Mortgage interest .....   |               |           |          |
| Property taxes .....  |               |           |          |
| Other expenses (specify) <u>phone</u> .....   | 840           | 00        |          |
| <b>Subtotal</b>   | <b>31,026</b> | <b>63</b> |          |
| <b>Minus: Personal use part</b> .....   | <b>13,402</b> | <b>04</b> |          |
| <b>Subtotal</b>   | <b>17,624</b> | <b>59</b> |          |
| <b>Plus: Capital cost allowance (business part only)</b> .....  |               |           |          |
| Amount carried forward from previous year .....   |               |           |          |
| <b>Subtotal</b>   | <b>17,624</b> | <b>59</b> | <b>1</b> |
| <b>Minus: Net income (loss) after adjustments (from line Q in Part 6 on page 2 – if negative, enter "0")</b> .....          | <b>20,292</b> | <b>27</b> | <b>2</b> |
| <b>Business-use-of-home expenses available to carry forward (line 1 minus line 2 – if negative, enter "0")</b>              |               |           |          |
| <b>Allowable claim (the lesser of amounts 1 and 2 above – Enter your share of this amount on line 9945 in Part 6)</b> ..... | <b>17,624</b> | <b>59</b> | <b>3</b> |

**Details of other partners**

| Name and address | Share of net income or (loss) \$ |  | Percentage of partnership % |
|------------------|----------------------------------|--|-----------------------------|
|                  |                                  |  |                             |
|                  |                                  |  |                             |
|                  |                                  |  |                             |
|                  |                                  |  |                             |

**Details of equity**

|                                     |      |  |  |
|-------------------------------------|------|--|--|
| Total business liabilities .....    | 9931 |  |  |
| Drawings in 2012 .....              | 9932 |  |  |
| Capital contributions in 2012 ..... | 9933 |  |  |

Name: Patricia Elliott SIN [redacted] Printed on: 2011/06/09 22:06

Protected B when completed

**Area A – Calculation of capital cost allowance (CCA) claim**

| 1<br>Class<br>number   | 2<br>Undepreciated<br>capital cost (UCC)<br>at the start of the year | 3<br>Cost of additions<br>in the year<br>(see areas B and C<br>below) | 4<br>Proceeds of<br>dispositions<br>in the year (see<br>areas D and E below) | 5<br>UCC after additions<br>and dispositions<br>(col. 2 plus col. 3<br>minus col. 4) | 6<br>Adjustment for<br>current-year additions<br>1/2 x (col. 3 minus<br>col. 4). If negative,<br>enter "0." | 7<br>Base amount<br>for CCA<br>(col. 5 minus col. 6) | 8<br>Rate<br>(%) | 9<br>CCA for the year<br>(col. 7 x col. 8 or an<br>adjusted amount) | 10<br>UCC at the end of the<br>year<br>(col. 5 minus col. 9) |
|--|--|---|--|--|---|--|------------------|---|--|
|  |  |   |  |  |   |  |                  |   |  |
|  |  |   |  |  |   |  |                  |   |  |
|  |  |   |  |  |   |  |                  |   |  |
|  |  |   |  |  |   |  |                  |   |  |
| <b>Total CCA claim for the year</b> (enter this amount, minus any personal part and any CCA for business-use-of-home expenses, on line 9936 in Part 5 on page 2**) |  |   |  |  |   |  |                  |   |  |

\* If you have a negative amount in this column, add it to income as a recapture on line 8230, "Other income," in Part 3 on page 1. If no property is left in the class and there is a positive amount in the column, deduct the amount from income as a terminal loss on line 9270, "Other expenses," in Part 5 on page 2. Recapture and terminal loss do not apply to a class 10.1 property. For more information, see Chapter 4 of Guide T4002, *Business and Professional Income*.

\*\* For information on CCA for "Calculation of business-use-of-home expenses" on page 3, see "Special situations" in Chapter 4 of Guide T4002.

**Area B – Details of equipment additions in the year**

| 1<br>Class<br>number                         | 2<br>Property<br>details | 3<br>Total cost | 4<br>Personal part<br>(if applicable) | 5<br>Business part<br>(column 3 minus<br>column 4) |
|--|--------------------------|-----------------|---------------------------------------|--|
|  |                          |                 |                                       |  |
|  |                          |                 |                                       |  |
| <b>Total equipment additions in the year</b> |                          |                 |                                       | 9925   |

**Area C – Details of building additions in the year**

| 1<br>Class<br>number                        | 2<br>Property<br>details | 3<br>Total cost | 4<br>Personal part<br>(if applicable) | 5<br>Business part<br>(column 3 minus<br>column 4) |
|---|--------------------------|-----------------|---------------------------------------|--|
|   |                          |                 |                                       |  |
|   |                          |                 |                                       |  |
| <b>Total building additions in the year</b> |                          |                 |                                       | 9927   |

**Area D – Details of equipment dispositions in the year**

| 1<br>Class<br>number                            | 2<br>Property<br>details | 3<br>Proceeds of disposition<br>(should not be more than<br>the capital cost) | 4<br>Personal part (if<br>applicable) | 5<br>Business part<br>(column 3 minus<br>column 4) |
|---|--------------------------|---|---------------------------------------|--|
|   |                          |   |                                       |  |
|   |                          |   |                                       |  |
| <b>Total equipment dispositions in the year</b> |                          |   |                                       | 9926   |

Note: If you disposed of a building from your business in the year, see Chapter 4 of Guide T4002, for information about your proceeds of disposition.

**Area E – Details of building dispositions in the year**

| 1<br>Class<br>number                           | 2<br>Property<br>details | 3<br>Proceeds of disposition<br>(should not be more than<br>the capital cost) | 4<br>Personal part (if<br>applicable) | 5<br>Business part<br>(column 3 minus<br>column 4) |
|--|--------------------------|---|---------------------------------------|--|
|  |                          |   |                                       |  |
|  |                          |   |                                       |  |
| <b>Total building dispositions in the year</b> |                          |   |                                       | 9928   |

Note: If you disposed of property from your business in the year, see Chapter 4 of Guide T4002, for information about your proceeds of disposition.

**Area F – Details of land additions and dispositions in the year**

|   |      |
|---|------|
| Total cost of all land additions in the year          | 9923 |
| Total proceeds from all land dispositions in the year | 9924 |

Note: You cannot claim capital cost allowance on land.





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|                                    |                                      |
|------------------------------------|--------------------------------------|
| <b>SIN:</b><br>[REDACTED]          | <b>Tax Year:</b><br>2012             |
| <b>Name:</b><br>PATRICIA D ELLIOTT | <b>Date of Notice:</b><br>2013-06-20 |

### Notice of Assessment

#### Explanation of changes

Thank you for filing your income tax return. This notice explains the results of our assessment and any changes we may have made. Please refer to the "Summary" area for additional information.

We are processing your claim separately for the goods and services tax/harmonized sales tax credit and any related provincial credit. We will let you know if you are eligible for these credits.

You can avoid additional interest charges if you pay the balance due by July 10, 2013.

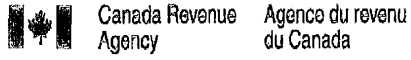
A Tax-Free Savings Account (TFSA) allows Canadian residents, who are 18 years of age or older, to earn tax-free investment income throughout their lifetime. To find out how much you can contribute to your TFSA for 2013, go to [www.cra.gc.ca/myaccount](http://www.cra.gc.ca/myaccount) or call our Enquiries service at the number shown on this notice. For more information concerning TFSAs, go to [www.cra.gc.ca/tfsa](http://www.cra.gc.ca/tfsa).

Released at the request of an authorized individual in accordance with Section 241 of the Income Tax Act.

|          |            |
|----------|------------|
| Initials | Date       |
|          | 2018-12-28 |

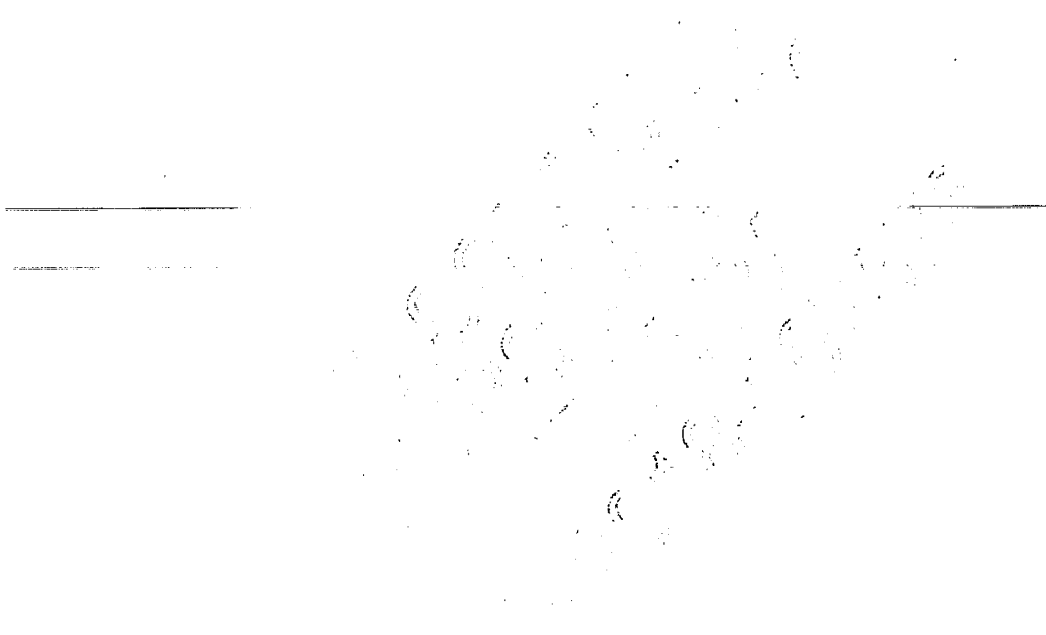
06

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Use My Account to access and manage your tax and benefit information online. Make changes to your return, check your RRSP information, set up direct deposit and more. To register for My Account, go to [www.cra.gc.ca/myaccount](http://www.cra.gc.ca/myaccount).

If you have any questions about your assessment, please call our Enquiries service at 1-800-959-8281. If you need to contact another area of the Agency, see the telephone listings in the government section of your telephone book.

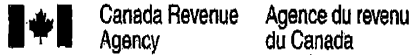


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|          |            |
|----------|------------|
| Initials | Date       |
|          | 2018-12-28 |

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## Summary

|  |           |
|--|-----------|
| 150 Total income .....                                       | 3,667     |
| 236 Net income .....   | 3,667     |
| 260 Taxable income .....                                     | 3,667     |
| 350 Total federal non-refundable tax credits .....           | 4,281     |
| 6150 Total British Columbia non-refundable tax credits ..... | 1,095     |
| 420 Net federal tax .....                                    | 0.00      |
| 435 Total payable .....                                      | 0.00      |
| 437 Total income tax deducted .....                          | 0.00      |
| 482 Total credits .....                                      | 0.00      |
| (Total payable minus Total credits) .....                    | 0.00      |
| Balance from this assessment .....                           | 0.00      |
| Previous account balance .....                               | DR 804.68 |
| Balance due .....  | DR 804.68 |

## Your 2013 RRSP Deduction Limit Statement

|  |       |          |
|--|-------|----------|
| RRSP deduction limit for 2012                        |       | \$25,435 |
| Minus: Allowable RRSP contributions deducted in 2012 |       | \$0      |
| -----  |       |          |
| Unused RRSP deduction limit at the end of 2012       |       | \$25,435 |
| Plus 18% of 2012 earned income of \$2,667            | \$480 |          |
| Minus: 2012 pension adjustment                       | \$0   | \$480    |
| -----  |       |          |
|  |       | \$25,915 |
| Minus: 2013 net past service pension adjustment      |       | \$0      |
| Plus: 2013 pension adjustment reversal               |       | \$0      |
| Your RRSP deduction limit for 2013                   |       | \$25,915 |
| =====  |       |          |
| Your unused RRSP contributions available for 2013    |       | \$0      |
| =====  |       |          |

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|          |            |
|----------|------------|
| Initials | Date       |
|          | 2018-12-28 |

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|                                    |                                      |
|------------------------------------|--------------------------------------|
| <b>SIN:</b><br>[REDACTED]          | <b>Tax Year:</b><br>2013             |
| <b>Name:</b><br>PATRICIA D ELLIOTT | <b>Date of Notice:</b><br>2014-05-27 |

### Notice of Assessment

#### Explanation of changes

Thank you for filing your income tax return. This notice explains the results of our assessment and any changes we may have made. Please refer to the "Summary" area for additional information. Keep this notice for your records.

We will inform you in July if you are eligible for the goods and services tax/harmonized sales tax credit and any related provincial credit for the period from July 2014 to June 2015.

We used part of your refund to pay the balance you owe from other assessments. We adjusted your arrears interest accordingly.

We will deposit your refund into the account shown on your direct deposit application.

A Tax-Free Savings Account (TFSA) allows Canadian residents, who are 18 years of age or older, to earn tax-free investment income throughout their lifetime. To find out how

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|          |                    |
|----------|--------------------|
| Initials | Date<br>2018-12-28 |
|----------|--------------------|

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much you can contribute to your TFSA for 2014, go to [www.cra.gc.ca/myaccount](http://www.cra.gc.ca/myaccount) or call our Enquiries service at the number shown on this notice. For more information concerning TFSAs, go to [www.cra.gc.ca/tfsa](http://www.cra.gc.ca/tfsa).

Use My Account to access and manage your tax and benefit information online. Make changes to your return, check your RRSP information, set up direct deposit and more. To register for My Account, go to [www.cra.gc.ca/myaccount](http://www.cra.gc.ca/myaccount).

If you have any questions about your assessment, please call our Enquiries service at 1-800-959-8281. If you need to contact another area of the Canada Revenue Agency, go to [www.cra.gc.ca/contact](http://www.cra.gc.ca/contact) for a list of our services and telephone numbers.

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|          |            |
|----------|------------|
| Initials | Date       |
|          | 2018-12-28 |

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The wordmark for Canada, featuring a stylized maple leaf above the word "Canada".



Canada Revenue Agency  
Agence du revenu  
du Canada  
Summary

|   |        |
|---|--------|
| 150 Total income .....  | 23,072 |
| 236 Net income .....  | 23,072 |
| Deductions from net income .....                                | 5,713  |
| 260 Taxable income .....  | 17,359 |
| 350 Total federal non-refundable<br>tax credits .....           | 4,636  |
| 6150 Total British Columbia<br>non-refundable tax credits ..... | 1,019  |
| 420 Net federal tax .....                                       | 0.00   |
| 435 Total payable .....   | 0.00   |
| 437 Total income tax deducted .....                             | 0.00   |
| 448 CPP overpayment .....                                       | 28.89  |
| 453 Working income tax benefit .....                            | 848.01 |
| 482 Total credits .....   | 876.90 |
| (Total payable minus Total credits) .....                       | 876.90 |
| Balance from this assessment .....                              | 876.90 |
| Previous account balance .....                                  | 845.28 |
| Direct deposit .....  | 31.62  |

Your 2014 RRSP/PRPP Deduction Limit Statement

|  |          |          |
|--|----------|----------|
| RRSP/PRPP deduction limit for 2013                         |          | \$25,915 |
| Minus: Employer's PRPP contributions for 2013              |          | \$0      |
| Minus: Allowable RRSP/PRPP contributions deducted for 2013 |          | \$0      |
|  |          | -----    |
| Unused RRSP/PRPP deduction limit at the end of 2013        |          | \$25,915 |
| Plus 18% of 2013 earned income of                          | \$17,359 | \$3,124  |
| Minus: 2013 pension adjustment                             |          | \$0      |
|  |          | -----    |
|  |          | \$29,039 |
| Minus: 2014 net past service pension adjustment            |          | \$0      |
| Plus: 2014 pension adjustment reversal                     |          | \$0      |
|  |          | -----    |
| Your RRSP/PRPP deduction limit for 2014                    |          | \$29,039 |
|  |          | =====    |
| Your unused RRSP/PRPP contributions available for 2014     |          | \$0      |
|  |          | =====    |

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|          |            |
|----------|------------|
| Initials | Date       |
|          | 2018-12-28 |

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|                                    |                                      |
|------------------------------------|--------------------------------------|
| <b>SIN:</b><br>[REDACTED]          | <b>Tax Year:</b><br>2014             |
| <b>Name:</b><br>PATRICIA D ELLIOTT | <b>Date of Notice:</b><br>2015-07-13 |

### Notice of Assessment

#### Explanation of changes

Thank you for filing your income tax return. This notice explains the results of our assessment and any changes we may have made. Please refer to the "Summary" area for additional information. Keep this notice for your records.

Get your mail online! Log into My Account, select "Manage online mail," and sign up to receive your notices online. Use My Account to access and manage your tax and benefit information online. Make changes to your return, check your RRSP information, set up direct deposit and more. To register for My Account, go to [www.cra.gc.ca/myaccount](http://www.cra.gc.ca/myaccount).

We will automatically calculate the goods and services tax/harmonized sales tax credit and any related provincial credit based on your family net income, province of residence, marital status, and qualified children. If you qualify for any credit for July 2015 to June 2016, we will soon let you know.

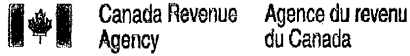
We will deposit your refund into the account shown on your direct deposit application.

Released at the request of an authorized individual in accordance with Section 241 of the Income Tax Act.

|          |            |
|----------|------------|
| Initials | Date       |
|          | 2018-12-28 |

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Canada



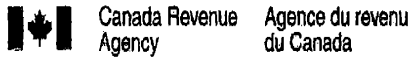
A Tax-Free Savings Account (TFSA) allows Canadian residents, who are 18 years of age or older, to earn tax-free investment income throughout their lifetime. To find out how much you can contribute to your TFSA for 2015, go to [www.cra.gc.ca/myaccount](http://www.cra.gc.ca/myaccount) or call our Enquiries service at the number shown on this notice. For more information concerning TFSAs, go to [www.cra.gc.ca/tfsa](http://www.cra.gc.ca/tfsa).

If you have any questions about your assessment, please call our Enquiries service at 1-800-959-8281. If you need to contact another area of the Canada Revenue Agency, go to [www.cra.gc.ca/contact](http://www.cra.gc.ca/contact) for a list of our services and telephone numbers.

Released at the request of an authorized individual in accordance with Section 241 of the Income Tax Act.

|          |            |
|----------|------------|
| Initials | Date       |
|          | 2018-12-28 |

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## Summary

|   |           |
|---|-----------|
| 150 Total income .....  | 24,744    |
| Deductions from total income .....                              | 616       |
| 236 Net income .....  | 24,128    |
| Deductions from net income .....                                | 1,911     |
| 260 Taxable income .....  | 22,217    |
| 350 Total federal non-refundable<br>tax credits .....           | 4,632     |
| 6150 Total British Columbia<br>non-refundable tax credits ..... | 1,036     |
| 420 Net federal tax .....                                       | 0.00      |
| 435 Total payable .....   | 0.00      |
| 437 Total income tax deducted .....                             | 234.15    |
| 448 CPP overpayment .....                                       | 11.46     |
| 453 Working income tax benefit .....                            | 692.90    |
| 482 Total credits .....   | 938.51    |
| (Total payable minus total credits) .....                       | 938.51    |
| Balance from this assessment .....                              | 938.51 CR |
| Refund transfer .....   | 909.24    |
| Direct deposit .....  | 29.27 CR  |

Released at the request of an authorized individual in accordance with Section 241 of the Income Tax Act.

|          |            |
|----------|------------|
| Initials | Date       |
|          | 2018-12-28 |

Canada



Canada Revenue Agency  
Agence du revenu du Canada

Your 2015 RRSP/PRPP Deduction Limit Statement

|  |          |         |          |
|--|----------|---------|----------|
| RRSP/PRPP deduction limit for 2014                         |          |         | \$29,039 |
| Minus: Employer's PRPP contributions for 2014              |          |         | \$0      |
| Minus: Allowable RRSP/PRPP contributions deducted for 2014 |          |         | \$0      |
|  |          |         | -----    |
| Unused RRSP/PRPP deduction limit at the end of 2014        |          |         | \$29,039 |
| Plus 18% of 2014 earned income of                          | \$17,757 | \$3,196 |          |
| Minus: 2014 pension adjustment                             |          | \$0     | \$3,196  |
|  |          |         | -----    |
|  |          |         | \$32,235 |
| Minus: 2015 net past service pension adjustment            |          |         | \$0      |
| Plus: 2015 pension adjustment reversal                     |          |         | \$0      |
|  |          |         | -----    |
| Your RRSP/PRPP deduction limit for 2015                    |          |         | \$32,235 |
|  |          |         | =====    |
| Your unused RRSP/PRPP contributions available for 2015     |          |         | \$0      |
|  |          |         | =====    |

Released at the request of an authorized individual in accordance with Section 241 of the Income Tax Act.

|          |            |
|----------|------------|
| Initials | Date       |
|          | 2018-12-28 |

Canada



Canada Revenue Agency  
Agence du revenu du Canada

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SURREY BC V3T 5E1

Page 1

### Notice details

|                         |                      |
|-------------------------|----------------------|
| Social insurance number | [REDACTED]           |
| Tax year                | 2015                 |
| Date issued             | March 14, 2016       |
| Tax centre              | Surrey BC<br>V3T 5E1 |
|                         | 6JR39M79             |

PATRICIA D ELLIOTT  
3291 MEGAW PL  
VICTORIA BC V8P 5J7

### Notice of assessment

We assessed your 2015 income tax and benefit return and calculated your balance.

