



Quinte Manufacturers Association

August 14, 2017

Ms. Kirsten Walli
Board Secretary
Ontario Energy Board
2300 Yonge Street, Suite 2700
Toronto, Ontario M4P 1E4

Dear Ms. Walli:

Re: EB-2016-0152 Ontario Power Generation Payment Amounts Proceeding – Quinte Manufacturers Association Cost Claim

Pursuant to the Board's Procedural Order No. 9 dated July 11, 2017 in the above-noted proceeding, please find the cost claim of the Quinte Manufacturers Association (the "QMA" or "Association") in this matter.

The QMA is an unfunded industry collaborative that provides a forum for members to discuss issues and matters of common concern dealing with increasing costs of electricity generation, supply and service. The work of the QMA represents the specific interests of its members and is led by a volunteer steering committee with members drawn from local manufacturers.

The Association appreciated the opportunity to participate in the OPG Payment Amounts proceeding, work with other intervenors, clarify issues, and make its submissions. The Association believes and submits that it acted in a responsible manner during the hearing and requests 100% of its reasonably incurred costs. I would ask that the cost claim payment be made directly to GH Günter Huettlin Manufacturing Inc. on behalf of the QMA.

Sincerely,

René Veillette
Chair, QMA Steering Committee
c/o Hanon Systems
360 University Avenue
Belleville, Ontario K8N 5T6

(office) 613-969-1460
(e-mail) rveillet@hanonsystems.com

c.c. Regulatory Affairs, OPG (via e-mail)



COST CLAIM FOR HEARINGS

Affidavit and Summary of Fees and Disbursements

This form should be used by a party to a hearing before the Board to identify the fees and disbursements that form the party's cost claim. Paper and electronic copies of this form and itemized receipts must be filed with the Board and served on one or more other parties as directed by the Board in the applicable Board order. Please ensure all required (yellow-shaded) fields are filled in and the Affidavit portion is signed and sworn or affirmed.

Instructions

- Required data input is indicated by yellow-shaded fields. Formulas are embedded in the form to assist with calculations.
- All claims must be in Canadian dollars. If applicable, state exchange rate and country of initial currency.
Rate: _____ Country: _____
- A separate "Detail of Fees and Disbursements Being Claimed" (comprising a "Statement of Fees Being Claimed" and a "Statement of Disbursements Being Claimed") is required for each lawyer, analyst/consultant and articling student/paralegal. However, only one "Summary of Fees and Disbursements" covering the whole of the party's cost claim should be provided.
- The cost claim must be supported by a completed Affidavit signed by a representative of the party.
- A CV for each consultant/analyst must be attached unless provided to the Board as prescribed on the Cost Award Tariff.

Except as provided in section 7.03 of the Practice Direction on Cost Awards, itemized receipts must be provided.

File # EB-	2016 - 0152	Process:	OPG - 2017-2021 Payment Amounts
Party:	Quinte Manufacturers Association	Affiant's Name:	Michael D. McLeod
HST Number:	n/a	HST Rate Ontario:	13.00%
	<input type="checkbox"/> Full Registrant <input checked="" type="checkbox"/> Unregistered <input type="checkbox"/> Other	<input type="checkbox"/> Qualifying Non-Profit <input type="checkbox"/> Tax Exempt	

Affidavit

I, Michael D. McLeod, of the City/Town of Belleville, swear or affirm that:

1. I am a representative of the above-noted party (the "Party") and as such have knowledge of the matters attested to herein.
2. I have examined all of the documentation in support of this cost claim, including the attached "Summary of Fees and Disbursements Being Claimed", "Statement(s) of Fees Being Claimed" and "Statement(s) of Disbursements Being Claimed".
3. The attached "Summary of Fees and Disbursements Being Claimed", "Statement(s) of Fees Being Claimed" and "Statement(s) of Disbursements Being Claimed" include only costs incurred and time spent directly for the purposes of the Party's participation in the Ontario Energy Board process referred to above.
4. This cost claim does not include any costs for work done, or time spent, by a person that is an employee or officer of the Party as described in sections 6.05 and 6.09 of the Board's Practice Direction on Cost Awards.

Michael D. McLeod
Signature of Affiant

Sworn or affirmed before me at the City/Town of Belleville,
in the Province/State of Ontario, on August 14, 2017,
(date)

Commissioner for taking Affidavits MARGARET WESSON



Ontario Energy Board
COST CLAIM FOR HEARINGS
Affidavit and Summary of Fees and Disbursements

File # EB- 2016 - 0152

Process: OPG - 2017-2021 Payment Amounts

Party: Quinte Manufacturers Association

Summary of Fees and Disbursements Being Claimed	
Legal/consultant/other fees	\$ 19,857.50
Disbursements	\$ 1,539.64
HST	\$ 2,781.63
Total Cost Claim	\$ 24,178.77

Payment Information

Make cheque payable to: GH Gunther Huettlin Manufacturing Inc.

