

**Ontario Energy Board**  
**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.**

<b>File # EB-</b>	<b>2017-0049</b>	<b>Process:</b>	<b>HONI 2018-2022 Distribution Custom IR Application</b>
<b>Party:</b>	<b>Quinte Manufacturers Association</b>	<b>Affiant's Name:</b>	<b>Michael McLeod</b>
<b>HST Number:</b>	<b>893039321 RT0001</b>	<b>HST Rate Ontario:</b>	<b>13.00%</b>
	Full Registrant <input checked="" type="checkbox"/>	Qualifying Non-Profit	<input type="checkbox"/>
	Unregistered <input type="checkbox"/>	Tax Exempt	<input type="checkbox"/>
	Other <input type="checkbox"/>		

**Affidavit**

I, **Michael McLeod**, of the City/Town of **Carrying Place**  
in the Province/State of **Ontario**, 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.

**Signature of Affiant**

**Sworn or affirmed before me** at the City/Town of **Belleville**,  
in the Province/State of **Ontario**, on **June 12, 2019**.  
(date)

**Commissioner for taking Affidavits**

**Ontario Energy Board  
COST CLAIM FOR HEARINGS**



**Affidavit and Summary of Fees and Disbursements**

File # EB- 2017-0049 Process: HONI 2018-2022 Distribution Custom IR Application

Party: Quinte Manufacturers Association

**Summary of Fees and Disbursements Being Claimed**

Legal/consultant/other fees	\$	20,857.50
Disbursements	\$	-
HST	\$	2,711.48
<b>Total Cost Claim</b>	<b>\$</b>	<b>23,568.98</b>

**Payment Information**

Make cheque payable to: GH Gunther Huettlin Manufacturing Inc.

Send payment to this address: Ms. K. Egan, EVP & CEO  
101 Petrie Place  
Belleville, Ontario K8N 5T3

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COST CLAIM FOR HEARINGS**



**Detail of Fees and Disbursements Being Claimed**

<b>File # EB-</b> <u>2017-0049</u>	<b>Process:</b> <u>HONI 2018-2022 Distribution Custom IR Application</u>
<b>Party:</b> <u>Quinte Manufacturers Association</u>	<b>Service Provider Name:</b> <u>Michael McLeod</u>
<b>SERVICE PROVIDER TYPE</b> (check one)	<b>Year Called to Bar</b>
<b>Legal Counsel</b> <input type="checkbox"/>	<input type="text" value=""/>
<b>Articling Student/Paralegal</b> <input type="checkbox"/>	<input type="text" value=""/>
<b>Consultant</b> <input checked="" type="checkbox"/>	<b>Completed Years Practising/Years of Relevant Experience</b>
<b>Analyst</b> <input type="checkbox"/>	<input type="text" value="36"/>
<b>For Consultant/Analyst:</b> <input type="checkbox"/> CV attached	<b>Hourly Rate:</b> <input type="text" value="\$135"/>
<input checked="" type="checkbox"/> CV provided within previous 24 months	<b>HST Rate Charged (enter %):</b> <input type="text" value="13.0%"/>

Statement of Fees Being Claimed					
	Hours	Hourly Rate	Subtotal	HST	Total
<b>Pre-hearing Conference</b>					
Preparation		\$ 135.00	\$ -	\$ -	\$ -
Attendance		\$ 135.00	\$ -	\$ -	\$ -
<b>Technical Conference</b>					
Preparation	50.00	\$ 135.00	\$ 6,750.00	\$ 877.50	\$ 7,627.50
Attendance	8.25	\$ 135.00	\$ 1,113.75	\$ 144.79	\$ 1,258.54
<b>Interrogatories</b>					
Preparation	21.00	\$ 135.00	\$ 2,835.00	\$ 368.55	\$ 3,203.55
Responses	2.75	\$ 135.00	\$ 371.25	\$ 48.26	\$ 419.51
<b>Issues Conference</b>					
Preparation		\$ 135.00	\$ -	\$ -	\$ -
Attendance		\$ 135.00	\$ -	\$ -	\$ -
<b>ADR - Settlement Conference</b>					
Preparation		\$ 135.00	\$ -	\$ -	\$ -
Attendance		\$ 135.00	\$ -	\$ -	\$ -
Proposal Preparation		\$ 135.00	\$ -	\$ -	\$ -
<b>Argument</b>					
Preparation	12.00	\$ 135.00	\$ 1,620.00	\$ 210.60	\$ 1,830.60
<b>Oral Hearing</b>					
Preparation	9.75	\$ 135.00	\$ 1,316.25	\$ 171.11	\$ 1,487.36
Attendance	50.75	\$ 135.00	\$ 6,851.25	\$ 890.66	\$ 7,741.91
<b>Other Conferences</b>					
Preparation		\$ 135.00	\$ -	\$ -	\$ -
Attendance		\$ 135.00	\$ -	\$ -	\$ -
<b>Case Management</b>			\$ -	\$ -	\$ -
<b>TOTAL SERVICE PROVIDER FEES</b>			\$ 20,857.50	\$ 2,711.48	\$ 23,568.98

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COST CLAIM FOR HEARINGS**



**Detail of Fees and Disbursements Being Claimed**

File # EB- 2017-0049

Process: HONI 2018-2022 Distribution Custom IR Application

Party: Quinte Manufacturers Associati

Service Provider Name: Michael McLeod

Statement of Disbursements Being Claimed				
		Net Cost	HST	Total
Scanning/Photocopy			\$ -	\$ -
Printing			\$ -	\$ -
Courier			\$ -	\$ -
Telephone/Fax			\$ -	\$ -
Transcripts			\$ -	\$ -
Travel: Air			\$ -	\$ -
Travel: Car			\$ -	\$ -
Travel: Rail			\$ -	\$ -
Travel (Other):			\$ -	\$ -
Parking			\$ -	\$ -
Taxi			\$ -	\$ -
Accommodation			\$ -	\$ -
Meals			\$ -	\$ -
Other:			\$ -	\$ -
Other:			\$ -	\$ -
Other:			\$ -	\$ -
<b>TOTAL DISBURSEMENTS:</b>		\$ -	\$ -	\$ -