You have a refund of **\$1,811.50**.

We will deposit your refund into your bank account.

Thank you,

Andrew Treusch  
Commissioner of Revenue

#### Account summary

You have a refund in the amount shown below.

**Refund:** \$1,811.50

#### Go green, go paperless

Get your mail online through **My Account**.

1. log in at [www.cra.gc.ca/myaccount](http://www.cra.gc.ca/myaccount)
2. select "Manage online mail"

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**Tax assessment**

Page 2

We calculated your taxes using the amounts below.

We may review your return later to verify income you reported or deductions or credits you claimed. For more information, go to [www.cra.gc.ca/reviews](http://www.cra.gc.ca/reviews). Keep all your slips, receipts, and other supporting documents in case we ask to see them.

**Summary**

| Line | Description                                       | (\$)     | Amount | CR/DR |
|------|---|----------|--------|-------|
| 150  | Total income                                      | 20,147   |        |       |
|      | Deductions from total income                      | 480      |        |       |
| 236  | Net income  | 19,667   |        |       |
|      | Deductions from net income                        | 1,467    |        |       |
| 260  | Taxable income                                    | 18,200   |        |       |
| 350  | Total federal non-refundable tax credits          | 3,809    |        |       |
| 6150 | Total British Columbia non-refundable tax credits | 1,086    |        |       |
| 420  | Net federal tax                                   | 0.00     |        |       |
| 435  | Total payable                                     | 0.00     |        |       |
| 437  | Total income tax deducted                         | 28.89    |        |       |
| 448  | CPP overpayment                                   | 49.50    |        |       |
| 453  | Working income tax benefit                        | 1,538.32 |        |       |
| 459  | Children's fitness tax credit                     | 184.35   |        |       |
|      | Subtotal credits                                  | 1,801.06 |        |       |
|      | British Columbia sales tax credit                 | 10.44    |        |       |
| 479  | Total British Columbia tax credits                | 10.44    |        |       |
| 482  | Total credits                                     | 1,811.50 |        |       |
|      | (Total payable minus Total credits)               | 1,811.50 |        |       |
|      | Balance from this assessment                      | 1,811.50 |        | CR    |
|      | Direct deposit                                    | 1,811.50 |        | CR    |



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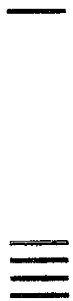
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Page 3

**Explanation of changes and other important information**

We will automatically calculate your goods and services tax/harmonized sales tax credit and any related provincial credit based on your family net income, province of residence, marital status, and qualified children. If you qualify for any credit for July 2016 to June 2017, we will let you know in July.

2017-2018  
2018-2019  
2019-2020  
2020-2021  
2021-2022  
2022-2023  
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Page 4

**RRSP/PRPP deduction limit statement**

For more information about the details listed below or how employer contributions to a PRPP or group RRSP will affect your contribution room for the year, go to [www.cra.gc.ca/rrsp](http://www.cra.gc.ca/rrsp) or refer to Guide T4040, *RRSPs and Other Registered Plans for Retirement*.

| Description   | (\$)<br>Amount |
|---|----------------|
| RRSP/PRPP deduction limit for 2015  | 32,235         |
| <b>Minus:</b> Employer's PRPP contributions for 2015  | 0              |
| <b>Minus:</b> Allowable RRSP/PRPP contributions deducted for 2015                                     | 0              |
| <b>Plus:</b> 18% of 2015 earned income, up to a maximum of \$25,370                                   | 2,389          |
| <b>Minus:</b> 2015 pension adjustment   | 0              |
| <b>Minus:</b> 2016 net past service pension adjustment  | 0              |
| <b>Plus:</b> 2016 pension adjustment reversal   | 0              |
| <b>2016 RRSP/PRPP deduction limit (A)</b>   | <b>34,624</b>  |
| <b>Minus:</b> Unused RRSP/PRPP contributions previously reported and available to deduct for 2016 (B) | 0              |
| <b>Available contribution room for 2016</b>   | <b>34,624</b>  |

**Note:** If your available contribution room is a negative amount (shown in brackets), you have no contribution room available for 2016 and may have over contributed to your RRSP/PRPP. If this is the case, you may have to pay tax on any excess contributions.

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## More information

If you need more information about your income tax and benefit return, go to [www.canada.ca/taxes](http://www.canada.ca/taxes), go to My Account at [www.cra.gc.ca/myaccount](http://www.cra.gc.ca/myaccount), or call 1-800-959-8281.

### If you move

Let us know your new address as soon as possible. For more information on changing your address, go to [www.cra.gc.ca/newaddress](http://www.cra.gc.ca/newaddress).

### If you have new or additional information and want to change your return:

- go to [www.cra.gc.ca/changereturn](http://www.cra.gc.ca/changereturn) for faster service; or
- write to the tax centre address shown on this notice, and include your social insurance number and any documents supporting the change.

### If you want to register a formal dispute:

- go to [www.cra.gc.ca/resolvingdisputes](http://www.cra.gc.ca/resolvingdisputes); you have 90 days from the date of this notice to register your dispute.

### Help for persons with hearing, speech, or visual impairments

You can get this notice in braille, large print, or audio format. For more information about other formats, go to [www.cra.gc.ca/alternate](http://www.cra.gc.ca/alternate).

If you use a teletypewriter, you can get tax information by calling 1-800-665-0354.

### My Account

Use My Account to see and manage your tax information online. Make changes to your return, check your RRSP information, set up direct deposit, and more. To register for My Account, go to [www.cra.gc.ca/myaccount](http://www.cra.gc.ca/myaccount).

### Fraudulent communications (scams)

The CRA is committed to protecting the personal information of taxpayers and benefit recipients. We will never ask you to give us personal information of any kind by email, text message, or by clicking on a link. Nor will we ask you to pay your balance through the use of a pre-paid credit card. For more information about how to recognize scams and protect yourself, go to [www.cra.gc.ca/security](http://www.cra.gc.ca/security).



Canada Revenue Agency / Agence du revenu du Canada

WINNIPEG MB R3C 3M2

000015063

PATRICIA D ELLIOTT  
3291 MEGAW PL  
VICTORIA BC V8P 5J7

### Notice details

|                         |             |
|-------------------------|-------------|
| Social insurance number | [REDACTED]  |
| Tax year                | 2016        |
| Date issued             | Mar 6, 2017 |

6JR39M79

### Notice of assessment

We assessed your 2016 income tax and benefit return and calculated your balance.

You have a refund of **\$864.67**.

We will deposit your refund into your bank account.

Thank you,

Bob Hamilton  
Commissioner of Revenue

#### Account summary

You have a refund in the amount shown below.

**Refund:** \$864.67

#### Go green, go paperless

Get your mail online through My Account.

1. Log in at [cra.gc.ca/myaccount](http://cra.gc.ca/myaccount).
2. Select "Manage online mail".

**Notice details**

PATRICIA D ELLIOTT  
3291 MEGAW PL  
VICTORIA BC V8P 5J7

|                         |            |
|-------------------------|------------|
| Social insurance number | ██████████ |
| Tax year                | 2016       |

**Tax assessment**

We calculated your taxes using the amounts below. The following summary is based on the information we have or you gave us.

We may review your return later to verify income you reported or deductions or credits you claimed. For more information, go to [cra.gc.ca/reviews](http://cra.gc.ca/reviews). Keep all your slips, receipts, and other supporting documents in case we ask to see them.

**Summary**

| Line | Description                                       | \$ Final amount | CR/DR     |
|------|---|-----------------|-----------|
| 150  | Total income                                      | 40,395          |           |
|      | Deductions from total income                      | 1,971           |           |
| 236  | Net income  | 38,424          |           |
| 260  | Taxable income                                    | 38,424          |           |
| 350  | Total federal non-refundable tax credits          | 4,150           |           |
| 6150 | Total British Columbia non-refundable tax credits | 1,230           |           |
| 420  | Net federal tax                                   | 1,613.38        |           |
| 428  | Net British Columbia tax                          | 719.37          |           |
| 435  | Total payable                                     | 2,332.75        |           |
| 437  | Total income tax deducted                         | 3,226.62        |           |
| 459  | Children's fitness tax credit                     | 150.00          |           |
| 482  | Total credits                                     | 3,376.62        |           |
|      | Total payable minus Total credits                 | 1,043.87        | CR        |
|      | Balance from this assessment                      | 1,043.87        | CR        |
|      | Refund transfer                                   | 179.20          |           |
|      | <b>Direct deposit</b>                             | <b>864.67</b>   | <b>CR</b> |

**Explanation of changes and other important information**

We will automatically calculate your goods and services tax/harmonized sales tax credit and any related provincial credit based on your family net income, province of residence, marital status, and qualified children. If you qualify for any credit for July 2017 to June 2018, we will let you know in July.

Based on the information you gave us, the universal child care benefit amount designated as your dependant's income is \$720.

We transferred \$179.20 of your refund because you owe a debt under the B.C. Employment and Assistance Debt program (British Columbia). If you have questions about this debt, call the program representative at

**Notice details**

|                         |            |
|-------------------------|------------|
| Social insurance number | ██████████ |
| Tax year                | 2016       |

PATRICIA D ELLIOTT  
 3291 MEGAW PL  
 VICTORIA BC V8P 5J7

1-877-405-4965.

| <b>RRSP/PRPP deduction limit statement</b>  |               |
|---|---------------|
| For more information about the details listed below or how employer contributions to a PRPP or group RRSP will affect your contribution room for the year, go to <a href="http://cra.gc.ca/rrsp">cra.gc.ca/rrsp</a> or refer to Guide T4040, <i>RRSPs and Other Registered Plans for Retirement</i> . |               |
| Description   | \$ Amount     |
| RRSP/PRPP deduction limit for 2016  | 34,624        |
| <b>Minus:</b> Employer's PRPP contributions for 2016  | 0             |
| <b>Minus:</b> Allowable RRSP/PRPP contributions deducted for 2016   | 0             |
| <b>Plus:</b> 18% of 2016 earned income, up to a maximum of \$26,010   | 7,271         |
| <b>Minus:</b> 2016 pension adjustment   | 0             |
| <b>Minus:</b> 2017 net past service pension adjustment  | 0             |
| <b>Plus:</b> 2017 pension adjustment reversal   | 0             |
| <b>RRSP/PRPP deduction limit for 2017</b>   | <b>41,895</b> |
| <b>Minus:</b> Unused RRSP/PRPP contributions previously reported and available to deduct for 2017   | 0             |
| <b>Available contribution room for 2017</b>   | <b>41,895</b> |
| <p><b>Note:</b> If your available contribution room is a negative amount (shown in brackets), you have no contribution room available for 2017 and may have over contributed to your RRSP/PRPP. If this is the case, you may have to pay tax on any excess contributions.</p>                         |               |

### More information

If you need more information about your income tax and benefit return, go to [canada.ca/taxes](http://canada.ca/taxes), go to My Account at [cra.gc.ca/myaccount](http://cra.gc.ca/myaccount), or call 1-800-959-8281.

To find your tax centre, go to [cra.gc.ca/tso](http://cra.gc.ca/tso).

### If you move

Let us know your new address as soon as possible. For more information on changing your address, go to [cra.gc.ca/newaddress](http://cra.gc.ca/newaddress).

### If you have new or additional information and want to change your return:

- go to [cra.gc.ca/changereturn](http://cra.gc.ca/changereturn) for faster service; or
- write to the tax centre address shown on this notice, and include your social insurance number and any documents supporting the change.

### If you want to register a formal dispute:

- go to [cra.gc.ca/resolvingdisputes](http://cra.gc.ca/resolvingdisputes); you have 90 days from the date of this notice to register your dispute.

### Definitions

**DR** (debit) is the amount you owe us and **CR** (credit) is the amount we owe you.

### Help for persons with hearing, speech, or visual impairments

You can get this notice in braille, large print, or audio format. For more information about other formats, go to [cra.gc.ca/alternate](http://cra.gc.ca/alternate).

If you use a teletypewriter, you can get tax information by calling 1-800-665-0354.

### My Account

Use My Account to see and manage your tax information online. Make changes to your return, check your RRSP information, set up direct deposit, and more. To register for My Account, go to [cra.gc.ca/myaccount](http://cra.gc.ca/myaccount).

### Fraudulent communications (scams)

The CRA is committed to protecting the personal information of taxpayers and benefit recipients. We will never ask you to give us personal information of any kind by email, text message, or by clicking on a link. Nor will we ask you to pay your balance through the use of a pre-paid credit card. For more information about how to recognize scams and protect yourself, go to [cra.gc.ca/security](http://cra.gc.ca/security).



Canada Revenue Agency / Agence du revenu du Canada

WINNIPEG MB R3C 3M2

000049731

PATRICIA D ELLIOTT  
3291 MEGAW PL  
VICTORIA BC V8P 5J7

**Notice details**

|                                |             |
|--------------------------------|-------------|
| <b>Social insurance number</b> | [REDACTED]  |
| <b>Tax year</b>                | 2017        |
| <b>Date issued</b>             | Mar 8, 2018 |
|                                | 6JR39M79    |

**Notice of assessment**

We assessed your 2017 income tax and benefit return and calculated your balance.

You have a refund of **\$562.92**.

We will deposit your refund into your bank account.

Thank you,

Bob Hamilton  
Commissioner of Revenue

**Account summary**

You have a refund in the amount shown below.

**Refund:** \$562.92

**Go green, go paperless**

Get your mail online through My Account.

1. Log in at [cra.gc.ca/myaccount](http://cra.gc.ca/myaccount).
2. Select "Manage online mail".



**Notice details**

PATRICIA D ELLIOTT  
3291 MEGAW PL  
VICTORIA BC V8P 5J7

|                         |            |
|-------------------------|------------|
| Social insurance number | ██████████ |
| Tax year                | 2017       |

**Tax assessment**

We calculated your taxes using the amounts below. The following summary is based on the information we have or you gave us.

We may review your return later to verify income you reported or deductions or credits you claimed. For more information, go to [canada.ca/taxes-reviews](http://canada.ca/taxes-reviews). Keep all your slips, receipts, and other supporting documents in case we ask to see them.

**Summary**

| Line | Description                                       | \$ Final amount | CR/DR     |
|------|---|-----------------|-----------|
| 150  | Total income                                      | 43,030          |           |
|      | Deductions from total income                      | 1,385           |           |
| 236  | Net income  | 41,645          |           |
| 260  | Taxable income                                    | 41,645          |           |
| 350  | Total federal non-refundable tax credits          | 4,225           |           |
| 6150 | Total British Columbia non-refundable tax credits | 1,180           |           |
| 420  | Net federal tax                                   | 2,021.05        |           |
| 428  | Net British Columbia tax                          | 999.16          |           |
| 435  | Total payable                                     | 3,020.21        |           |
| 437  | Total income tax deducted                         | 3,583.13        |           |
| 482  | Total credits                                     | 3,583.13        |           |
|      | Total payable minus Total credits                 | 562.92          | CR        |
|      | Balance from this assessment                      | 562.92          | CR        |
|      | <b>Direct deposit</b>                             | <b>562.92</b>   | <b>CR</b> |

**Explanation of changes and other important information**

We will automatically calculate your goods and services tax/harmonized sales tax credit and any related provincial credit based on your family net income, province of residence, marital status, and qualified children. If you qualify for any credit for July 2018 to June 2019, we will let you know in July.

**Notice details**

|                         |            |
|-------------------------|------------|
| Social insurance number | ██████████ |
| Tax year                | 2017       |

PATRICIA D ELLIOTT  
3291 MEGAW PL  
VICTORIA BC V8P 5J7

| <b>RRSP/PRPP deduction limit statement</b>  |               |
|---|---------------|
| For more information about the details listed below or how employer contributions to a PRPP or group RRSP will affect your contribution room for the year, go to <a href="http://canada.ca/rrsp">canada.ca/rrsp</a> or refer to Guide T4040, RRSPs and Other Registered Plans for Retirement. |               |
| Description   | \$ Amount     |
| RRSP/PRPP deduction limit for 2017  | 41,895        |
| <b>Minus:</b> Employer's PRPP contributions for 2017  | 0             |
| <b>Minus:</b> Allowable RRSP/PRPP contributions deducted for 2017   | 0             |
| <b>Plus:</b> 18% of 2017 earned income, up to a maximum of \$26,230   | 7,745         |
| <b>Minus:</b> 2017 pension adjustment   | 0             |
| <b>Minus:</b> 2018 net past service pension adjustment  | 0             |
| <b>Plus:</b> 2018 pension adjustment reversal   | 0             |
| <b>RRSP/PRPP deduction limit for 2018</b>   | <b>49,640</b> |
| <b>Minus:</b> Unused RRSP/PRPP contributions previously reported and available to deduct for 2018   | 0             |
| <b>Available contribution room for 2018</b>   | <b>49,640</b> |
| <p><b>Note:</b> If your available contribution room is a negative amount (shown in brackets), you have no contribution room available for 2018 and may have over contributed to your RRSP/PRPP. If this is the case, you may have to pay tax on any excess contributions.</p>                 |               |

## More information

If you need more information about your income tax and benefit return, go to [canada.ca/taxes](http://canada.ca/taxes), go to My Account at [canada.ca/guide-my-cra-account](http://canada.ca/guide-my-cra-account), or call 1-800-959-8281.

To find your tax centre, go to [canada.ca/cra-offices](http://canada.ca/cra-offices).

### If you move

Let us know your new address as soon as possible. For more information on changing your address, go to [canada.ca/cra-change-address](http://canada.ca/cra-change-address).

### If you have new or additional information and want to change your return:

- go to [canada.ca/change-tax-return](http://canada.ca/change-tax-return) for faster service; or
- write to the tax centre address shown on this notice, and include your social insurance number and any documents supporting the change.

### If you want to register a formal dispute:

- go to [canada.ca/cra-complaints-disputes](http://canada.ca/cra-complaints-disputes); you have 90 days\* from the date of this notice to register your dispute.

### Definitions

**DR** (debit) is the amount you owe us and **CR** (credit) is the amount we owe you.

### Help for persons with hearing, speech, or visual impairments

You can get this notice in braille, large print, or audio format. For more information about other formats, go to [canada.ca/cra-multiple-formats](http://canada.ca/cra-multiple-formats).

If you use a teletypewriter, you can get tax information by calling 1-800-665-0354.

### My Account

Use My Account to see and manage your tax information online. Make changes to your return, check your RRSP information, set up direct deposit, and more. To register for My Account, go to [cra.gc.ca/myaccount](http://cra.gc.ca/myaccount).

### Fraudulent communications (scams)

The CRA is committed to protecting the personal information of taxpayers and benefit recipients. We will never ask you to give us personal information of any kind by email, text message, or by clicking on a link. Nor will we ask you to pay your balance through the use of a pre-paid credit card. For more information about how to recognize scams and protect yourself, go to [cra.gc.ca/security](http://cra.gc.ca/security).