Send payment to this address:

Attn: Ms. K. Egan, EVP & CFO

101 Petrie Place

Belleville, Ontario

K8N 4Z6

Ontario Energy Board

COST CLAIM FOR HEARINGS



Detail of Fees and Disbursements Being Claimed

File # EB- <u>2016 - 0152</u>	Process: <u>OPG - 2017-2021 Payment Amounts</u>
Party: <u>Quinte Manufacturers Association</u>	Service Provider Name: <u>Michael D. McLeod</u>

SERVICE PROVIDER TYPE (check one)	Year Called to Bar	Completed Years Practising/Years of Relevant Experience
Legal Counsel <input type="checkbox"/>	<input style="width: 100px;" type="text"/>	<input style="width: 100px;" type="text"/> 35
Articling Student/Paralegal <input type="checkbox"/>		
Consultant <input checked="" type="checkbox"/>		
Analyst <input type="checkbox"/>		
For Consultant/Analyst: <input checked="" type="checkbox"/> CV attached		Hourly Rate: <input style="width: 100px;" type="text"/> \$130
<input type="checkbox"/> CV provided within previous 24 months		HST Rate Charged (enter %): <input style="width: 100px;" type="text"/> 13.0%

Statement of Fees Being Claimed					
	Hours	Hourly Rate	Subtotal	HST	Total
Pre-hearing Conference					
Preparation	3.25	\$ 130.00	\$ 422.50	\$ 54.93	\$ 477.43
Attendance	2.00	\$ 130.00	\$ 260.00	\$ 33.80	\$ 293.80
Technical Conference					
Preparation	8.50	\$ 130.00	\$ 1,105.00	\$ 143.65	\$ 1,248.65
Attendance	14.50	\$ 130.00	\$ 1,885.00	\$ 245.05	\$ 2,130.05
Interrogatories					
Preparation	10.25	\$ 130.00	\$ 1,332.50	\$ 173.23	\$ 1,505.73
Responses	2.50	\$ 130.00	\$ 325.00	\$ 42.25	\$ 367.25
Issues Conference					
Preparation		\$ 130.00	\$ -	\$ -	\$ -
Attendance		\$ 130.00	\$ -	\$ -	\$ -
ADR - Settlement Conference					
Preparation	2.00	\$ 130.00	\$ 260.00	\$ 33.80	\$ 293.80
Attendance	9.00	\$ 130.00	\$ 1,170.00	\$ 152.10	\$ 1,322.10
Proposal Preparation	1.50	\$ 130.00	\$ 195.00	\$ 25.35	\$ 220.35
Argument					
Preparation	22.00	\$ 130.00	\$ 2,860.00	\$ 371.80	\$ 3,231.80
Oral Hearing					
Preparation	25.25	\$ 130.00	\$ 3,282.50	\$ 426.73	\$ 3,709.23
Attendance	52.00	\$ 130.00	\$ 6,760.00	\$ 878.80	\$ 7,638.80
Other Conferences					
Preparation		\$ 130.00	\$ -	\$ -	\$ -
Attendance		\$ 130.00	\$ -	\$ -	\$ -
Case Management		\$ 170.00	\$ -	\$ -	\$ -
TOTAL SERVICE PROVIDER FEES			\$ 19,857.50	\$ 2,581.48	\$ 22,438.98

Ontario Energy Board

COST CLAIM FOR HEARINGS



Detail of Fees and Disbursements Being Claimed

File # EB- 2016 - 0152

Process: OPG - 2017-2021 Payment Amounts

Party: Quinte Manufacturers Associati

Service Provider Name: Michael D. McLeod

Statement of Disbursements Being Claimed				
		Net Cost	HST	Total
Scanning/Photocopy			\$ -	\$ -
Printing			\$ -	\$ -
Courier		\$ 27.30	\$ 3.55	\$ 30.85
Telephone/Fax			\$ -	\$ -
Transcripts			\$ -	\$ -
Travel: Air			\$ -	\$ -
Travel: Car		\$ 1,324.80	\$ 172.22	\$ 1,497.02
Travel: Rail			\$ -	\$ -
Travel (Other):	407 ETR	\$ 116.74	\$ 15.18	\$ 131.92
Parking		\$ 70.80	\$ 9.20	\$ 80.00
Taxi			\$ -	\$ -
Accommodation			\$ -	\$ -
Meals			\$ -	\$ -
Other:			\$ -	\$ -
Other:			\$ -	\$ -
Other:			\$ -	\$ -
TOTAL DISBURSEMENTS:		\$ 1,539.64	\$ 200.15	\$ 1,739.79