Government  
of Canada

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du Canada

Canada Revenue Agency

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## T4 Statement of remuneration paid

### Slip information for tax year 2018

2018 T4 slip (original) from CRAFTSMAN COLLISION (1981) LTD

| Box number | Box name                            | Box value        |
|------------|-------------------------------------|------------------|
| 10         | Province of employment              | British Columbia |
| 14         | <u>Employment income</u>            | 44,808.98        |
| 16         | <u>Employee's CPP contributions</u> | 2,044.81         |
| 17         | <u>Employee's QPP contributions</u> |                  |
| 18         | <u>Employee's EI premiums</u>       | 733.83           |
| 20         | <u>RPP contributions</u>            |                  |
| 22         | <u>Income tax deducted</u>          | 3,880.91         |
| 24         | <u>EI insurable earnings</u>        | 44,206.79        |
| 26         | <u>CPP/QPP pensionable earnings</u> | 44,808.98        |
| 28         | Exempt CPP/QPP                      |                  |
| 28         | Exempt EI                           |                  |
| 28         | Exempt PPIP                         |                  |
| 44         | <u>Union dues</u>                   |                  |
| 46         | <u>Charitable donations</u>         |                  |
| 52         | <u>Pension adjustment</u>           |                  |

| Box number | Box name                        | Box value |
|------------|---------------------------------|-----------|
| 55         | <u>Employee's PPIP premiums</u> |           |
| 56         | <u>PPIP insurable earnings</u>  |           |

## Other information

| Box number | Box name                                     | Box value |
|------------|--|-----------|
| 40         | <u>Other taxable allowances and benefits</u> | 602.19    |

Do not report amounts in boxes 30, 31, 32, 33, 34, 36, 38, 40, 68, 69, 70, 71 and 86 on your tax return. Amounts in boxes 30, 32, 34, 36, 38, 40, and 86 are already included in box 14.

[Previous](#)

Screen ID: TIS.13

Date modified:

2019-05-13



## Dispute Resolution Services

Residential Tenancy Branch  
Office of Housing and Construction Standards

**File No: 248428**

In the matter of the *Residential Tenancy Act*, SBC 2002, c. 78, as amended

Between

**Andrew Paul Stuart and Andrea Marie Stuart, Landlord(s),**

Applicant(s)

And

**Patricia Dawn Elliott, Tenant(s),**

Respondent(s)

Regarding a rental unit at: 990 Ambassador Avenue, Victoria, BC

Date of Hearing: May 13, 2013, by conference call.

Date of Decision: May 13, 2013

Attending:

For the Landlord: Andrew Paul Stuart

For the Tenant: Did not appear



## Dispute Resolution Services

Page: 1

Residential Tenancy Branch  
Office of Housing and Construction Standards

Dispute Codes      MNR, MNDC, MNSD and FF

### Introduction

This hearing was convened on an application made by the landlords on February 18, 2013 seeking a monetary award for unpaid rent, loss of rent, unpaid utilities, cleaning costs and repair of damage to the rental unit, recovery of the filing fee for this proceeding and authorization to retain the security and pet damage deposits in set off against the balance owed.

Despite having been served with the Notice of Hearing sent by registered mail on February 19, 2013, the tenant did not call in to the number provided to enable her participation in the telephone conference call hearing. Therefore, it proceeded in her absence.

### Issue(s) to be Decided

Are the landlords entitled to a monetary award for the claims submitted?

Claims in damages require that several factors be taken into account: whether damages are proven and attributable to the tenant, the comparison of move-in vs. move-out condition inspection reports, normal wear and tear, depreciation, and whether amounts claimed are proven and reasonable. Claims for loss or damage under the legislation or rental agreement require that the claimant do whatever is reasonable to minimize the loss. The burden of proof falls to the applicant.

### Background, Evidence and Analysis

This tenancy began on May 1, 2010 under a fixed term rental agreement. The tenant vacated on or about February 7, 2013 pursuant to a Notice to End Tenancy for unpaid rent with three months remaining in the fixed term.

Rent was \$2,200 per month at the end of the tenancy and the landlords held security and pet damage deposits of \$1,250 each, a total of \$2,500, of which by previous agreement, the tenant had authorized the landlord to retain all but \$778.77.

The landlords submitted into evidence an acknowledgement of the itemized indebtedness signed by the tenant on May 5, 2013. The attending landlord stated that he had communicated with the tenant the following week and she had indicated that, having signed the document in question, she may not attend the hearing.

In the document in question, the tenant authorized the landlords to retain the remainder of the security and pet damage deposits in set off against the remaining claims which are as follows:

**Unpaid rent/loss of rent - \$8,800.** This claim is for \$2,200 per month for unpaid rent for December 2012, January 2013 and February 2013, and for loss of rent for March 2013. On the basis of the tenant's signed acknowledgement, this claim is allowed in full.

**Unpaid utilities - \$1,010.28.** This claim is made up of \$659.57 unpaid utilities moved to the landlords' property taxes on January 1, 2013 and \$350.71 for unpaid utilities to February 6, 2013 when the tenancy ended. Again, on the basis of the tenant's signed acknowledgement, this claim is allowed in full.

**Remainder of security and pet damage deposits – (\$778.77).** With written consent of the tenant and, as authorized by section 72 of the *Act*, I hereby order that the landlords retain the remainder of the tenants security and pet damage deposits in set off against the balance owed.

Thus, I find that the tenant owes to the landlord an amount calculated as follows:

|  |                   |
|--|-------------------|
| Unpaid rent/loss of rent – December 2012 to March 2013 inclusive     | \$ 8,800.00       |
| Unpaid utilities   | 1,010.28          |
| Sub total  | \$9,810.28        |
| Less retained remainder of security & pet deposits (no interest due) | - 778.77          |
| <b>TOTAL remaining owed to landlord</b>                              | <b>\$9,031.51</b> |



Conclusion

In addition to authorization to retain the remainder of the tenant's security and pet damage deposits, the landlords' copy of this decision is accompanied by a Monetary Order for **\$9,031.51**, enforceable through the Provincial Court of British Columbia, for service on the tenant.

This decision is made on authority delegated to me by the Director of the Residential Tenancy Branch under Section 9.1(1) of the *Residential Tenancy Act*.

Dated: May 13, 2013



---

B. Wilkinson, Arbitrator  
Residential Tenancy Branch

**From:** Tricia [mailto:pixie2343@gmail.com]  
**Sent:** September 3, 2019 12:07 PM  
**To:** Toby Alderson; Kristina Cummings; Marlene Audette; Jennifer Burton  
**Subject:** Resignation

Hello,

I would have preferred to do this in person, but with the next two days intended vacation time, I had booked appointments fairly solid and am not able to coordinate a time that works for everyone.


My therapist has recommended some additional time off due to the slow healing process of my hand and my EI coverage ending in two weeks. However, I have also been offered a position for Oct 1 that I would like to accept, so rather than go on another medical leave, I would like to resign from my position at this time.

I have greatly appreciated the accommodations, understanding and flexibility shown to me by Toby, Dawson, Johnie and Marlene while I was recovering from this injury. I know that it has been difficult to run the shop short staffed, and they have been extremely patient.

Attempting to return to my position has forced me to come to the realization that I'm no longer happy in a customer facing environment, and would prefer to move on to a position that does not include a CSR component.

I will miss working for Craftsman, and wish you all the best in the future.

Thanks  
Tricia

 1 attachments (14 KB)

Exit Letter.docx;

----- Forwarded message -----

From: **Tricia** <[pixie2343@gmail.com](mailto:pixie2343@gmail.com)>

Date: Mon., Sep. 23, 2019, 5:30 p.m.

Subject: Exit letter

To: Jennifer Burton <[JBurton@craftsmancollision.com](mailto:JBurton@craftsmancollision.com)>

Hello,

I believe you had said that it would be helpful to write a letter addressing my reasons for leaving Craftsman; please find one attached.

I greatly appreciate you helping me through the last few months and being open to listening and providing feedback; you are a HR gem!

Thanks

Tricia Elliott

To Whom It May Concern:

I wanted to take this opportunity to discuss my reasons for leaving Craftsman Collision in the hopes that my feedback will assist with retaining employees in the future.

As noted in the employee survey completed in the spring, wages are a major concern for those in the bookkeeper role. When I decided to move on and started applying for positions, I was offered several bookkeeping positions at a starting wage of \$24 - \$26/hr, with a similar benefit package paid for by the company in question. Ultimately, I accepted a position at \$25/hr that is a straight bookkeeping role with no CSR duties. I find it interesting that the inclusion of CSR in the bookkeeping title appears to have lowered the median wage for this position within Craftsman Collision; it is the main customer facing position, and with all of the bookkeeping responsibilities as well as these duties, I find it surprising that the compensation level is not higher rather than lower.

I found it extremely difficult to retain a high level of morale and pride in working for Craftsman Collision over the years as I noted the way that all of the employees, not just those in the bookkeeper roles, are being pushed to their limits. I'm sure that everyone is well aware that the labor laws in BC state that employees, both salaried and straight time, are entitled to compensation at 1.5 times their hourly rate when working more than 8 hours in a day. Rather than complying with the labor laws, there are employees working from 7am to 5:30pm on a daily basis with no additional compensation. These same employees are constantly being criticized for lack of attention to detail and motivation, which I think is understandable when consistently working 10.5 hour days.

I have overheard consistent discussion in several locations about leaving the company and filing an action with Employment Standards to receive this compensation retroactively. The fact that these employees do not feel able to approach the company and request this compensation without their job being at risk felt like a red flag to me and a true indicator of how much the company values their employees.

I truly think that Craftsman Collision is capable of being an amazing company and employer once the issues raised in the employee survey are addressed, and I wish I had felt able to stay to see the growth and changes that are yet to come.

Thank you,  
Tricia Elliott

# KYLA KLEANING & CONTRACTING

# INVOICE

Professional Maid Service & Landscaping For Your Home

DATE: 12/6/2012  
INVOICE # 990001

989 Wild Pond Lane  
Victoria, BC V9C 4M7  
Phone: 250-891-5952

ADDRESS:  
990 Ambassador

**BILL TO:**  
Tricia Elliot  
pixie2343@gmail.com

990 Ambassador  
Victoria BC

| DESCRIPTION                               | AMOUNT  |
|---|---------|
| Labour 2.5 hours @ \$26 plus hst per hour | \$65.00 |
| Nov 26th 2.5 hours                        |         |
| Materials                                 |         |

Subtotal \$65.00  
HST 12% \$7.80

HST # - 82097 1455 RT0001

**OTHER COMMENTS**  
1. Total payment due in 30 days  
2. 15% will be added each month bill is overdue

OTHER  
TOTAL \$72.80

Make all checks payable to  
Kyla Kleaning

If you have any questions about this invoice, please contact  
kylakleaning@gmail.com

*Thank You For Your Business!*

# KYLA KLEANING & CONTRACTING

Professional Maid Service & Landscaping For Your Home

989 Wild Pond Lane  
Victoria, BC V9C 4M7  
Phone: 250-891-5952

**BILL TO:**

Tricia Elliot  
pixie2343@gmail.com

990 Ambassador  
Victoria BC

## INVOICE

DATE: 1/5/2013  
INVOICE # 990002

ADDRESS: 990 Ambassador

| DESCRIPTION                             | AMOUNT   |
|---|----------|
| Labour 5 hours @ \$26 plus hst per hour | \$130.00 |
| Dec 12th - 3, 29th - 2                  |          |
| Materials                               |          |

HST # - 82097 1455 RT0001

Subtotal \$130.00  
HST 12% \$15.60

| OTHER COMMENTS   |
|--|
| 1. Total payment due in 30 days<br>2. 15% will be added each month bill is overdue |

OTHER  
TOTAL \$145.60

Make all checks payable to  
Kyla Kleaning

If you have any questions about this invoice, please contact  
kylakleaning@gmail.com

*Thank You For Your Business!*

# KYLA KLEANING & CONTRACTING

# INVOICE

Professional Maid Service & Landscaping For Your Home

DATE: 2/3/2013

INVOICE # 990003

989 Wild Pond Lane  
Victoria, BC V9C 4M7  
Phone: 250-891-5952

ADDRESS:  
1410 Lang

**BILL TO:**

Tricia Elliot  
pixie2343@gmail.com

990 Ambassador  
Victoria BC

| DESCRIPTION                               | AMOUNT   |
|---|----------|
| Labour 5.5 hours @ \$26 plus hst per hour | \$143.00 |
| Jan 23rd - 3 hours Sara                   |          |
| Jan 24th - 2.5 hours Jessica              |          |
| Materials                                 |          |

Subtotal \$143.00

HST # - 82097 1455 RT0001

HST 12% \$17.16

**OTHER COMMENTS**

- Total payment due in 30 days
- 15% will be added each month bill is overdue

**OTHER**

TOTAL \$160.16

Make all checks payable to  
Kyla Kleaning

If you have any questions about this invoice, please contact  
kylakleaning@gmail.com

*Thank You For Your Business!*

# KYLA KLEANING & CONTRACTING

Professional Maid Service & Landscaping For Your Home

989 Wild Pond Lane  
Victoria, BC V9C 4M7  
Phone: 250-891-5952

## INVOICE

DATE: 2/3/2013  
INVOICE # 990004

ADDRESS: 990 Ambassador

**BILL TO:**

Tricia Elliot  
pixie2343@gmail.com

990 Ambassador  
Victoria BC

| DESCRIPTION                             | AMOUNT  |
|---|---------|
| Labour 3 hours @ \$26 plus hst per hour | \$78.00 |
| Jan 13th - 3 hours,                     |         |
| Materials                               |         |

HST # - 82097 1455 RT0001

Subtotal \$78.00  
HST 12% \$9.36

| OTHER COMMENTS   |
|--|
| 1. Total payment due in 30 days<br>2. 15% will be added each month bill is overdue |

OTHER  
TOTAL \$87.36

Make all checks payable to  
Kyla Kleaning

If you have any questions about this invoice, please contact  
kylakleaning@gmail.com

*Thank You For Your Business!*



# KYLA KLEANING & CONTRACTING

## INVOICE

Professional Maid Service & Landscaping For Your Home

DATE: 3/3/2013

INVOICE # 990005

989 Wild Pond Lane  
Victoria, BC V9C 4M7  
Phone: 250-891-5952

ADDRESS:

990 Ambassador

**BILL TO:**

Tricia Elliot  
pixie2343@gmail.com

1410 Lang  
Victoria BC

| DESCRIPTION   | AMOUNT   |
|---|----------|
| Labour 10 hours @ \$26 plus hst per hour                          | \$260.00 |
| Feb 1st - 8 hours - 990 Ambassador, Feb 9th - 2 hours - 1410 Lang |          |
| Materials   |          |

HST # - 82097 1455 RT0001

Subtotal \$260.00  
HST 12% \$31.20

**OTHER COMMENTS**

- Total payment due in 30 days
- 15% will be added each month bill is overdue

OTHER  
TOTAL \$291.20

Make all checks payable to  
Kyla Kleaning

If you have any questions about this invoice, please contact  
kylakleaning@gmail.com

*Thank You For Your Business!*

# KYLA KLEANING & CONTRACTING

Professional Maid Service & Landscaping For Your Home

989 Wild Pond Lane  
Victoria, BC V9C 4M7  
Phone: 250-891-5952

**BILL TO:**

Tricia Elliot  
pixie2343@gmail.com

1410 Lang  
Victoria BC

## INVOICE

DATE: 4/4/2013

INVOICE # 990006

**ADDRESS:**

1410 Lang

| DESCRIPTION                             | AMOUNT   |
|---|----------|
| Labour 6 hours @ \$26 plus hst per hour | \$156.00 |
| March 3, 13, 27                         |          |
| Materials                               |          |

HST # - 82097 1455 RT0001

Subtotal \$156.00  
HST 12% \$18.72

**OTHER COMMENTS**

1. Total payment due in 30 days
2. 15% will be added each month bill is overdue

**OTHER**

TOTAL \$174.72

Make all checks payable to  
Kyla Kleaning

If you have any questions about this invoice, please contact  
kylakleaning@gmail.com

*Thank You For Your Business!*

# KYLA KLEANING & CONTRACTING

# INVOICE

Professional Maid Service & Landscaping For Your Home

DATE: 5/5/2013

INVOICE # 990007

989 Wild Pond Lane  
Victoria, BC V9C 4M7  
Phone: 250-891-5952

ADDRESS:  
1410 Lang

**BILL TO:**  
Tricia Elliot  
pixie2343@gmail.com

1410 Lang  
Victoria BC

| DESCRIPTION                             | AMOUNT   |
|---|----------|
| Labour 4 hours @ \$26 plus gst per hour | \$104.00 |
| April 9th, 24th                         |          |
| Materials                               |          |

GST # - 82097 1455 RT0001

Subtotal \$104.00  
GST 5% \$5.20

**OTHER COMMENTS**  
1. Total payment due in 30 days  
2. 15% will be added each month bill is overdue

OTHER  
**TOTAL \$109.20**

Make all checks payable to  
Kyla Kleaning

If you have any questions about this invoice, please contact  
kylakleaning@gmail.com

*Thank You For Your Business!*

MAY/12/2015/TUE 01:13 PM

Cook St Health Centr

FAX No. 2504775431

P. 003



**Cook Street Village Health Centre Ltd**

200-1075 Pendergast Street, Victoria, BC, V8V DA1

Tel.(250)477-5433 Fax(250)477-5431 www.csvhealth.com

info@csvhealth.com

To Elliott, Patricia ()  
1410 Lang Street  
Victoria, BC  
V8T 2S7  
(778)977-2343

**Statement**

2014/10/01 — 2014/11/30

1 / 1

| Service Date | Description                    | Sub Total | Taxes | Payment | Balance |
|--------------|--------------------------------|-----------|-------|---------|---------|
| 2014/10/16   | Physiotherapy MSP - Sean       | 47.00     |       | 47.00   | 0.00    |
| 2014/10/23   | Physiotherapy MSP - Sean       | 42.00     |       | 42.00   | 0.00    |
| 2014/10/30   | Physiotherapy MSP - Sean       | 42.00     |       |         | 42.00   |
| 2014/11/01   | Registered Massage Therapy MSP | 59.05     | 2.95  |         | 62.00   |
| 2014/11/06   | Physiotherapy MSP - Sean       | 42.00     |       |         | 42.00   |
| 2014/11/13   | Physiotherapy MSP - Sean       | 42.00     |       |         | 42.00   |
| 2014/11/15   | Massage MSP                    | 23.00     |       |         | 23.00   |
| 2014/11/15   | Registered Massage Therapy MSP | 48.67     | 2.33  |         | 49.00   |

| Unused Credits | Sub Total | GST  | Tax 2 | Payment | Balance |
|----------------|-----------|------|-------|---------|---------|
| 0.00           | 343.72    | 5.28 | 0.00  | 89.00   | 260.00  |


**CBI Health Centre**  
 605 Discovery Street,  
 Victoria, BC. V8T 5G4 250-383-3638  
**PATIENT LEDGER BY BILLING PARTY**  
 11/20/2012 - 10/20/2014

**Patient:** Elliott, Patricia #161479 [00033336]  
 990 Ambassador Ave  
 Victoria BC V8X 3N2

**Claim #:**  
**Policy #:**  
**GST#:** 80737 0275

| Service Date          | Entry Date | Trx #                 | Invoice #             | Item  | Units | GST & PST Rate | Charge | Total        |
|-----------------------|------------|-----------------------|-----------------------|---|-------|----------------|--------|--------------|
| <b>Billing Party:</b> |            |                       |                       | <b>Elliott, Patricia</b>                        |       |                |        |              |
| 11/20/2012            | 11/20/2012 | 2945139<br>[00556326] | 1074215<br>[00100125] | User Fee  | 1.00  | 25.00          | 25.00  | 25.00        |
|                       |            |                       |                       | <i>Charges: 1074215 [00100125] - 11/20/2012</i> |       |                |        | <b>25.00</b> |
| 11/20/2012            | 11/20/2012 | 2945175<br>[00556362] | 1074380<br>[00100210] | Initial Visit                                   | 1.00  | 25.20          | 25.20  | 25.20        |
| 11/20/2012            | 11/20/2012 | 2945176<br>[00556363] | 1074380<br>[00100210] | First Additional Area                           | 1.00  | 6.75           | 6.75   | 6.75         |
| 11/20/2012            | 11/20/2012 | 2945177<br>[00556364] | 1074380<br>[00100210] | Second Additional Area                          | 1.00  | 6.75           | 6.75   | 6.75         |
| 11/23/2012            | 11/23/2012 | 2945527<br>[00556714] | 1074380<br>[00100210] | User Fee  | 1.00  | 25.00          | 25.00  | 25.00        |
|                       |            |                       |                       | <i>Charges: 1074380 [00100210] - 11/23/2012</i> |       |                |        | <b>63.70</b> |
| 11/26/2012            | 11/26/2012 | 2945621<br>[00556808] | 1074421<br>[00100225] | User Fee  | 1.00  | 25.00          | 25.00  | 25.00        |
|                       |            |                       |                       | <i>Charges: 1074421 [00100225] - 11/26/2012</i> |       |                |        | <b>25.00</b> |
| 11/28/2012            | 11/28/2012 | 2946383<br>[00557570] | 1074775<br>[00100468] | User Fee  | 1.00  | 25.00          | 25.00  | 25.00        |
|                       |            |                       |                       | <i>Charges: 1074775 [00100468] - 11/30/2012</i> |       |                |        | <b>25.00</b> |
| 12/05/2012            | 12/05/2012 | 2947170<br>[00558357] | 1074887<br>[00100529] | User Fee  | 1.00  | 25.00          | 25.00  | 25.00        |
|                       |            |                       |                       | <i>Charges: 1074887 [00100529] - 12/05/2012</i> |       |                |        | <b>25.00</b> |
| 12/07/2012            | 12/07/2012 | 2947461<br>[00558648] | 1075000<br>[00100578] | User Fee  | 1.00  | 25.00          | 25.00  | 25.00        |
|                       |            |                       |                       | <i>Charges: 1075000 [00100578] - 12/07/2012</i> |       |                |        | <b>25.00</b> |
| 12/12/2012            | 12/12/2012 | 2947913<br>[00559100] | 1075282<br>[00100710] | User Fee  | 1.00  | 25.00          | 25.00  | 25.00        |
| 12/14/2012            | 12/14/2012 | 2948327<br>[00559514] | 1075282<br>[00100710] | User Fee  | 1.00  | 25.00          | 25.00  | 25.00        |
|                       |            |                       |                       | <i>Charges: 1075282 [00100710] - 12/14/2012</i> |       |                |        | <b>50.00</b> |
| 12/19/2012            | 12/19/2012 | 2948759<br>[00559946] | 1075473<br>[00100809] | User Fee  | 1.00  | 25.00          | 25.00  | 25.00        |
|                       |            |                       |                       | <i>Charges: 1075473 [00100809] - 12/19/2012</i> |       |                |        | <b>25.00</b> |
| 12/26/2012            | 12/26/2012 | 2949236<br>[00560423] | 1075743<br>[00100959] | User Fee  | 1.00  | 25.00          | 25.00  | 25.00        |
| 12/28/2012            | 12/28/2012 | 2949763<br>[00560950] | 1075743<br>[00100959] | User Fee  | 1.00  | 25.00          | 25.00  | 25.00        |
|                       |            |                       |                       | <i>Charges: 1075743 [00100959] - 12/28/2012</i> |       |                |        | <b>50.00</b> |
| 01/02/2013            | 01/02/2013 | 2950131<br>[00561318] | 1076037<br>[00101185] | User Fee  | 1.00  | 25.00          | 25.00  | 25.00        |
| 01/04/2013            | 01/04/2013 | 2950408<br>[00561595] | 1076037<br>[00101185] | User Fee  | 1.00  | 25.00          | 25.00  | 25.00        |
|                       |            |                       |                       | <i>Charges: 1076037 [00101185] - 01/04/2013</i> |       |                |        | <b>50.00</b> |
| 01/07/2013            | 01/07/2013 | 2950438<br>[00561625] | 1076090<br>[00101188] | User Fee  | 1.00  | 25.00          | 25.00  | 25.00        |
|                       |            |                       |                       | <i>Charges: 1076090 [00101188] - 01/07/2013</i> |       |                |        | <b>25.00</b> |
| 01/17/2013            | 02/08/2013 | 2954331<br>[00565518] | 1077370<br>[00101951] | User Fee  | 1.00  | 20.00          | 20.00  | 20.00        |
| 01/22/2013            | 02/08/2013 | 2954332<br>[00565519] | 1077370<br>[00101951] | User Fee  | 1.00  | 20.00          | 20.00  | 20.00        |

Authorized Signature

  
 Sean Douglas Physiotherapist Reg #: 46787

**CBI Health Centre**  
 605 Discovery Street,  
 Victoria, BC. V8T 5G4 250-383-3638  
**PATIENT LEDGER BY BILLING PARTY**  
 11/20/2012 - 10/20/2014

**Patient:** Elliott, Patricia #161479 [00033336]  
 990 Ambassador Ave  
 Victoria BC V8X 3N2


**Claim #:**  
**Policy #:**  
**GST#:** 80737 0275

| Service Date                                    | Entry Date | Trx #                 | Invoice #             | Item                    | Units | Rate  | GST & PST | Charge | Total        |
|---|------------|-----------------------|-----------------------|-------------------------|-------|-------|-----------|--------|--------------|
| 01/31/2013                                      | 02/08/2013 | 2954333<br>[00565520] | 1077370<br>[00101951] | User Fee                | 1.00  | 20.00 |           | 20.00  | 20.00        |
| 02/08/2013                                      | 02/08/2013 | 2954337<br>[00565524] | 1077370<br>[00101951] | User Fee                | 1.00  | 20.00 |           | 20.00  | 20.00        |
| <b>Charges: 1077370 [00101951] - 02/08/2013</b> |            |                       |                       |                         |       |       |           |        | <b>80.00</b> |
| 02/21/2013                                      | 02/21/2013 | 2955716<br>[00566903] | 1077746<br>[00102183] | User Fee                | 1.00  | 20.00 |           | 20.00  | 20.00        |
| <b>Charges: 1077746 [00102183] - 02/21/2013</b> |            |                       |                       |                         |       |       |           |        | <b>20.00</b> |
| 12/05/2013                                      | 12/05/2013 | 2985494<br>[00596681] | 1087777<br>[00108826] | Physiotherapy Treatment | 1.00  | 20.00 |           | 20.00  | 20.00        |
| <b>Charges: 1087777 [00108826] - 12/05/2013</b> |            |                       |                       |                         |       |       |           |        | <b>20.00</b> |
| 12/13/2013                                      | 12/13/2013 | 2986523<br>[00597710] | 1088013<br>[00108964] | Physiotherapy Treatment | 1.00  | 20.00 |           | 20.00  | 20.00        |
| <b>Charges: 1088013 [00108964] - 12/13/2013</b> |            |                       |                       |                         |       |       |           |        | <b>20.00</b> |
| 12/20/2013                                      | 12/20/2013 | 2987182<br>[00598369] | 1088393<br>[00109199] | Physiotherapy Treatment | 1.00  | 20.00 |           | 20.00  | 20.00        |
| 12/30/2013                                      | 12/30/2013 | 2987886<br>[00599073] | 1088393<br>[00109199] | Physiotherapy Treatment | 1.00  | 20.00 |           | 20.00  | 20.00        |
| <b>Charges: 1088393 [00109199] - 12/30/2013</b> |            |                       |                       |                         |       |       |           |        | <b>40.00</b> |
| 10/20/2014                                      | 10/20/2014 | 3015042<br>[00626229] | 1096839<br>[00115026] | Review of Records       | 1.00  | 5.95  | 0.30      | 5.95   | 6.25         |
| <b>Charges: 1096839 [00115026] - 10/20/2014</b> |            |                       |                       |                         |       |       |           |        | <b>6.25</b>  |

**Payments and Adjustments:**

|            |                       |                   |         |         |
|------------|-----------------------|-------------------|---------|---------|
| 11/20/2012 | 2945140<br>[00556327] | Debit Card (ATM): | (25.00) | (25.00) |
| 11/23/2012 | 2945528<br>[00556715] | Debit Card (ATM): | (25.00) | (25.00) |
| 11/26/2012 | 2945622<br>[00555809] | Debit Card (ATM): | (25.00) | (25.00) |
| 12/05/2012 | 2947171<br>[00556358] | Visa:             | (25.00) | (25.00) |
| 12/05/2012 | 2947172<br>[00558359] | Debit Card (ATM): | (25.00) | (25.00) |
| 12/07/2012 | 2947462<br>[00558649] | Visa:             | (25.00) | (25.00) |
| 12/14/2012 | 2948328<br>[00559515] | Debit Card (ATM): | (50.00) | (50.00) |
| 12/19/2012 | 2948760<br>[00559947] | Debit Card (ATM): | (25.00) | (25.00) |
| 12/28/2012 | 2949764<br>[00560951] | Debit Card (ATM): | (50.00) | (50.00) |
| 01/04/2013 | 2950409<br>[00561596] | Debit Card (ATM): | (50.00) | (50.00) |
| 01/07/2013 | 2950439<br>[00561626] | Debit Card (ATM): | (25.00) | (25.00) |
| 01/22/2013 | 2952088<br>[00563275] | Debit Card (ATM): | (50.00) | (50.00) |
| 01/31/2013 | 2953397<br>[00564584] | Debit Card (ATM): | (25.00) | (25.00) |
| 02/08/2013 | 2954362<br>[00565549] | Cash:             | (5.00)  | (5.00)  |
| 02/21/2013 | 2955717<br>[00566904] | Debit Card (ATM): | (20.00) | (20.00) |
| 12/05/2013 | 2985495<br>[00596682] | Debit Card (ATM): | (20.00) | (20.00) |

Authorized Signature

  
 Sean Douglas Physiotherapist Reg #: 46787

Feb 07, 2018 11:26 AM To: 12509000368 Page 7/7 From: CBI Health Group

**CBI Health Centre**  
 605 Discovery Street,  
 Victoria, BC. V8T 5G4 250-383-3638  
**PATIENT LEDGER BY BILLING PARTY**  
 11/20/2012 - 10/20/2014

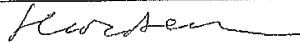
**Patient:** Elliott, Patricia #161479 [00033336]  
 990 Ambassador Ave  
 Victoria BC V8X 3N2

**Claim #:**  
**Policy #:**  
**GST#:** 80737 0275

| Service Date                     | Entry Date | Trx #      | Invoice #  | Item                       | Units | GST & PST Rate | Charge  | Total   |
|----------------------------------|------------|------------|------------|----------------------------|-------|----------------|---------|---------|
|                                  | 12/13/2013 | 2986524    |            | Debit Card (ATM):          |       |                | (40.00) | (40.00) |
|                                  |            | [00597711] |            |                            |       |                |         |         |
|                                  | 12/30/2013 | 2987887    |            | Debit Card (ATM):          |       |                | (20.00) | (20.00) |
|                                  |            | [00599074] |            |                            |       |                |         |         |
|                                  | 10/20/2014 | 3015068    |            | Visa:                      |       |                | (6.25)  | (6.25)  |
|                                  |            | [00626255] |            |                            |       |                |         |         |
| <b>Payments and Adjustments:</b> |            |            |            |                            |       |                |         |         |
|                                  | 11/26/2012 | 2945623    | 1074775    | Balance Transfer: 00556362 |       |                | (25.20) | (25.20) |
|                                  |            | [00556810] | [00100468] |                            |       |                |         |         |
|                                  | 11/26/2012 | 2945625    | 1074775    | Balance Transfer: 00556363 |       |                | (6.75)  | (6.75)  |
|                                  |            | [00556812] | [00100468] |                            |       |                |         |         |
|                                  | 11/26/2012 | 2945627    | 1074775    | Balance Transfer: 00556364 |       |                | (6.75)  | (6.75)  |
|                                  |            | [00556814] | [00100468] |                            |       |                |         |         |

| <b>Ledger Summary: Elliott, Patricia</b> |               |  | <b>Charges:</b> | <b>574.95</b> |
|--|---------------|--|-----------------|---------------|
| Gross Charges:                           | 574.65        |  | Payments:       | (536.25)      |
| Taxes                                    | 0.30          |  | Adjustments:    | (38.70)       |
|  | <u>574.95</u> |  | <b>Balance</b>  | <b>0.00</b>   |

Authorized Signature



Sean Douglas Physiotherapist Reg #: 46787

v20140501  
 Page 3 of 8

Printed: February 05, 2018 05:58 PM

**Physiotherapy @ RebalanceMD**

104-3551 Blanshard St, Victoria, BC, V8Z 0B9  
 Tel.(250)598-7410 Fax(250)385-9600 www.rebalancemd.com info@rebalancemd.com

To ELLIOTT, Patricia ()  
 3291 Megaw Pl  
 Victoria, BC  
 V8P 3J1  
 (778)977-2343

**Statement**

2016/07/01 -- 2016/07/31

1 / 1

| Trans. No | Service Date | Prof.    | Description       | Sub Total | Taxes | Payment | Balance | License # |
|-----------|--------------|----------|-------------------|-----------|-------|---------|---------|-----------|
| 68195     | 2016/07/06   | Agha, Ty | MSP Physiotherapy | 25.00     |       | 25.00   | 0.00    | 50627     |



## Rebalance

Physiotherapy @ RebalanceMD  
 Unit 104 - 3551 Blanshard, Victoria, BC, V8Z 0B9  
 Tel: 250-598-7410 Fax: 250-385-9600 Email: physio2@rebalancemd.com

## Statement

## Account:

**Patricia Elliott**  
 3911 Stockton Crescent, Victoria, BC, V8P 5G4  
 Tel: (779)977-2343  
 Email: pixie2343@gmail.com

| Date            | #                  | Payer            | Item  | Credit  | Debit   |
|-----------------|--------------------|------------------|---|---------|---------|
| July 23, 2018   | Invoice #18312-P01 | Patricia Elliott | July 23, 2018 - 5:00pm, 40mins: Initial Physiotherapy Assessment/Re-assessment<br>Petrus Jansen van Rensburg, License #42780<br>MSP<br>1x 09938 - PHYSIOTHERAPY SERVICE (\$23.00)<br>7392 - THORACIC REGION<br>Coverage adjustment<br>Ineligible amount: \$57.00<br>User Fee: \$25.00 |         | \$25.00 |
| July 23, 2018   | Invoice #18312-C01 | MSP              | July 23, 2018 - 5:00pm, 40mins: Initial Physiotherapy Assessment/Re-assessment<br>Petrus Jansen van Rensburg, License #42780<br>MSP # [REDACTED]<br>1x 09938 - PHYSIOTHERAPY SERVICE (\$23.00)<br>7392 - THORACIC REGION  |         | \$23.00 |
| July 23, 2018   | Payment #13335     | Patricia Elliott | Debit   | \$25.00 |         |
| July 30, 2018   | Invoice #18949-P01 | Patricia Elliott | July 30, 2018 - 7:20pm, 30mins: Standard Follow-up Physiotherapy Treatment<br>Petrus Jansen van Rensburg, License #42780<br>MSP<br>1x 09938 - PHYSIOTHERAPY SERVICE (\$23.00)<br>7392 - THORACIC REGION<br>Coverage adjustment<br>Ineligible amount: \$47.00<br>User Fee: \$25.00     |         | \$25.00 |
| July 30, 2018   | Invoice #18949-C01 | MSP              | July 30, 2018 - 7:20pm, 30mins: Standard Follow-up Physiotherapy Treatment<br>Petrus Jansen van Rensburg, License #42780<br>MSP [REDACTED]<br>1x 09938 - PHYSIOTHERAPY SERVICE (\$23.00)<br>7392 - THORACIC REGION  |         | \$23.00 |
| July 30, 2018   | Payment #13864     | Patricia Elliott | Cash  | \$25.00 |         |
| August 15, 2018 | Payment #14610     | MSP              | Teleplan  | \$23.00 |         |

| Date               | #                  | Payer            | Item   | Credit  | Debit   |
|--------------------|--------------------|------------------|--|---------|---------|
| August 15, 2018    | Payment #14609     | MSP              | Teleplan   | \$23.00 |         |
| August 29, 2018    | Invoice #21579-P01 | Patricia Elliott | August 29, 2018 - 1:00pm, 30mins: Standard Follow-up Physiotherapy Treatment<br>Petrus Jansen van Rensburg, License #42780<br>MSP<br>1x 09938 - PHYSIOTHERAPY SERVICE (\$23.00)<br>7392 - THORACIC REGION<br>Coverage adjustment<br>Ineligible amount: \$47.00<br>User Fee: \$25.00    |         | \$25.00 |
| August 29, 2018    | Invoice #21579-C01 | MSP              | August 29, 2018 - 1:00pm, 30mins: Standard Follow-up Physiotherapy Treatment<br>Petrus Jansen van Rensburg, License #42780<br>MSP [REDACTED]<br>1x 09938 - PHYSIOTHERAPY SERVICE (\$23.00)<br>7392 - THORACIC REGION   |         | \$23.00 |
| August 29, 2018    | Payment #15991     | Patricia Elliott | Debit  | \$25.00 |         |
| September 10, 2018 | Invoice #22580-P01 | Patricia Elliott | September 10, 2018 - 6:20pm, 30mins: Standard Follow-up Physiotherapy Treatment<br>Petrus Jansen van Rensburg, License #42780<br>No Show - \$0.00  |         | \$0.00  |
| September 14, 2018 | Payment #16793     | MSP              | Teleplan   | \$23.00 |         |
| September 18, 2018 | Invoice #23392-C01 | MSP              | September 18, 2018 - 6:40pm, 30mins: Standard Follow-up Physiotherapy Treatment<br>Petrus Jansen van Rensburg, License #42780<br>MSP # [REDACTED]<br>1x 09938 - PHYSIOTHERAPY SERVICE (\$23.00)<br>7392 - THORACIC REGION  |         | \$23.00 |
| September 18, 2018 | Invoice #23392-P01 | Patricia Elliott | September 18, 2018 - 6:40pm, 30mins: Standard Follow-up Physiotherapy Treatment<br>Petrus Jansen van Rensburg, License #42780<br>MSP<br>1x 09938 - PHYSIOTHERAPY SERVICE (\$23.00)<br>7392 - THORACIC REGION<br>Coverage adjustment<br>Ineligible amount: \$47.00<br>User Fee: \$25.00 |         | \$25.00 |
| September 18, 2018 | Payment #17321     | Patricia Elliott | MasterCard   | \$25.00 |         |
| October 2, 2018    | Invoice #24562-P01 | Patricia Elliott | October 2, 2018 - 6:40pm, 30mins: Standard Follow-up Physiotherapy Treatment<br>Petrus Jansen van Rensburg, License #42780<br>No Show - \$0.00   |         | \$0.00  |

| Date             | #                  | Payer            | Item   | Credit  | Debit    |
|------------------|--------------------|------------------|--|---------|----------|
| October 15, 2018 | Payment #18754     | MSP              | Teleplan   | \$23.00 |          |
| June 10, 2019    | Invoice #47466-P01 | Patricia Elliott | June 10, 2019 - 5:20pm, 40mins: Initial Physiotherapy Assessment/Re-assessment<br>Petrus Jansen van Rensburg, License #42780<br>ICBC HCPIR #BH23071-6  |         | \$0.00   |
| June 10, 2019    | Invoice #47466-C01 | ICBC HCPIR       | June 10, 2019 - 5:20pm, 40mins: Initial Physiotherapy Assessment/Re-assessment<br>Petrus Jansen van Rensburg, License #42780<br>ICBC HCPIR #BH23071-6<br><br>19-00255780<br>Additional allowed amount<br>Eligible amount: \$250.00       |         | \$250.00 |
| June 18, 2019    | Invoice #48274-C01 | ICBC HCPIR       | June 18, 2019 - 4:30pm, 30mins: Standard Follow-up Physiotherapy Treatment<br>Petrus Jansen van Rensburg, License #42780<br>ICBC HCPIR #BH23071-6<br><br>Reference #19-00287782<br>Additional allowed amount<br>Eligible amount: \$79.00 |         | \$79.00  |
| June 18, 2019    | Invoice #48274-P01 | Patricia Elliott | June 18, 2019 - 4:30pm, 30mins: Standard Follow-up Physiotherapy Treatment<br>Petrus Jansen van Rensburg, License #42780<br>ICBC HCPIR #BH23071-6  |         | \$0.00   |
| June 21, 2019    | Invoice #48655-P01 | Patricia Elliott | June 21, 2019 - 12:40pm, 30mins: Standard Follow-up Physiotherapy Treatment<br>Petrus Jansen van Rensburg, License #42780<br>ICBC HCPIR #BH23071-6   |         | \$0.00   |
| June 21, 2019    | Invoice #48655-C01 | ICBC HCPIR       | June 21, 2019 - 12:40pm, 30mins: Standard Follow-up Physiotherapy Treatment<br>Petrus Jansen van Rensburg, License #42780<br>ICBC HCPIR #BH23071-6<br><br>19-00289338<br>Additional allowed amount<br>Eligible amount: \$79.00           |         | \$79.00  |
| June 25, 2019    | Invoice #48953-P01 | Patricia Elliott | June 25, 2019 - 1:50pm, 30mins: Standard Follow-up Physiotherapy Treatment<br>Petrus Jansen van Rensburg, License #42780<br>ICBC HCPIR #BH23071-6  |         | \$0.00   |