Customer Receipt / Réçu du client

Order number / N° de commande: PG 388 420 839 CA
 Date of purchase / Date d'achat: 2017 05 30

Customer name / Nom du client: H. McLeod
 Address / Adresse: 1838 County Road 3
 City / Ville: Carleton Place
 Postal Code / Code postal: K7C 1L0

Destination / Destinataire: Hs-K Wille
 Address / Adresse: 3300 Yvette St x 27th Floor
 City / Ville: Toronto
 Postal Code / Code postal: M4P 1E4

Signature / Signature: [Signature]

Canada Post / Postes Canada

5529 HWY 62 S
 ROSSSHORE STOP
 BELLEVILLE K8N4Z0
 GST/TPS#: 820261071

2017/05/30 12:05:32
 CC/CC102168 W/G1
 OAH 13% 10\$13.65
 XP Reg Ltr- IMAGE

SUBTL \$13.65
 HST \$1.77
 TOTAL \$15.42

Debit Card
 Card Number *****8507
 CHQ, DUE \$0.00
 RND, CHG. \$0.00

Receipt required for all returns.

Complete the survey at
 canadapost.iposinteractive.com
 and enter to WIN one of two
 \$250 Prepaid Visa Cards.

Te! us how we did today.

Barcode: R: 2 3 5 3 6 7 . 1 0 2 1 6 8 :

WWW.CANADAPOST.CA / WWW.POSTESCANADA.CA

Customer Receipt / Réçu du client

Order number / N° de commande: PG 422 094 480 CA
 Date of purchase / Date d'achat: 2017 06 12

Customer name / Nom du client: Michael McLeod
 Address / Adresse: 1938 County Road 3
 City / Ville: Carleton Place
 Postal Code / Code postal: K7C 1L0

Destination / Destinataire: Mr. K. Wille
 Address / Adresse: 3300 Yvette St x 27th Floor
 City / Ville: Toronto
 Postal Code / Code postal: M4P 1E4

Signature / Signature: [Signature]

Canada Post / Postes Canada

97 MAIN ST W
 PICTON K0K0A0
 GST/TPS#: 104175419

2017/06/12 12:54:14
 CC/CC104165 W/G1
 CHAELNE 1K292547
 OAH 13% 10\$13.65
 XP Reg Ltr- IMAGE

SUBTL \$8.50
 HST \$1.77
 TOTAL \$10.27

Debit Card
 Card Number *****8507
 CHQ, DUE \$0.00
 RND, CHG. \$0.00

Receipt required for all returns.

Complete the survey at
 canadapost.iposinteractive.com
 and enter to WIN one of two
 \$250 Prepaid Visa Cards.

Te! us how we did today.

Barcode: R: 2 3 5 3 6 7 . 1 0 2 1 6 8 :

WWW.CANADAPOST.CA / WWW.POSTESCANADA.CA

Balance from your last bill

Total due on your last bill

Total balance from your last bill

This month's charges

407 est

Total charges

Trip toll charges (\$ @ \$1.00 per trip)

Camera charges (\$ @ \$4.05 per trip)

Account fee

Total charges this month

Total Amount Due

Summary of trips billed this month

TRANSPORTATION PLATE #	DATE OR LICENSE	TRIP CHARGES	2 OF CAMERA	DISTANCE (KM)	TOTAL CHARGES (\$)
BCWT101	1	1	2	29.0	10.65
BCWT101	1	1	2	12.5	3.25
					13.90

Your trip details

DATE OR TRIP	TIME YOU ENTERED	TIME YOU EXITED	TOLL CHARGES (\$)

TRIPS RECORDED BY CAMERA

DATE	TIME YOU ENTERED	TIME YOU EXITED	TOLL CHARGES (\$)
09 Jan 17	5:08 PM	Bayview-North	14.502 0.3738 5.42
11 Jan 17	7:19 AM	North-Bayview	14.502 0.3607 5.23

LICENCE PLATE BCWT101

Light vehicle

Total for all trips

LICENCE PLATE BRTE056

Light vehicle

Total for all trips

26 Dec 16 2:55 PM North-Black

12.5km

3.25

\$3.25