| Date          | #                         | Payer               | Item  | Credit   | Debit   |
|---------------|---------------------------|---------------------|---|----------|---------|
| June 25, 2019 | Invoice<br>#48953-<br>C01 | ICBC HCPIR          | June 25, 2019 - 1:50pm, 30mins: Standard Follow-up<br>Physiotherapy Treatment<br>Petrus Jansen van Rensburg, License #42780<br>ICBC HCPIR #BH23071-6<br><br>Reference #19-00399829<br>Additional allowed amount<br>Eligible amount: \$79.00 |          | \$79.00 |
| June 28, 2019 | Invoice<br>#49355-<br>P01 | Patricia<br>Elliott | June 28, 2019 - 12:50pm, 30mins: Standard Follow-up<br>Physiotherapy Treatment<br>Petrus Jansen van Rensburg, License #42780<br>ICBC HCPIR #BH23071-6   |          | \$0.00  |
| June 28, 2019 | Invoice<br>#49355-<br>C01 | ICBC HCPIR          | June 28, 2019 - 12:50pm, 30mins: Standard Follow-up<br>Physiotherapy Treatment<br>Petrus Jansen van Rensburg, License #42780<br>ICBC HCPIR #BH23071-6<br>Additional allowed amount<br>Eligible amount: \$79.00                              |          | \$79.00 |
| July 3, 2019  | Invoice<br>#49668-<br>C01 | ICBC HCPIR          | July 3, 2019 - 2:00pm, 30mins: Standard Follow-up<br>Physiotherapy Treatment<br>Petrus Jansen van Rensburg, License #42780<br>ICBC HCPIR #BH23071-6<br><br>Ref #: 19-00336948<br>Additional allowed amount<br>Eligible amount: \$79.00      |          | \$79.00 |
| July 3, 2019  | Invoice<br>#49668-<br>P01 | Patricia<br>Elliott | July 3, 2019 - 2:00pm, 30mins: Standard Follow-up<br>Physiotherapy Treatment<br>Petrus Jansen van Rensburg, License #42780<br>ICBC HCPIR #BH23071-6   |          | \$0.00  |
| July 5, 2019  | Invoice<br>#49937-<br>P01 | Patricia<br>Elliott | July 5, 2019 - 1:50pm, ICBC HCPIR Follow-up<br>Physiotherapy Treatment<br>Petrus Jansen van Rensburg, License #42780<br>ICBC HCPIR #BH23071-6   |          | \$0.00  |
| July 5, 2019  | Invoice<br>#49937-<br>C01 | ICBC HCPIR          | July 5, 2019 - 1:50pm, ICBC HCPIR Follow-up<br>Physiotherapy Treatment<br>Petrus Jansen van Rensburg, License #42780<br>ICBC HCPIR #BH23071-6<br><br>19-00360961  |          | \$79.00 |
| July 5, 2019  | Payment<br>#39127         | ICBC HCPIR          | Cheque  | \$250.00 |         |
| July 9, 2019  | Invoice<br>#50229-<br>P01 | Patricia<br>Elliott | July 9, 2019 - 2:30pm, ICBC HCPIR Follow-up<br>Physiotherapy Treatment<br>Petrus Jansen van Rensburg, License #42780<br>ICBC HCPIR #BH23071-6   |          | \$0.00  |

| Date          | #                         | Payer               | Item   | Credit  | Debit   |
|---------------|---------------------------|---------------------|--|---------|---------|
| July 9, 2019  | Invoice<br>#50229-<br>C01 | ICBC HCPIR          | July 9, 2019 - 2:30pm, ICBC HCPIR Follow-up<br>Physiotherapy Treatment<br>Petrus Jansen van Rensburg, License #42780<br>ICBC HCPIR #BH23071-6                      |         | \$79.00 |
| July 12, 2019 | Invoice<br>#50520-<br>P01 | Patricia<br>Elliott | July 12, 2019 - 9:40am, ICBC HCPIR Follow-up<br>Physiotherapy Treatment<br>Petrus Jansen van Rensburg, License #42780<br>ICBC HCPIR #BH23071-6                     |         | \$0.00  |
| July 12, 2019 | Invoice<br>#50520-<br>C01 | ICBC HCPIR          | July 12, 2019 - 9:40am, ICBC HCPIR Follow-up<br>Physiotherapy Treatment<br>Petrus Jansen van Rensburg, License #42780<br>ICBC HCPIR #BH23071-6                     |         | \$79.00 |
| July 12, 2019 | Payment<br>#39726         | ICBC HCPIR          | Cheque   | \$79.00 |         |
| July 12, 2019 | Payment<br>#39715         | ICBC HCPIR          | Cheque   | \$79.00 |         |
| July 18, 2019 | Payment<br>#40152         | ICBC HCPIR          | Cheque   | \$79.00 |         |
| July 23, 2019 | Invoice<br>#51326-<br>C01 | ICBC HCPIR          | July 23, 2019 - 4:00pm, ICBC HCPIR Follow-up<br>Physiotherapy Treatment<br>Petrus Jansen van Rensburg, License #42780<br>ICBC HCPIR #BH23071-6<br><br>19-00432157. |         | \$79.00 |
| July 23, 2019 | Invoice<br>#51326-<br>P01 | Patricia<br>Elliott | July 23, 2019 - 4:00pm, ICBC HCPIR Follow-up<br>Physiotherapy Treatment<br>Petrus Jansen van Rensburg, License #42780<br>ICBC HCPIR #BH23071-6                     |         | \$0.00  |
| July 26, 2019 | Invoice<br>#51688-<br>P01 | Patricia<br>Elliott | July 26, 2019 - 4:00pm, ICBC HCPIR Follow-up<br>Physiotherapy Treatment<br>Petrus Jansen van Rensburg, License #42780<br>ICBC HCPIR #BH23071-6                     |         | \$0.00  |
| July 26, 2019 | Invoice<br>#51688-<br>C01 | ICBC HCPIR          | July 26, 2019 - 4:00pm, ICBC HCPIR Follow-up<br>Physiotherapy Treatment<br>Petrus Jansen van Rensburg, License #42780<br>ICBC HCPIR #BH23071-6<br><br>19-00646515. |         | \$79.00 |
| July 30, 2019 | Invoice<br>#51872-<br>P01 | Patricia<br>Elliott | July 30, 2019 - 1:20pm, ICBC HCPIR Follow-up<br>Physiotherapy Treatment<br>Petrus Jansen van Rensburg, License #42780<br>No Show No Charge                         |         | \$0.00  |

| Date                  | #                         | Payer               | Item  | Credit  | Debit   |
|-----------------------|---------------------------|---------------------|---|---------|---------|
| July 30, 2019         | Invoice<br>#51891-<br>P01 | Patricia<br>Elliott | July 30, 2019 - 2:20pm, ICBC HCPIR Follow-up<br>Physiotherapy Treatment<br>Petrus Jansen van Rensburg, License #42780<br>ICBC HCPIR #BH23071-6  |         | \$0.00  |
| July 30, 2019         | Invoice<br>#51891-<br>C01 | ICBC HCPIR          | July 30, 2019 - 2:20pm, ICBC HCPIR Follow-up<br>Physiotherapy Treatment<br>Petrus Jansen van Rensburg, License #42780<br>ICBC HCPIR #BH23071-6<br><br>19-00646515.  |         | \$79.00 |
| July 30, 2019         | Payment<br>#40858         | ICBC HCPIR          | Insurer Cheque  | \$79.00 |         |
| July 30, 2019         | Payment<br>#40858         | ICBC HCPIR          | Insurer Cheque  | \$79.00 |         |
| July 30, 2019         | Payment<br>#40858         | ICBC HCPIR          | Insurer Cheque  | \$79.00 |         |
| July 30, 2019         | Payment<br>#40858         | ICBC HCPIR          | Insurer Cheque  | \$79.00 |         |
| August 1, 2019        | Invoice<br>#52128-<br>P01 | Patricia<br>Elliott | August 1, 2019 - 3:40pm, 30mins: Standard Follow-up<br>Physiotherapy Treatment<br>Petrus Jansen van Rensburg, License #42780<br>No Show No Charge   |         | \$0.00  |
| August 8, 2019        | Payment<br>#41466         | ICBC HCPIR          | Insurer Cheque  | \$79.00 |         |
| August 28,<br>2019    | Payment<br>#42956         | ICBC HCPIR          | Insurer Cheque  | \$79.00 |         |
| September 20,<br>2019 | Payment<br>#44649         | ICBC HCPIR          | Insurer Cheque  | \$79.00 |         |
| September 20,<br>2019 | Payment<br>#44649         | ICBC HCPIR          | Insurer Cheque  | \$79.00 |         |
| November 22,<br>2019  | Invoice<br>#62272-<br>C01 | ICBC HCPIR          | November 22, 2019 - 1:20pm, 30mins: Standard<br>Follow-up Physiotherapy Treatment<br>Petrus Jansen van Rensburg, License #42780<br>ICBC HCPIR #BH23071-6<br><br>Ref #: 19-01123970<br>Additional allowed amount<br>Eligible amount: \$79.00 |         | \$79.00 |

| Date              | #                  | Payer            | Item   | Credit | Debit   |
|-------------------|--------------------|------------------|--|--------|---------|
| November 22, 2019 | Invoice #62272-P01 | Patricia Elliott | November 22, 2019 - 1:20pm, 30mins: Standard Follow-up Physiotherapy Treatment Petrus Jansen van Rensburg, License #42780 Coverage adjustment Additional coverage amount: \$9.00 ICBC HCPIR #BH23071-6 Eligible amount: \$79.00    |        | \$0.00  |
| November 25, 2019 | Invoice #62434-C01 | ICBC HCPIR       | November 25, 2019 - 5:40pm, 30mins: Standard Follow-up Physiotherapy Treatment Petrus Jansen van Rensburg, License #42780 ICBC HCPIR #BH23071-6<br><br>Ref #: 19-01123970<br>Additional allowed amount<br>Eligible amount: \$79.00 |        | \$79.00 |
| November 25, 2019 | Invoice #62434-P01 | Patricia Elliott | November 25, 2019 - 5:40pm, 30mins: Standard Follow-up Physiotherapy Treatment Petrus Jansen van Rensburg, License #42780 Coverage adjustment Additional coverage amount: \$9.00 ICBC HCPIR #BH23071-6 Eligible amount: \$79.00    |        | \$0.00  |
| December 4, 2019  | Invoice #63334-P01 | Patricia Elliott | December 4, 2019 - 9:30am, 30mins: Standard Follow-up Physiotherapy Treatment Petrus Jansen van Rensburg, License #42780 Coverage adjustment Additional coverage amount: \$9.00 ICBC HCPIR #BH23071-6 Eligible amount: \$79.00     |        | \$0.00  |
| December 4, 2019  | Invoice #63334-C01 | ICBC HCPIR       | December 4, 2019 - 9:30am, 30mins: Standard Follow-up Physiotherapy Treatment Petrus Jansen van Rensburg, License #42780 ICBC HCPIR #BH23071-6<br><br>19-01174573.<br>Additional allowed amount<br>Eligible amount: \$79.00        |        | \$79.00 |
| December 9, 2019  | Invoice #63820-C01 | ICBC HCPIR       | December 9, 2019 - 5:40pm, 30mins: Standard Follow-up Physiotherapy Treatment Petrus Jansen van Rensburg, License #42780 ICBC HCPIR #BH23071-6<br><br>20-01320034.<br>Additional allowed amount<br>Eligible amount: \$79.00        |        | \$79.00 |

| Date              | #                  | Payer            | Item   | Credit  | Debit   |
|-------------------|--------------------|------------------|--|---------|---------|
| December 9, 2019  | Invoice #63820-P01 | Patricia Elliott | December 9, 2019 - 5:40pm, 30mins: Standard Follow-up Physiotherapy Treatment<br>Petrus Jansen van Rensburg, License #42780<br>Coverage adjustment<br>Additional coverage amount: \$9.00<br>ICBC HCPIR #BH23071-6<br>Eligible amount: \$79.00  |         | \$0.00  |
| December 16, 2019 | Invoice #64496-C01 | ICBC HCPIR       | December 16, 2019 - 5:40pm, 30mins: Standard Follow-up Physiotherapy Treatment<br>Petrus Jansen van Rensburg, License #42780<br>ICBC HCPIR #BH23071-6<br><br>20-01320034.<br>Additional allowed amount<br>Eligible amount: \$79.00             |         | \$79.00 |
| December 16, 2019 | Invoice #64496-P01 | Patricia Elliott | December 16, 2019 - 5:40pm, 30mins: Standard Follow-up Physiotherapy Treatment<br>Petrus Jansen van Rensburg, License #42780<br>Coverage adjustment<br>Additional coverage amount: \$9.00<br>ICBC HCPIR #BH23071-6<br>Eligible amount: \$79.00 |         | \$0.00  |
| December 17, 2019 | Payment #51457     | ICBC HCPIR       | Insurer Cheque   | \$79.00 |         |
| December 17, 2019 | Payment #51457     | ICBC HCPIR       | Insurer Cheque   | \$79.00 |         |
| December 23, 2019 | Invoice #65241-C01 | ICBC HCPIR       | December 23, 2019 - 5:20pm, 30mins: Standard Follow-up Physiotherapy Treatment<br>Petrus Jansen van Rensburg, License #42780<br>ICBC HCPIR #BH23071-6<br><br>20-01320034.<br>Additional allowed amount<br>Eligible amount: \$79.00             |         | \$79.00 |
| December 23, 2019 | Invoice #65241-P01 | Patricia Elliott | December 23, 2019 - 5:20pm, 30mins: Standard Follow-up Physiotherapy Treatment<br>Petrus Jansen van Rensburg, License #42780<br>Coverage adjustment<br>Additional coverage amount: \$9.00<br>ICBC HCPIR #BH23071-6<br>Eligible amount: \$79.00 |         | \$0.00  |
| December 30, 2019 | Invoice #65458-C01 | ICBC HCPIR       | December 30, 2019 - 12:50pm, 30mins: Standard Follow-up Physiotherapy Treatment<br>Petrus Jansen van Rensburg, License #42780<br>ICBC HCPIR #BH23071-6<br><br>20-01320034.<br>Additional allowed amount<br>Eligible amount: \$79.00            |         | \$79.00 |



| Statement         |                    |                  |  |        |        |
|-------------------|--------------------|------------------|--|--------|--------|
| Date              | #                  | Payer            | Item   | Credit | Debit  |
| December 30, 2019 | Invoice #65458-P01 | Patricia Elliott | December 30, 2019 - 12:50pm, 30mins: Standard Follow-up Physiotherapy Treatment Petrus Jansen van Rensburg, License #42780 ICBC HCPIR #BH23071-6 |        | \$0.00 |

| Summary               |                   |                |                             |                         |                      |                |            |          |
|-----------------------|-------------------|----------------|-----------------------------|-------------------------|----------------------|----------------|------------|----------|
| Client Total Invoiced | Client Total Paid | Client Balance | Other Payers Total Invoiced | Other Payers Total Paid | Other Payers Balance | Total Invoiced | Total Paid | Balance  |
| \$100.00              | \$100.00          | \$0.00         | \$1,764.00                  | \$1,369.00              | \$395.00             | \$1,864.00     | \$1,469.00 | \$395.00 |

**Optimum Chiropractic**

Statement Date: 2020-Jan-03

**Robert Irish** 45619  
 125 - 3066 Shelbourne St.  
 Victoria BC, Canada V8R 6T9  
 Phone: (250) 592-2521  
 Fax: (250) 592-4912

Invoice #:

**STATEMENT**

**Att:** -PP-

BC, Canada

**Re:** PATRICIA ELLIOTT  
 3291 Megaw Place  
 VICTORIA BC, Canada V8P 5J7

Date of Service:

| Insurer | Date        | Fee Code | ICD9 Code | Notes                     | Qty | Amount  |
|---------|-------------|----------|-----------|---------------------------|-----|---------|
| -PP-    | 2019-Dec-04 | 9907     | 0         | 60 minute massage         | 1   | \$82.00 |
| -PP-    | 2019-Dec-04 |          |           | Payment                   | 1   | \$82.00 |
| -PP-    | 2019-Jul-24 | 9907     | 0         | 60 minute massage         |     | \$21.00 |
| -PP-    | 2019-Jul-24 |          |           | Payment                   | 1   | \$21.00 |
| -PP-    | 2019-Jul-09 | 9905     | 0         | RMT Subsequent Visit      |     | \$21.00 |
| -PP-    | 2019-Jul-09 |          |           | Payment                   | 1   | \$21.00 |
| -PP-    | 2019-Jun-25 | 9905     | 0         | RMT Subsequent Visit      |     | \$21.00 |
| -PP-    | 2019-Jun-25 |          |           | Payment                   | 1   | \$21.00 |
| -PP-    | 2019-Jun-10 | 9950     | 0         | ICBC RMT Subsequent Visit |     | \$21.00 |
| -PP-    | 2019-Jun-10 |          |           | Payment                   | 1   | \$21.00 |
| -PP-    | 2019-Jun-05 | 9907     | 0         | 60 minute massage         |     | \$21.00 |
| -PP-    | 2019-Jun-05 |          |           | Payment                   | 1   | \$66.25 |
| -PP-    | 2018-Jun-05 | 9905     | 0         | RMT Subsequent Visit      |     | \$66.25 |
| -PP-    | 2018-Jun-05 |          |           | Payment                   |     |         |

see Appendix A for more

Payment History

| Date | Method | Amount |
|------|--------|--------|
|      |        |        |
|      |        |        |
|      |        |        |
|      |        |        |

|             |            |
|-------------|------------|
| SubTotal    | \$1,234.50 |
| GST         | \$0.00     |
| PST         | \$0.00     |
| HST         | \$0.00     |
| Amount Paid | \$1,234.50 |
| Amount Due  | \$0.00     |

Thank you.

## Appendix A

| Insurer | Date        | Fee Code | ICD9 Code | Notes                          | Qty | Amount  |
|---------|-------------|----------|-----------|--------------------------------|-----|---------|
| PP-     | 2018-May-28 | 9906     | 0         | RMT Prolonged Visit-45 minutes | 1   | \$66.25 |
| PP-     | 2018-May-28 |          |           | Payment                        |     | \$66.25 |
| PP-     | 2018-Apr-05 | 9907     | 0         | 60 minute massage              | 1   | \$82.00 |
| PP-     | 2018-Apr-05 |          |           | Payment                        |     | \$82.00 |
| PP-     | 2018-Mar-15 | 9907     | 0         | 60 minute massage              | 1   | \$82.00 |
| PP-     | 2018-Mar-15 |          |           | Payment                        |     | \$82.00 |
| PP-     | 2018-Feb-22 | 9907     | 0         | 60 minute massage              | 1   | \$82.00 |
| PP-     | 2018-Feb-22 |          |           | Payment                        |     | \$82.00 |
| PP-     | 2018-Feb-15 | 9907     | 0         | 60 minute massage              | 1   | \$82.00 |
| PP-     | 2018-Feb-15 |          |           | Payment                        |     | \$82.00 |
| PP-     | 2016-Jun-17 | 9905     | 0         | RMT Subsequent Visit           | 1   | \$36.50 |
| PP-     | 2016-Jun-17 |          |           | Payment                        |     | \$36.50 |
| PP-     | 2016-Jun-02 | 9905     | 0         | RMT Subsequent Visit           | 1   | \$36.50 |
| PP-     | 2016-Jun-02 |          |           | Payment                        |     | \$36.50 |
| PP-     | 2016-Mar-30 | 9905     | 0         | RMT Subsequent Visit           | 1   | \$36.50 |
| PP-     | 2016-Mar-30 |          |           | Payment                        |     | \$36.50 |
| PP-     | 2016-Mar-08 | 9905     | 0         | RMT Subsequent Visit           | 1   | \$36.50 |
| PP-     | 2016-Mar-08 |          |           | Payment                        |     | \$36.50 |
| PP-     | 2016-Mar-08 |          |           | Payment                        |     | \$31.50 |
| PP-     | 2016-Feb-07 |          |           | Payment                        | 1   | \$31.50 |
| PP-     | 2013-Feb-07 | 9905     | 0         | RMT Subsequent Visit           | 1   | \$31.50 |
| PP-     | 2013-Jan-30 | 9905     | 0         | RMT Subsequent Visit           | 1   | \$31.50 |
| PP-     | 2013-Jan-30 |          |           | Payment                        |     | \$31.50 |
| PP-     | 2013-Jan-30 |          |           | Payment                        | 1   | \$31.50 |
| PP-     | 2013-Jan-23 | 9905     | 0         | RMT Subsequent Visit           | 1   | \$31.50 |
| PP-     | 2013-Jan-23 |          |           | Payment                        |     | \$31.50 |
| PP-     | 2013-Jan-16 | 9905     | 0         | RMT Subsequent Visit           | 1   | \$31.50 |
| PP-     | 2013-Jan-16 |          |           | Payment                        |     | \$31.50 |
| PP-     | 2013-Jan-16 |          |           | Payment                        | 1   | \$31.50 |
| PP-     | 2013-Jan-10 | 9905     | 0         | RMT Subsequent Visit           | 1   | \$31.50 |
| PP-     | 2013-Jan-10 |          |           | Payment                        |     | \$31.50 |
| PP-     | 2013-Jan-10 |          |           | Payment                        | 1   | \$31.50 |
| PP-     | 2012-Dec-18 | 9905     | 0         | RMT Subsequent Visit           | 1   | \$31.50 |
| PP-     | 2012-Dec-18 |          |           | Payment                        |     | \$31.50 |
| PP-     | 2012-Dec-18 |          |           | Payment                        | 1   | \$31.50 |
| PP-     | 2012-Dec-13 | 9905     | 0         | RMT Subsequent Visit           | 1   | \$31.50 |
| PP-     | 2012-Dec-13 |          |           | Payment                        |     | \$31.50 |
| PP-     | 2012-Dec-13 |          |           | Payment                        | 1   | \$31.50 |
| PP-     | 2012-Dec-10 | 9905     | 0         | RMT Subsequent Visit           | 1   | \$31.50 |
| PP-     | 2012-Dec-10 |          |           | Payment                        |     | \$31.50 |
| PP-     | 2012-Dec-10 |          |           | Payment                        | 1   | \$31.50 |
| PP-     | 2012-Dec-06 | 9905     | 0         | RMT Subsequent Visit           | 1   | \$31.50 |
| PP-     | 2012-Dec-06 |          |           | Payment                        |     | \$31.50 |
| PP-     | 2012-Dec-06 |          |           | Payment                        | 1   | \$31.50 |
| PP-     | 2012-Nov-29 | 9905     | 0         | RMT Subsequent Visit           | 1   | \$31.50 |
| PP-     | 2012-Nov-29 |          |           | Payment                        |     | \$31.50 |
| PP-     | 2012-Nov-29 |          |           | Payment                        | 1   | \$31.50 |
| PP-     | 2012-Nov-27 | 9905     | 0         | RMT Subsequent Visit           | 1   | \$31.50 |
| PP-     | 2012-Nov-27 |          |           | Payment                        |     | \$31.50 |
| PP-     | 2012-Nov-27 |          |           | Payment                        | 1   | \$31.50 |
| PP-     | 2012-Nov-19 | 9905     | 0         | RMT Subsequent Visit           | 1   | \$31.50 |
| PP-     | 2012-Nov-19 |          |           | Payment                        |     | \$31.50 |
| PP-     | 2012-Nov-19 |          |           | Payment                        | 1   | \$31.50 |
| PP-     | 2012-Nov-15 | 9905     | 0         | RMT Subsequent Visit           | 1   | \$31.50 |
| PP-     | 2012-Nov-15 |          |           | Payment                        |     | \$31.50 |
| PP-     | 2012-Nov-15 |          |           | Payment                        | 1   | \$31.50 |
| PP-     | 2012-Nov-13 | 9905     | 0         | RMT Subsequent Visit           | 1   | \$31.50 |
| PP-     | 2012-Nov-13 |          |           | Payment                        |     | \$31.50 |
| PP-     | 2012-Nov-13 |          |           | Payment                        | 1   | \$31.50 |



## Statement

Account:

**Patricia Elliott**

3911 Stockton Cres, Victoria, BC, V8P 5G4

Tel: +17789772343

Email: pixie2343@gmail.com

**Equilibrium Massage Therapy; Equilibrium Therapeutics Inc.; Equilibrium Therapeutics Eagle Creek Ltd.**

19 Helmcken Road, Unit 130, Victoria, BC, V8Z 5G5

Tel: 778-405-7888 Fax: 250-388-7835

| Statement        |                    |                   |   |          |          |
|------------------|--------------------|-------------------|---|----------|----------|
| Date             | #                  | Payer             | Item  | Credit   | Debit    |
| January 16, 2019 | Invoice #82383-P01 | Patricia Elliott  | January 16, 2019 - 12:30pm, 60 minute RMT Session (60 minutes)<br>Victor Morin RMT, GST #822322392RT0001, License #3809   |          | \$105.00 |
| January 16, 2019 | Payment #90787     | Patricia Elliott  | Debit   | \$105.00 |          |
| June 12, 2019    | Invoice #95884-P03 | Patricia Elliott  | June 12, 2019 - 9:00am, ICBC Massage Therapy Initial Assessment (60 minutes)<br>Victor Morin RMT, GST #822322392RT0001, License #3809<br>ICBC (New System) #BH23071-6 |          | \$0.00   |
| June 12, 2019    | Invoice #95884-C01 | ICBC (New System) | June 12, 2019 - 9:00am, ICBC Massage Therapy Initial Assessment (60 minutes)<br>Victor Morin RMT, GST #822322392RT0001, License #3809<br>ICBC (New System) #BH23071-6 |          | \$112.35 |
| June 20, 2019    | Payment #106122    | ICBC (New System) | Insurer direct deposit  | \$112.35 |          |

| Summary                |                    |                 |                             |                         |                      |                |            |         |
|------------------------|--------------------|-----------------|-----------------------------|-------------------------|----------------------|----------------|------------|---------|
| Patient Total Invoiced | Patient Total Paid | Patient Balance | Other Payers Total Invoiced | Other Payers Total Paid | Other Payers Balance | Total Invoiced | Total Paid | Balance |
| \$105.00               | \$105.00           | \$0.00          | \$112.35                    | \$112.35                | \$0.00               | \$217.35       | \$217.35   | \$0.00  |

|  |  |
|--|--|
| EXHIBIT TAG <u>Elliott, Patricia</u> vs <u>Stegg Construction Materials Ltd.</u> |  |
| <b>PROVINCIAL COURT</b>  | <b>SUPREME COURT</b>                                     |
| EXHIBIT CARD No. _____   | EXHIBIT CARD No. <u>450044</u>                           |
| CASE NO. _____   | CASE NO. <u>144097</u>                                   |
| LOCATION _____   | LOCATION <u>Victoria BC</u>                              |
| MARKED <input type="checkbox"/>  | MARKED <input type="checkbox"/>                          |
| ENTERED <input type="checkbox"/>   | ENTERED <input checked="" type="checkbox"/> <u>2</u>     |
| <b>SUBMITTED BY:</b>   | <b>SUBMITTED BY:</b>                                     |
| <input type="checkbox"/> PROSECUTION/PLAINTIFF/APPLICANT                         | <input type="checkbox"/> PROSECUTION/PLAINTIFF/APPLICANT |
| <input type="checkbox"/> DEFENCE/RESPONDENT/DEFENDANT                            | <input type="checkbox"/> DEFENCE/RESPONDENT/DEFENDANT    |
| <input type="checkbox"/> OTHER _____   | <input checked="" type="checkbox"/> OTHER <u>July</u>    |
| CLERK ACKNOWLEDGEMENT _____ DATE _____   | CLERK ACKNOWLEDGEMENT <u>JA</u> DATE <u>04-FEB-20</u>    |

ADM 051 REV 11/00

OPC 7530855420 (100/PAK)

**IN THE SUPREME COURT OF BRITISH COLUMBIA**

Docket: 144097  
Registry: Victoria

Between:

**Patricia Dawn Elliott**

Plaintiff

And

**Ryan McCliggot and Slegg Construction Materials Ltd.**

Defendants

**QUESTIONS FOR THE JURY**

Question 1: Having admitted fault for the motor vehicle accident of November 8, 2012, did the defendants cause or contribute to the damage suffered by Ms. Elliott?

Answer: Yes X No     

Question 2: If the answer to Question 1 is Yes, at what amount if any do you assess the damages sustained by Ms. Elliott in the following categories:

- a) Non-Pecuniary Loss: Pain, injury, physical and mental suffering, and loss of the enjoyment of life from November 8, 2012 for as long as her injuries persist.

Total non-pecuniary loss      \$ 350,000

- b) Pecuniary Loss

i. Past loss of income from Nov. 8, 2012 to today \$ 48,500

|                                      |                      |
|--------------------------------------|----------------------|
| ii. Loss of future earning capacity  | \$ <u>45000</u>      |
| iii. Cost of future care             | \$ <u>15000</u>      |
| iv. Special damages (admitted)       | \$ 3,885.54          |
| Subtotal (pecuniary)                 | \$ <u>110,385.54</u> |
| c) Loss of Capacity – Housekeeping   | \$ <u>3000</u>       |
| Total Damages<br>(Sum of a, b and c) | \$ <u>463,385.54</u> |

Dated at Victoria, British Columbia this 4 day of February, 2020

00924  
Foreperson

|   |  |
|---|--|
| EXHIBIT TAG <u>Ellist, Patricia</u> vs <u>Slegg Construction Materials Ltd.</u> |  |
| <b>PROVINCIAL COURT</b>   | <b>SUPREME COURT</b>   |
| EXHIBIT CARD No. _____  | EXHIBIT CARD No. <u>450044</u>   |
| CASE NO. _____  | CASE NO. <u>144097</u>   |
| LOCATION _____  | LOCATION <u>Victoria BC</u>  |
| MARKED  | MARKED   |
| ENTERED   | ENTERED  |
| <div style="border: 1px solid black; width: 60px; height: 30px;"></div>         | <div style="border: 1px solid black; width: 60px; height: 30px; text-align: center; vertical-align: middle;">C</div> |
| <div style="border: 1px solid black; width: 60px; height: 30px;"></div>         | <div style="border: 1px solid black; width: 60px; height: 30px;"></div>  |
| <b>SUBMITTED BY:</b>  | <b>SUBMITTED BY:</b>   |
| <input type="checkbox"/> PROSECUTION/PLAINTIFF/APPLICANT                        | <input checked="" type="checkbox"/> PROSECUTION/PLAINTIFF/APPLICANT <u>→ Hauer, K</u>                                |
| <input type="checkbox"/> DEFENCE/RESPONDENT/DEFENDANT                           | <input type="checkbox"/> DEFENCE/RESPONDENT/DEFENDANT  |
| <input type="checkbox"/> OTHER _____  | <input type="checkbox"/> OTHER _____   |
| CLERK ACKNOWLEDGEMENT _____   | CLERK ACKNOWLEDGEMENT <u>HM</u>  |
| DATE _____  | DATE <u>3 FEB 20</u>   |

ADM 051 REV 11/00

OPC 7530856420 (100/PAK)



### Summary of Plaintiff's Submissions on Damages

These are the plaintiff's submissions only. Jurors may accept some, none or all of the below.

#### Past Loss of Earnings

##### **Part 1 - Past Loss of Earning Capacity – Nov 9, 2012 – March, 2013 – (approx. 4 months)**

\$2,200/month x 4 months

\$8,800

Less social assistance received in period

(\$5,187.75)

| Employer                       | Dates                       | Hourly Wage | Hrs / day | Value of 1.5 lost days/month | Months | Discount for time taken off as paid vacation | Lost income     |
|--------------------------------|-----------------------------|-------------|-----------|------------------------------|--------|--|-----------------|
| Bradshaw Property              | Apr 2013-Apr 2014           | \$13.50     | 7.5       | \$151.88                     | 13     | 0  | \$1,974.44      |
| Bradshaw Property              | May -2014 Sep 2014          | \$14.50     | 7.5       | \$163.12                     | 5      | 0  | \$815.60        |
| Bradshaw Property              | Oct 2014-May 2015           | \$15.50     | 7.5       | \$174.37                     | 8      | 0  | \$1394.96       |
| Medical EI Depression          | June 22, 2015-Dec 31, 2015  |             |           |                              |        |  | 0               |
| Craftsman Collision            | Jan 2016 Dec 2016           | \$19.00     | 8         | \$228                        | 12     | 75%  | \$684           |
| Craftsman Collision            | Jan 2017 Jan 2018           | \$20.00     | 8         | \$240                        | 13     | 75%  | \$780           |
| Craftsman Collision            | Feb 2018 May 2019           | \$21.00     | 8         | \$252                        | 16     | 75%  | \$1008          |
| Time off for May 2019 accident | June 1, 2019 - Sep 30, 2019 |             |           |                              |        | 0  | 0               |
| Harbour Doors                  | Oct 1, 2019-Jan 31, 2020    | \$25.00     | 8         | \$300                        | 4      | 0  | \$1200          |
| Subtotal                       |                             |             |           |                              |        |  | <b>7,857.00</b> |

Subtotal

**\$3,612.25**

##### **Part 2 – Past Loss of Earning Capacity – Apr, 2013 – Jan 2020**

##### **Part 3: Totals**

|  |                          |
|--|--------------------------|
| Gross past loss of earnings claimed = Part 1 + Part 2                  | \$11,469.25              |
| Suggested reduction for tax of 22.7%.                                  | (\$2,603.52)             |
| <b>TOTAL Requested by Plaintiff for Past Loss of Earning Capacity:</b> | <b><u>\$8,865.73</u></b> |

Loss of future earning capacity

12 hours per month x \$25 / hour x 12 months/year x 22 years = **\$79,200**

Cost of Future Care

**Medications**

|  |            |
|--|------------|
| \$30/month x 12 months/year x 22 years | \$7,920.00 |
|--|------------|

**Physiotherapy**

|   |            |
|---|------------|
| \$25/user fee after coverage x 6 sessions per year x 22 years | \$3,125.00 |
|---|------------|

**Injections**

|                |        |
|----------------|--------|
| Covered by MSP | \$0.00 |
|----------------|--------|

~~**Gym Pass**~~

|  |                   |
|--|-------------------|
| <del>Plaintiff used gym before accident<br/>&amp; would have continued gym membership<br/>without the accident</del> | <del>\$0.00</del> |
|--|-------------------|

|                                  |                        |
|----------------------------------|------------------------|
| <b>Total Cost of Future Care</b> | <b><u>\$11,045</u></b> |
|----------------------------------|------------------------|

Special Damages

\$3,885.54 by agreement of the parties

|  |                          |   |                          |
|--|--------------------------|---|--------------------------|
| EXHIBIT TAG <u>Elliott, Patricia</u>                     |                          | vs <u>Steg Construction Materials Ltd.</u>                            |                          |
| <b>PROVINCIAL COURT</b>                                  |                          | <b>SUPREME COURT</b>  |                          |
| EXHIBIT CARD No. _____                                   |                          | EXHIBIT CARD No. <u>450044</u>  |                          |
| CASE NO. _____   |                          | CASE NO. <u>144097</u>  |                          |
| LOCATION _____   |                          | LOCATION <u>Victoria BC</u>   |                          |
| MARKED   | ENTERED                  | MARKED  | ENTERED                  |
| <input type="checkbox"/>                                 | <input type="checkbox"/> | <input checked="" type="checkbox"/>                                   | <input type="checkbox"/> |
| <b>SUBMITTED BY:</b>                                     |                          | <b>SUBMITTED BY:</b>  |                          |
| <input type="checkbox"/> PROSECUTION/PLAINTIFF/APPLICANT |                          | <input type="checkbox"/> PROSECUTION/PLAINTIFF/APPLICANT              |                          |
| <input type="checkbox"/> DEFENCE/RESPONDENT/DEFENDANT    |                          | <input type="checkbox"/> DEFENCE/RESPONDENT/DEFENDANT                 |                          |
| <input type="checkbox"/> OTHER _____                     |                          | <input checked="" type="checkbox"/> OTHER <u>Justice Winteringham</u> |                          |
| CLERK ACKNOWLEDGEMENT _____                              |                          | CLERK ACKNOWLEDGEMENT <u>HA</u>                                       |                          |
| DATE _____   |                          | DATE <u>4 FEB 20</u>  |                          |

ADM 051 REV 11/00

OPC 7530855420 (100/PAK)

**IN THE SUPREME COURT OF BRITISH COLUMBIA**

Docket: 144097  
Registry: Victoria

Between:

**Patricia Dawn Elliott**

Plaintiff

And

**Ryan McCliggot and Slegg Construction Materials Ltd.**

Defendants

Before: The Honourable Justice Winteringham

**Final Instruction to the Jury**

Counsel for the Plaintiff:

K. Hauer

Counsel for the Defendants:

M. O'Meara  
C. Megaffin

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## I. INTRODUCTION

[1] You have now heard all the evidence in this case and the submissions of Mr. Hauer, counsel for Ms. Elliott, and Mr. O'Meara, counsel for the defendants. Before you retire to consider your verdict, I will instruct you on the law and review some of the evidence for you.

[2] To assist you in your deliberations, I have prepared a written copy of these instructions. I will read it to you and you can follow along. Please do not skip or read ahead. During the reading, I may discover some minor errors in the charge that I did not catch when I checked it over and we can correct our respective copies together. The official charge you must follow will be the one I give to you orally and not the one that is written, should there be any differences between them.

[3] Some of my instructions you will have heard before in my opening instructions to you. I am repeating them because now you may have a different perspective and will be able to put these instructions into a better context.

[4] When you retire to deliberate, you must consider my instructions as a whole. Do not single out some parts and ignore others.

### **Questions**

[5] You may be wondering how you will perform your duties once I complete my charge. The end result is not very complicated. All you need to do is agree among yourselves on the answers to the questions that are appended to the back of these instructions.

[6] I will deal with the questions in more detail at the end of the charge so you don't need to look at them just yet.

## II. FUNCTIONS OF A JUDGE AND JURY

### **Division of Responsibility**

[7] It is my responsibility to instruct you on the law. You are obliged to accept my instructions in this respect. You should not deal with this case on the basis of what

you think the law is or what you think it should be. You must disregard anything either counsel said to you about the law insofar as it conflicts with what I tell you.

[8] There is a good reason for this procedure. If I make a mistake in directing you on the law, the Court of Appeal can always correct me, because what I say is being recorded. My charge to you will be available in the form of a transcript if either side decides to appeal. On the other hand, your deliberations are conducted in secret. There is no record of them. If you misapply the law, the party who is wronged has no transcript upon which he or she can rely if the case should go to appeal.

#### **Jury Sole Judge of the Facts**

[9] You are the sole judges of the evidence and the facts that arise from the evidence. Your findings of fact must be based only on the evidence you have heard in this court.

[10] You may be wondering about the difference between the evidence and the facts:

The evidence is what was said in court by the witnesses as well as the documents that were marked as exhibits, including the expert reports.

The facts are the things that you choose to believe from the evidence. The things that you choose not to accept must not be taken into account when arriving at your verdict. From the facts that you find, you may draw inferences with respect to other facts, and you may rely upon these inferences in determining whether Ms. Elliott succeeds or fails in her claims.

#### **Warning against Basing Verdict on Sympathy or Antipathy**

[11] In reaching your decision, you should not base your verdict on sympathy for Ms. Elliott or the defendants or any witness. Nor should it be based on any feelings for or against Ms. Elliott or the defendants or any witness.



### III. WEIGHING OF THE EVIDENCE

#### **Jurors' Memory of the Evidence Must Prevail**

[12] It is your memory of the evidence that counts. The evidence you heard in this trial has not been typed into the form of a transcript and won't be unless the case is appealed after the end of the trial. I will review some of the evidence with you from my notes taken during the course of the trial. My notes are my best attempt to summarize the evidence but they may not be completely accurate. You must therefore rely on your own memory and/or notes of the evidence rather than my memory and my notes. The same caution applies to anything the lawyers said about the evidence during their addresses to you.

#### **Independence of Judgment**

[13] Your duty is to weigh the evidence and come to a conclusion regarding what you believe and what you do not believe are the facts. You should exercise the same independence of judgment in weighing my comments about the evidence as you do in weighing the testimony of witnesses and the submissions of counsel.

#### **Credibility of Witnesses**

[14] I want to touch on the credibility or truthfulness of the witnesses who have given evidence in this trial. As I told you at the outset of the trial when I spoke to you about the functions of a judge and jury, you must decide which evidence you choose to believe. You must also decide how much weight you will give to the testimony of each witness. My remarks are intended to help you in these tasks.

[15] Generally, you should use your common sense and experience as men and women of the community to assess the credibility of each witness. In doing so, you should keep the following points in mind.

[16] When you consider the evidence of the witnesses, you do not have to accept or reject everything a particular witness said. You may decide to accept only some of what a witness said and reject the rest, or you may decide to accept or reject everything a particular witness said in the witness box. The decision is yours.

[17] As you know, people hear, see and recall things differently. This means that you may find innocent discrepancies between the testimonies of various witnesses. That does not mean you must reject the evidence of a particular witness or witnesses because of these discrepancies, particularly if they relate to minor matters that are not in dispute.

[18] Where there is conflicting evidence, you should look to see if the evidence of one witness is supported or confirmed by the evidence of another witness whom you believe. Where there is supporting or confirming evidence on one side of the evidence but not on the other, this may persuade you to believe the testimony that is supported by other evidence.

[19] You heard evidence in this case about Ms. Elliott's criminal record. You heard that she pleaded guilty to a charge of fraud and forgery in 2010 relating to false expense claims she made in connection with her daughter. As I stated to you after that evidence was first heard, you may only use this evidence to judge the credibility of Ms. Elliott.

[20] Relevant to your assessment of this factor is (1) the type of offences for which she pleaded guilty; (2) you should consider when Ms. Elliott committed the offence. A recent conviction may be more relevant to credibility than a conviction for an offence that was committed a long time ago; (3) you should consider the number of convictions. A single conviction for a criminal offence is usually less serious than a long list of convictions; and (4) you should consider how Ms. Elliott has lived since her conviction in 2010 and consider whether there is any evidence that she has not lived an honest life since then.

[21] The criminal record is simply one factor you should consider in your assessment of her credibility. You are permitted to use the criminal record for a limited purpose, that is to assess her credibility. You are not permitted to use the criminal record as proof that because she has a criminal record from over 10 years ago that her claim for damages in this lawsuit must therefore be fraudulent.

[22] There is no fixed set of rules to use in assessing the credibility of witnesses. You should apply your common sense to decide what evidence you accept and how much weight you wish to give it.

### **Preponderance of the Evidence and the Burden of Proof**

[23] In civil actions such as this one, the party who asserts the affirmative of an issue must generally carry the burden of proving it on a balance of probabilities.

#### ***Issues to be Proved by the Plaintiff***

[24] In this case, Ms. Elliott has the burden of proving on a balance of probabilities all of the facts needed to establish her allegations. Even though the defendants have admitted fault for the accident, Ms. Elliott must nonetheless prove that the accident caused or contributed to the injuries she says she suffered as well as the loss she says she has sustained.

#### ***Meaning of “Balance of Probabilities”***

[25] What does “proof on a balance of probabilities” mean? It does not mean proof beyond a reasonable doubt—that standard of proof applies only in criminal trials. In civil trials, such as this one, the party who has the burden of proof on an issue must convince you that what he or she asserts is more probable than not—that the balance is tipped in his or her favour. You must examine the evidence and determine whether the evidence being relied upon by Ms. Elliott is more probable than the evidence relied on by the defendants. In short, you must decide whether the existence of the contested fact is more probable than not. If you find that it was more probable than not, you should treat it as certain.

#### ***What if the Evidence is Evenly Balanced?***

[26] If the evidence on an issue is evenly balanced, so that you are unable to say where the balance of probabilities lies, then your decision on that issue must be against the party who had the burden of proving it.

***Consider All Evidence***

[27] In deciding whether an issue has been proven on a balance of probabilities, you should consider all of the evidence relevant to that issue no matter which party produced it.

**IV. EXPERT EVIDENCE**

[28] I am now going to tell you how you should go about examining and assessing the expert evidence.

[29] In this case, you heard the testimony of Dr. Zeeshan Waseem, a physiatrist. You also have Dr. Waseem's report (at Tab 1 of Exhibit 1) and his report forms part of the evidence. In addition, you have a report from Dr. Bassam Masri (at Tab 2 of Exhibit 1), an orthopaedic surgeon. Dr. Masri's report also forms a part of the evidence. Dr. Masri's qualifications to provide expert testimony (and those qualifications are not challenged) are found at the beginning of his report.

[30] Normally, witnesses are limited to testifying about their own personal actions and observations and they are not permitted to offer opinions. Expert witnesses however are witnesses who are particularly qualified to help you to understand issues beyond our common knowledge or experience, and they are allowed to state opinions about the facts in their area of expertise. Physicians are an example of the type of expert witnesses who commonly provide opinion evidence at trials given that the medical issues are typically beyond the common knowledge and experience of the judge and jury members.

**Weight to be given to Expert Evidence**

[31] It is up to you to decide how much weight you will give to an expert opinion. You do not have to accept the evidence or the opinion of an expert witness. The only reason an expert is allowed to give an opinion in this case is to help you understand and decide the things that are not typically within the knowledge of most people, including most importantly in this case, the extent of Ms. Elliott's injuries from the accident and their effect on her. You should consider carefully the testimony and

opinion of an expert witness, just as you should consider carefully the evidence of any other witness.

### **Three Step Process**

[32] In deciding how much weight to give to an expert's evidence, you should consider three things. First, examine the qualifications of the expert. Second, consider whether the facts upon which the expert based his opinion were proven by other evidence in this trial. Statements made to an expert upon which an expert relies must be proven by evidence given at trial. Third, examine the whole of the opinion and decide whether the opinion seems reasonable.

[33] In their closing submissions, counsel offered different interpretations of the expert evidence. However, it is for you to determine what evidence to accept or to reject. I suggest you read the reports (Exhibit 1, Tabs 1 and 2) and decide for yourselves what weight to attach to their evidence.

## **V. CAUSATION**

[34] Because the defendants have acknowledged that their negligence caused the accident, what you need to decide is the degree to which Ms. Elliott suffered injuries and any subsequent loss as a result of the defendants' negligence.

[35] In this regard, Ms. Elliott bears the burden of proving on a balance of probabilities that her injuries were caused by the accident, and that the impact of these injuries on her everyday functioning is the nature and quality that she has described. Ms. Elliott asserts that the injuries caused by the accident include:

- a) Injuries to her hips and lower back that resolved in about two – three months;
- b) Injuries to her back, shoulder and neck that have not resolved and which cause ongoing pain and some physical limitations; and
- c) Headaches that are ongoing.

[36] Causation is essentially a practical question of fact that can best be answered by ordinary common sense, on a balance of probabilities. The test to be applied is called the “but for” test: “but for” the accident, would the plaintiff have suffered the injuries and limitations of which she now complains?

[37] If you are satisfied that Ms. Elliott’s pain and limitations would likely not have occurred absent the accident, or that the accident played a part in causing them, then you would conclude that she had established causation.

[38] Ms. Elliott says that all of her injuries were caused by the accident, and she seeks full compensation for the pecuniary and non-pecuniary impact of those injuries. The defendants say that they are not responsible for the extent of the injuries and/or loss claimed by Ms. Elliott. The process of assessing damages flows from your conclusion as to what injuries Ms. Elliott suffered as a result of the accident.

[39] Having admitted that the November 8, 2012 accident was the cause of injury to her (but not the extent of that injury), in this case Ms. Elliott has the burden of proving on a balance of probabilities the facts needed to establish the extent of Ms. Elliott’s loss and damages resulting from those injuries.

## **VI. REVIEW OF THE EVIDENCE**

[40] I am now going to mention some of the more important evidence you heard during this trial in order that it will be fresh in you minds when you retire to consider your verdict.

[41] Keep in mind that what I am relating to you comes from my own notes, and so there may be some inaccuracies. As I told you before, it is your memory of the evidence that counts and not the memory of counsel or my recollection of what the witnesses said. As well, I may neglect to mention some portion of the evidence that you consider important. Again, it is your view of the evidence that counts. At the end of the charge, I will tell you how you may have parts of the evidence read back to you if you have difficulty recalling an important piece of evidence.

[42] I don't intend to discuss everything a witness said. Instead, I will summarize for you what I consider to be the significant points emerging from evidence of the witnesses who testified in this trial. Bear in mind that this is my summary of the evidence. Later in this charge I will summarize the submissions of counsel which focus on the evidence that they consider of particular significance. As I have already instructed, it is your view of the evidence that matters in the end.

[43] The summary I provide will not include the evidence of the expert witnesses. Once again, I suggest that you read each report and consider the oral testimony of Dr. Waseem.

[44] The summary is intended to provide assistance to you as you begin your deliberations, but it is not intended as a substitute for your own consideration of the evidence. You should review the reports of the experts, along with any notes you took during the course of oral evidence and your general recollection of the testimony.

**A. Evidence of Ms. Elliott's pre-accident condition**

[45] You heard evidence from Ms. Elliott, Nadine Dalzell (Ms. Elliott's friend of 15 – 16 years) and Tristan Clark, Ms. Elliott's adult son. The three described their observations of Ms. Elliott and her physical condition before the accident. Ms. Elliott and Ms. Dalzell in particular, described her as someone who was social, enjoyed some physical activity such as golf, bowling, laser tag and gym attendance. Ms. Dalzell described Ms. Elliott as an outgoing, extroverted friend who took it on herself to organize the small group of friends and their social outings.

[46] With respect to employment, Ms. Elliott testified about the daycare business that she operated from her home. You also heard her evidence about the steps she was taking to become a licensed daycare facility which would enable her to have more children registered in her daycare. She testified about the value to her of this form of employment; in particular, it allowed her to stay at home so she could support her own children and their various needs.

[47] You heard that she was mostly alone while she raised her three children (now ages 23, 19 and 13 years old), her youngest being disabled and requiring additional support. She also described the challenges that she has had with her two older children over the years and the steps she has taken to try and support their needs. She described periods of hospitalization required for her children and her efforts to care for them and provide what was necessary to assist them in their recovery.

[48] Ms. Elliott testified about her physical condition before the accident. In particular, she testified that she did not have any physical limitations that restricted her ability to work or that impacted her quality and/or enjoyment of her life.

#### **B. Motor Vehicle Accident – November 8, 2012**

[49] Regarding the accident, Ms. Elliott testified that on November 8, 2012 she was traveling on Cedar Hill Rd. towards Gordon Head in her 2003 Dodge Caravan. She was heading to Gordon Head Recreation Centre. With her were three of the daycare children, buckled into their car seats in the back rows of the van. She testified that she was behind a flat deck truck (driven by the defendant) when he suddenly stopped his truck. He then quickly put his truck into reverse and began backing up towards Ms. Elliott's van. Despite honking for five to ten seconds, the truck struck her vehicle. Photographs of the damage to her vehicle are found in Exhibit 1, Tab 3.

[50] She believed her vehicle was driveable at first and later discovered it was not. She managed to get the children to her home where they were retrieved by their parents.

#### **C. After the Accident**

[51] Ms. Elliott described experiencing pain 6 – 8 hours after the accident. She testified about pain in her neck and resulting headache. She attended at the Gordon Head Medical Clinic complaining of headaches and stiffness in her neck which were prominent. She also had symptoms in her lower back and hip.



[52] She described trying massage therapy immediately after the accident but she testified that seemed to aggravate her pain. She then commenced physiotherapy treatment.

[53] With respect to medications, she testified that she was prescribed a pain killer about one week after the accident. However, she testified that she was unable to use that painkiller because it caused her to be “not present enough” as the sole caregiver for her children. She has since taken over the counter medications to deal with pain and continues to treat her pain with over the counter medications two or sometimes three times per day.

#### **D. Employment**

[54] At the time of the accident, Ms. Elliott was operating an unlicensed daycare (since 2007) and was in the process of satisfying the licensing requirements when the accident occurred. She testified that she had started her bachelor of arts with a plan to go into teaching but her plan had been interrupted by life events including having children of her own.

[55] She started providing daycare services and began with one child and then decided to try and grow the daycare. She moved to a residence on Ambassador Place – a larger home that would accommodate more children. She rented the home on Ambassador from Andrew Stuart. Mr. Stuart testified about Ms. Elliott’s tenancy. He stated that she had always paid her rent on time and was a reliable tenant. After the accident, she was unable to pay the rent and she was evicted in January 2013. She has an outstanding debt to Mr. Stuart for the unpaid rent.

[56] Ms. Elliott described the impact of the accident on her daycare. She testified that she informed the families that she would have to close for a few days which she did. She then searched the employment ads and hired another daycare worker to replace her. Ms. Elliott was required to pay the other worker. After approximately one month, Ms. Elliott did not feel capable of performing her responsibilities as a

daycare operator without the support of the hired worker. The parents chose alternate care and Ms. Elliott was required to close her daycare.

[57] Ms. Elliott was cross-examined about her daycare earnings. She agreed that the daycare was not profitable and that her earnings had decreased somewhat in the two years before the accident. She testified that the business was nonetheless valuable to her because it allowed her to stay at home with her own children. In addition, she was going through the licensing process at the time of the accident in an attempt to increase her daycare earnings because she would be permitted to have more children.

[58] She began to look for work in March 2013 and shortly thereafter located a position with Bradshaw Property Management as an office administrator in April 2013. She went on a medical leave on June 22, 2015 when she was suffering from depression.

[59] She testified that she received medical employment insurance for a period of time and was cleared to return to work in December 2015.

[60] On January 4, 2016, she began working for Craftsman Collision. Over the next two and one-half years, she worked at various locations. She was their book-keeper and performed various office-related duties. She testified about accommodation provided to her such as some flexibility with work hours (late arrivals, weekend make up time), removal of any lifting requirements, bringing in an ergonomic chair from home, use of heating pad and moving around. She used most of her allotted three week vacation time for pain management and/or medical appointments. She testified that less accommodation was provided to her during the final months of her employment at Craftsman and she testified about the circumstances related to her departure particularly with respect to the conduct of her general manager.

[61] Mr. Toby Alderson, the general manager at the Colwood location of Craftsman Collision, testified about his observations of Ms. Elliott. He did not

observe her experience any discomfort during the time she worked for him, approximately one year. He testified that she had been transferred to the Colwood location from another store and that he would not have hired her based on his observations. He testified that she was often running late attributing her lateness to responsibilities relating to her daughter.

[62] In May 2019, Ms. Elliott was in another motor vehicle accident that caused an injury to her arm and hand. She said there was a slight exacerbation of her ongoing neck/back/headache pain but that it lasted for about 24-48 hours. Regarding her employment, she testified that the general manager suggested that she begin looking for another job. She did. Mr. Alderson denied that he made this statement.

[63] In October 2019, Ms. Elliott began working for Harbour Doors and that is her ~~current place of employment~~ as a book-keeper earning \$26/hour.

[64] With respect to missed employment, Ms. Elliott estimates that she had to miss 1 – 1 ½ days per month from work because of her injuries.

#### **E. Current status and prognosis**

[65] Ms. Elliott testified that some of her symptoms improved in or about March 2013 but that any improvement plateaued in the fall of 2014. At the time of this trial, she described ongoing and persistent pain in her upper back, neck, shoulders and headaches experienced on a daily basis. She rated her daily level of pain at a 1 or 2. She testified that about once per month, something occurs which aggravates her condition. On those occasions, she rated her pain at a level 3 or 4. Similarly, about once every two or three months, her pain will increase to a level 5 or 6 and then other symptoms become involved including: numbness and tingling in right arm and fingers in her right hand; facial pain; aggravation of nerve in her neck; and, numbness.

[66] She does not suggest in this lawsuit that her depression was caused by the accident.

[67] Ms. Dalzell and Mr. Clark also testified about their observations of Ms. Elliott. Both described someone who needed support after the accident that was not required before. Ms. Dalzell, a friend for over 15 years, testified that she provided assistance by helping with groceries, housework and lifting. Ms. Dalzell testified that she observes Ms. Elliott managing her pain almost every time she sees her including rubbing her neck, taking pain medication for headaches and trying to do general pain management. She testified about changes in her friend since the accident. She agreed that Ms. Elliott has had to bear the burden of raising three children and that all three children have struggled.

[68] Ms. Elliott's adult son described his observations of his mother. He testified that he tries to help her around the house by doing the heavy lifting, household chores and groceries.

## **VII. ASSESSMENT OF DAMAGES**

[69] I now turn to the question of damages.

[70] "Damages" is a term that simply means monetary or financial compensation ordered by a court for the injury or loss one person has caused to another.

[71] By discussing damages I am not assuming or implying you will or should find that the defendants are responsible for all of the injuries or loss claimed by Ms. Elliott. The fact of an injury and causation are separate issues you must determine on the basis of the evidence and the principles of law I explained to you.

[72] You the jury have the responsibility for deciding the amount of compensation that the defendants should pay to Ms. Elliott for the injuries you find she suffered as a result of the accident.

### **Measure of Damages**

[73] It is a basic principle in assessing damages that an injured plaintiff is entitled to be put into the position she would have been in but for the accident, so far as money can do that. You should therefore award Ms. Elliott a sum of money that will put her in the same position she would have been in if the accident had not occurred.

### **Damages May Be Awarded Only Once**

[74] You should remember that under our system of law this is the only occasion on which compensation can be given to Ms. Elliott for the injuries she sustained in the accident. She must sue in this one trial for all losses arising out of the events in issue—both past and future. If something unexpected happens in the future and Ms. Elliott gets worse, she cannot come back to court and seek more money. If she gets better, the defendants cannot come back and seek to have her damages reduced. No subsequent lawsuit may be brought either to increase or decrease any award you may choose to make.

### **Fairness to Both Parties**

[75] In respect of all types of damages, it is your duty to provide reasonable and adequate compensation in an amount that is fair to all parties, considering Ms. Elliott's loss. The ability of the defendants to pay is not a relevant consideration. You should focus on the loss suffered by Ms. Elliott. The way to achieve fairness to the defendants is by ensuring that the claims raised against them are legitimate and justifiable and based on your assessment of the evidence.

### **Types of Damages**

[76] The categories of damages Ms. Elliott is claiming in this action are all legally recognized categories of damages. They are called "heads of damages". In this case, the heads of damages being claimed are as follows:

- a) non-pecuniary damages for pain, injury, physical and mental suffering, and loss of enjoyment of life;

- b) loss of income up to the date of trial;
- c) future loss of earning capacity from today into the future;
- d) special damages for out-of-pocket expenses incurred from the date of the accident to the start of this trial;
- e) expenses for any future care costs; and
- f) loss of capacity – housekeeping.

[77] I will discuss each of these heads of damage in more detail shortly.

[78] Generally speaking, most heads of damages do not reduce themselves to a precise dollar figure. Therefore, in respect of the heads of damages to be decided by you, the amount if any you chose to award should be rounded off to the nearest thousand dollars or at most to the nearest one hundred dollars.

#### **Standard of Proof—General**

[79] As I have already mentioned, all facts must be proven on a balance of probabilities. In your assessment of damages, this principle also applies to any fact on which Ms. Elliott relies to prove that a certain injury occurred and that it was caused by the accident. For example, facts relied on to establish Ms. Elliott's claim for non-pecuniary damages such as pain, suffering and loss of enjoyment of life must be proven on a balance of probabilities. Again, you must ask yourself whether it is more probable than not that Ms. Elliott has suffered as she says she has.

[80] In counsel's submissions to you, they suggested dollar figures that you might choose to award Ms. Elliott for certain of the heads of damage in issue, although not for the non-pecuniary damages for pain and suffering, for which neither counsel nor I may suggest dollar figures. Because the assessment of damages is a question of fact for you to decide, you are not bound by counsel's suggestions. As I have indicated, the arguments of counsel are not evidence from which you can find facts.

You may only find facts based on the evidence you heard and you must award Ms. Elliott reasonable compensation based on your findings of fact.

### **Standard of Proof-Contingent or Future Events**

[81] In addition to claiming damages for pain and suffering and loss of enjoyment of life, Ms. Elliott claims that she will lose income in the future as a result of what happened to her. She claims that her capacity to earn income in the future has been decreased because of the accident. No one knows with certainty whether or not this will be the case. By their very nature, hypothetical events and events that have yet to occur cannot be proved the way past events can be. It cannot always be said with certainty that a plaintiff would have earned a certain income had this injury not occurred. In assessing lost future income and earning capacity, the common events of life, such as sickness, lay-offs, pay raises, economic booms and downturns and promotions, should be taken into account even when they cannot be proven to be more likely than not.

[82] When considering contingent or future events, you must evaluate the risk or likelihood that some event will occur. This requires a different analysis than when you are deciding about past events. There, you must weigh the evidence and reach conclusions on a balance of probabilities. Anything that is more probable than not, you should treat as certain.

[83] However, when considering what might happen in the future, or what might have happened in the future but for the accident, you must first decide whether the event in issue is a real and substantial possibility, rather than mere guesswork. If it is a real and substantial possibility, you must then determine the actual likelihood of it occurring.

[84] For example, if you find that there is a real and substantial possibility that Ms. Elliott will suffer loss of income in the future and that the chance of that possibility is, say, 10% or 50% or 90%, you must award her 10% or 50% or 90% of the compensation she would have been entitled to if it were certain that the loss or expense would occur or would have occurred.

### VIII. PARTIES' POSITIONS

[85] What follows is a brief summary of each parties' position.

#### A. Position of Ms. Elliott

[86] Ms. Elliott provided this summary of her position:

"Ms. Elliott was in a motor vehicle accident where a flat-deck lumber truck drove into her vehicle in reverse. The accident was not a high speed collision. She was injured and took treatment. Several of her injuries healed quickly and well. However, through no fault of her own, some of her injuries did not heal. They developed into chronic myofascial pain in her neck, shoulders and upper back. She also developed cervicogenic headaches. The medical evidence is unanimous in the diagnosis and it is based on objective physical findings.

Ms. Elliott has responded well to her setbacks. She changed careers and moved into office work. However, she sacrificed her dream of a hands-on career working with young children. She now lives in a constant state of discomfort, tension and low-grade headache. Sometimes her condition flares up into serious pain.

When Ms. Elliott is in a significant pain flare-up, she is in no condition to work and she's of no benefit to herself or her employer. On average she misses 1 to 1.5 days per month due to flare-ups from her injuries. The expert opinion from the doctors predict her condition is permanent. Although nobody can know how Ms. Elliott's career would have gone if not for the accident, she is now less capable overall of earning income from all types of employment. She does not have the same potential in life she did, either to earn an income or enjoy what life has to offer."

#### B. Position of the Defendants

[87] The defendants provided this summary of their position:

"The plaintiff was in a minor motor vehicle accident in 2012. At the time, she was operating an unlicensed daycare where her gross income from 2011 through 2012 were hardly sufficient to cover her rent, let alone her family's living expenses. Since 2013, the Plaintiff has moved to another field where her income potential is currently almost double that of what she earned in her daycare.

As early as November 30, 2012, 22 days after the accident, the Plaintiff's family physician, Dr. Darcey Nielsen, found she was improving from injuries



sustained in the accident. The medical evidence introduced by the Plaintiff is that the Plaintiff can continue pursuing her chosen career.

Absent a brief period in late 2012 and early 2013, the Plaintiff has returned to the majority of her activities of daily living and manages her household, looks after her children and performs well at her job.

Other than a brief period of time between the date of the accident and when she commenced employment at Bradshaw Property Management, the Plaintiff has continued to hold a full-time position.

The Plaintiff has not sustained any loss for income generating capacity going into the future.”

#### **IX. NON-PECUNIARY DAMAGES**

[88] I will deal first with the head of damages called non-pecuniary loss. Non-pecuniary losses are personal injury losses that have not required an actual outlay of money. The purpose of such an award is to compensate Ms. Elliott for such things as pain, suffering, disability, inconvenience and loss of enjoyment of life

[89] Your award should compensate Ms. Elliott for her pain and suffering, inconvenience and loss of enjoyment of life both up to the date of trial and in the future provided that those losses were caused by the accident.

[90] In assessing damages, you may consider what use Ms. Elliott can make of the money you may choose to give her. One purpose of making an award under this heading is to substitute other amenities for those she has lost. It is meant to provide some money to make Ms. Elliott's life more bearable.

[91] With respect to Ms. Elliott's complaints relating to pain, injury, and suffering from the date of the accident until the date of the trial, you heard her own evidence about her lifestyle and activities before the accident and her evidence about how she has been affected by her injuries. You also heard the evidence of Nadine Dalzell and Ms. Elliott's son about their observations of the impact of the accident on Ms. Elliott. As well, you have the written reports of Dr. Waseem (and his oral testimony) and Dr. Masri setting out their medical opinions, including their assessment and prognosis.

[92] When fixing a sum for damages with respect to pain, injury, and suffering, you know that damages can never be adequate in the sense that a person would undergo this pain and suffering in exchange for money. Although you cannot truly compensate for pain and suffering, you must try to assess an amount for Ms. Elliott that is fair and reasonable and bears some reasonable relation to the loss and injury claimed, as shown in the evidence.

[93] A judge sitting alone without a jury is required to consider similar awards of other judges, to maintain consistency with them. But the law does not permit me to provide you with copies of other trial judgments relating to similar kinds of cases, or to tell you about awards in other cases.

[94] If I were to tell you the approximate range of damages I might award, and you adopted what I said, you would merely be returning a verdict based upon a judge's opinion. In that event, the educational value of your independent judgment would be lost to the law. Besides, my assessment would be based on my view of the evidence. It might be entirely different from yours. As I have said, it is your duty to determine a sum that is fair and reasonable to both parties, based on the evidence you have heard.

## **X. PECUNIARY LOSS**

### **Loss of Income to Date of Trial**

[95] You heard from Ms. Elliott that she claims to have lost income as a result of the accident.

[96] A claim for what is often described as "past loss of income" is actually a claim for loss of earning capacity, that is, a claim for the loss of the value of the work that the injured plaintiff would have performed but was unable to perform because of the injury.

[97] If you are satisfied on a balance of probabilities that Ms. Elliott's ability to earn income was impaired as a result of the injuries she sustained in the accident, you must go on to assess the likelihood that, had the injuries not occurred, Ms. Elliott

would have earned more in income in the period between the accident and the trial than she actually earned and make an award for past loss of income using that assessment. The question of what would have happened had the accident not occurred is a hypothetical one and, as such, it need not be proven on a balance of probabilities, but rather it is given weight in accordance with its likelihood. Common events of life, or contingencies, such as sickness, layoffs, pay raises and promotions, should be taken into account. It is also open to you to consider Ms. Elliott's past employment history including the fact that, at the time of the accident, according to her she was operating her own business in her in-home daycare.

[98] Taking account of all of these factors, it is for you to decide whether Ms. Elliott has proven, on a balance of probabilities, that she suffered a loss of income as a result of the injuries sustained in the accident in the period from the date of the accident to the date of trial.

[99] Ms. Elliott submits that an award of \$8,865.73 is reasonable under this head. That number is based on: (1) her initial loss from her daycare from the time of the accident until her return to the workforce in April 2013; (2) after April 2013, her evidence that she missed 1 to 1 ½ days per month; and (3) as agreed between counsel, that there be a reduction for tax of 22.7%.

[100] The defendants submit that there could be an award of damages for past income loss from the date of the accident until Ms. Elliott's return to work in April 2013 but that she has not met the evidentiary burden on her to prove this loss.

[101] It is for you to decide whether Ms. Elliott has established her claim under this head, keeping in mind that damages are not limited to actual lost income but include the loss of capacity to work.

#### **Loss of Future Earning Capacity**

[102] Ms. Elliott also claims damages for income that she may lose in the future as a result of the injuries sustained in the accident. She submits that she is foreclosed from pursuing some of the types of jobs that she has had in the past involving heavy

physical labour due to the injuries sustained in the accident. She anticipates that she will continue to be off work 1 – 1 ½ days per month in the future.

[103] Under this head of damages, the burden is on Ms. Elliott to prove that there is a real and substantial possibility of income loss in the future. In other words, is there a real and substantial possibility that Ms. Elliott's ability to earn income has been impaired due to the injuries she suffered in the accident. If the answer to that question is "yes," then she is entitled to be compensated for this loss. If the answer is "no", then she is not entitled to any award of damages under this head.

[104] Given that this head of damages is concerned with future losses, the assessment depends on two hypotheticals: what Ms. Elliott would have done in the future had she not been injured, and what Ms. Elliott will do in the future given her condition resulting from the accident. If Ms. Elliott's injuries from the accident prevent her from earning as much as she could before the accident, she is entitled to compensation for the value of the amount by which you think her earning capacity has been reduced.

[105] When assessing the amount of this loss, you should take into account the contingencies of life. For example, in the future, Ms. Elliott might acquire some other illness or disability unrelated to her present complaints that will keep her from working. On the other hand, had the accident not occurred, she might have found full time work that particularly suited her interests and abilities. All of these contingencies, both positive and negative, should factor into your assessment.

[106] There are two approaches that can be used to quantify an award for loss of future earning capacity: (1) the capital asset approach and (2) the earnings approach. Each is a distinct approach and both are correct. You should use one or the other and not both. The most important question is whether, in all the circumstances, the award is fair and adequate. If you are satisfied that Ms. Elliott has shown a real and substantial possibility of a future income loss, then she is entitled to an amount that compensates her fairly for that loss.

[107] I will deal with each approach in turn.

[108] The capital asset approach, which may be more useful when the loss is not as easily measurable, assumes that Ms. Elliott has demonstrated a real and substantial possibility that she has lost a capital asset (a diminished capacity to earn income) for which compensation should be paid. For this approach, some of the considerations that should be taken into account in assessing an appropriate amount of compensation include the following:

- a) whether the plaintiff has been rendered less capable overall from earning income from all types of employment;
- b) whether the plaintiff is less marketable or attractive as an employee to potential employers;
- c) whether the plaintiff has lost the ability to take advantage of all job opportunities which might otherwise have been open to her, had she not been injured; and
- d) whether the plaintiff is less valuable to herself as a person capable of earning income in a competitive labour market.

[109] In cases in which courts have awarded damages based on the capital asset approach, they have often awarded the equivalent of one or more years of the plaintiff's past earnings to compensate for the diminished earning capacity.

[110] The other approach for quantifying an award for loss of future earning capacity is the earnings approach. It may be preferable where there is a demonstrated pecuniary loss that is more easily measurable. The amount of compensation is quantified by using the present value of the amount by which you think the plaintiff's earning capacity has been reduced over her working life, in other words, the difference between what she would have earned had the accident not occurred and what she is now likely to earn as a result of the injuries sustained in the accident.

[111] Whichever approach is used, you should keep in mind that the quantification of damages for loss of future earning capacity is not intended to be a mathematical calculation but rather an assessment based on all of the evidence.

[112] Ms. Elliott submits that the injuries sustained in the accident have foreclosed on her ability to do jobs that require lifting or more physical work, including operating the daycare once planned. While she acknowledges that she has found other employment since the accident, she submits that her “capital asset” has been diminished and she seeks an award equivalent to her anticipated missed work days.

[113] The defendants submit that Ms. Elliott has not proved she will suffer a future loss of income. They submit that her income earned after the accident has been as much or more than what she earned prior to the accident, and that there has been no change in her employment pattern. They submit further that Ms. Elliott has not established any loss resulting from the injuries sustained in the accident.

[114] Again that is for you to decide.

#### **Cost of Future Care**

[115] The cost of future care is a pecuniary loss for which Ms. Elliott should be compensated, if the loss is proven. Therefore, to the extent within reason that money can be used to sustain the mental and physical health of Ms. Elliott, she is entitled to it as part of the award.

[116] The costs of future care being pursued by Ms. Elliott are her costs of physiotherapy and medications.

[117] In terms of ongoing treatment recommendations and requirements, there is evidence from Ms. Elliott and Dr. Waseem that she will need further physiotherapy, approximately four to six times per year, for pain management and the use of over-the-counter analgesics as per her current regimen for pain management. If you find that there is a real possibility that this will occur, you should award Ms. Elliott a

reasonable amount to compensate her for future physiotherapy expenses and over-the-counter medications.

[118] The amount you award should be fair and adequate and there must be an evidentiary link between each item or treatment sought and the disability or pain suffered by Ms. Elliott.

[119] You are required to predict what will happen in the future in order to make an award for future care, and must therefore apply the method of proof I described to you for determining future possibilities.

[120] If you conclude there is no substantial possibility that Ms. Elliott will require future care as a result of the accident, you should award nothing for this head of damages.

[121] In reaching your conclusion you must remember that neither Ms. Elliott nor the defendants can come back to court again after this action is over, and that your award must be reasonable and fair to both sides.

### **Special Damages**

[122] Special damages are the actual expenses of the plaintiff as a result of the injury or loss up to the date of trial.

[123] Ms. Elliott and the defendants have agreed that if you find Ms. Elliott's injuries resulted from the defendants' negligence, the expenses set out were appropriate and have been reasonably incurred. These expenses total \$3,885.54.

### **Loss of capacity – housekeeping**

[124] In this case, Ms. Elliott alleges she has experienced a loss of capacity to perform household chores into the future. There is also some evidence from Dr. Masri (at Tab 2, page 10, para. 6) that Ms. Elliott has a slight impairment in terms of housework and yardwork and may require assistance in the future. If you find that Ms. Elliott has suffered this loss, you should compensate her for this lost capacity

whether or not she will actually incur costs to replace this lost capacity. However, such awards are to be made conservatively and with caution.

#### **XI. ANSWERING QUESTIONS**

[125] You have appended to your jury instructions a sheet of paper entitled "Questions for the Jury". On this Question Sheet you are asked to answer certain questions so that your verdict may be translated into a judgment. I will outline your respective duties for the answers to each of the questions.

**Question 1: Having admitted fault for the motor vehicle accident of November 8, 2012, did the defendants cause or contribute to the damage suffered by Ms. Elliott?**

[126] Liability having been admitted, if you determine that the defendants' breach caused or contributed to the injuries alleged by Ms. Elliott, you must answer this question "Yes".

**Question 2: If the answer to Question 1 is Yes, at what amount if any do you assess the damages sustained by Ms. Elliott in the following categories:**

- a) Non-Pecuniary Loss: Pain, injury, physical and mental suffering, and loss of the enjoyment of life from November 8, 2012 for as long as her injuries persist.
- b) Pecuniary Loss:
  - i. Past loss of income (from November 8, 2012 to today)
  - ii. Loss of future earning capacity
  - iii. Cost of future care
  - iv. Special damages
- c) Loss of capacity – housekeeping.



[127] Question 2 asks you to set out your assessment of the damages under each of the applicable heads.

### **Totalling the Damages**

[128] Your last responsibility will be to add up all the amounts that you have chosen to award Ms. Elliott for the damages she allegedly suffered and place this figure in the space on the Question Sheet marked "Total".

### **Signing the Question Sheet**

[129] Your foreperson should then sign the Question Sheet in the space provided and date it. Once this is done, you can inform the sheriff that you are ready to return to the courtroom and deliver your verdict. Upon your return you will be asked to read out the answers to the questions and the Question Sheet will then be filed as an exhibit in these proceedings.

## **XII. DUTY TO DELIBERATE TOGETHER**

### **Introduction**

[130] It is your duty to consult with one another and to reach a just verdict according to the law and the evidence. In doing so, you must be true to your oath, try the case upon the evidence, and disregard any outside influence or prejudices you may have.

### **Responsibility of the Foreperson**

[131] Your foreperson will naturally preside and assist you in the orderly discussion of the issues. Each of you should have the opportunity of expressing your own points of view without being unnecessarily repetitive.

### **Procedure**

[132] When you are discussing the issues you should, of course, listen attentively to the arguments of your fellow jurors. Approach your duties in a rational way and put forward your own points of view in a calm and reasonable manner. Each of you must make your own decision whether Ms. Elliott is entitled to succeed on the

various issues and to what extent. You should do so only after consideration of the evidence with your fellow jurors, and you should not hesitate to change your mind when you are convinced that you are wrong.

### **Discussing the Evidence and the Law**

[133] There is no fixed routine you must follow in arriving at your verdict. Here are some suggestions:

- a) First, review the evidence. List the particular pieces of evidence next to the applicable element or ingredient of the claim or the defence.
- b) Second, determine the facts you find from that evidence. List those facts.
- c) Third, apply the law that I gave you to those facts and decide whether Ms. Elliott or the defendants should succeed in whole or in part.

### **Voting**

[134] You may take a vote at any time. However, if you spend a reasonable amount of time considering the evidence and the law and listening to each other's opinions, you will probably feel more confident and satisfied with your eventual verdict than if you rush things. You may vote by raising your hand, by a written ballot, or by a voice ballot. If you cannot reach a verdict after trying many times to do so, ask me for advice on how to proceed.

### **Unanimity**

[135] The law requires me to tell you that at this time, you must be unanimous in any verdict you see fit to return. A majority verdict is insufficient.

[136] Following delivery of the verdict by your foreperson in this courtroom, the registrar will ask you to stand and confirm that you are unanimous in your verdict.

[137] In unusual circumstances, counsel for either side may then ask that you be polled individually. If I agree with this request, each of you will then be called by your

name or number and asked to stand one after the other in order to confirm the verdict reported by your foreperson.

### **Summary**

[138] Members of the jury, you heard the helpful comments of counsel for Ms. Elliott and counsel for the defendants with respect to the evidence. As I told you earlier in my charge, it is your memory of the evidence that counts.

## **XIII. FURTHER INSTRUCTIONS ON THE LAW**

### **Introduction**

[139] In a few minutes you may retire to the jury room. However, do not commence your deliberations until the sheriff tells you to begin. As soon as you leave the courtroom I must ask both counsel if they have any submissions to make with respect to my charge on the law.

### **Altering or Qualifying Instructions**

[140] It may be that either or both of them will want me to give you some additional instructions or to alter or qualify what I have already said. If I agree, I will ask you to return to the courtroom for this purpose. Otherwise, I will tell the sheriff to inform you that you may begin your deliberations.

### **Additional Explanations of the Law**

[141] If at any time after you begin to deliberate you should encounter difficulty with respect to the law, just give a note to the sheriff. He will then deliver it to me. After that we will reassemble the court and I will try to help you out by answering your questions.

## **XIV. FURTHER INSTRUCTIONS ON THE EVIDENCE**

[142] The evidence in this trial was recorded by the registrar. However, there is no typewritten transcript available. If there is any conflict among you as to what was said by a witness, the only safe way to resolve it is to have the registrar play the evidence back to you.

[143] Should this conflict arise, just hand a note to the sheriff setting out the testimony you want to have played back. She will pass it on to me. We will then reassemble the court for the purpose of playing back the evidence.

[144] Because it is dangerous to select only a portion of the evidence of the testimony of a witness, the usual practice is to play back all of the testimony of a specific witness, including the direct examination, the cross-examination, and any re-examination. In saying this I do not want to discourage you from any request that evidence be played back; however, it can be a time-consuming chore for everyone. In most cases, your verdict will more likely be founded upon a consideration of all the evidence rather than by concentrating on one solitary piece of evidence.

[145] When you retire to the jury room, you may take with you copies of the documents marked as Exhibits in this action which you may reference as you wish. You should also take the binder I have given you this morning.

**XV. RETIREMENT**

[146] You may now retire to consider your verdict.