

CANADA

(Class Action)
SUPERIOR COURT

PROVINCE OF QUEBEC
DISTRICT OF MONTRÉAL
No : 500-06-000406-070

ASSOCIATION POUR LA DÉFENSE DES DROITS
DES DÉFUNTS ET FAMILLES (ADDDF) DU
CIMETIÈRE NOTRE-DAME-DES-NEIGES et ALS.

(Collectively, "the Plaintiffs")

v.

LA FABRIQUE DE LA PAROISSE NOTRE-DAME DE
MONTRÉAL;

The Defendant

**AFFIDAVIT IN SUPPORT OF A REQUEST FOR THE REIMBURSEMENT OF
EXPENSES**

(For the purpose of the execution of the compensatory measures set out in the Transaction)
Reimbursement limited to \$400.00 per concession

I, _____

(First name, surname, address, profession) solemnly declare the following:

1. I declare being a member of the group targeted by the rectified judgment on authorisation dated October 8, 2009 by the Honourable Sophie Picard, J.C.S.
2. I am a right holder and/or beneficiary and/or resource person identified in the concession contract targeting lot _____ conceded to Cimetière Notre-Dame-des-Neiges.
3. This lot is identified in annex **C** of the Transaction entered into by the parties on _____ (hereinafter the « Lot »).
4. The interment of the decedent _____ which ought to have been carried out between May 16 and September 10, 2007 on the Lot was prevented from taking place on account of the interruption of interment services during this period.
5. The following expenses were incurred on account of the interruption of interment services: (Check)

a)	<input type="checkbox"/>	<u>Additional displacement fees:</u> (Ex : air, rail or road transport)
b)	<input type="checkbox"/>	<u>Additional accommodation fees :</u>

c)	<input type="checkbox"/> <u>Additional ceremony fees:</u> (Ex : mass, religious service or liturgy)
d)	<input type="checkbox"/> <u>Additional accessory fees:</u> (Ex : buffet, venue rental and flowers)
e)	<input type="checkbox"/> <u>Additional funerary fees :</u> (Ex : cadaver storage fees and coffin rental fees)
f)	<input type="checkbox"/> <u>Medical fees :</u> (Ex : fees for medical and/or psychological follow-up occasioned by the prolongation of the bereavement)
g)	<input type="checkbox"/> <u>Other costs :</u> (costs incurred between May 16 and September 10, 2007 not identified in sub-sections 5 a) to 5 f)). <u>Nature of these costs :</u>

6. The total amount of the expenses identified in paragraph 5 is _____ \$.

7. Supporting documents : (check)

a) I possess one or more supporting documents which I have joined to the present affidavit establishing, in whole or in part, the amount of the expenses claimed.

or

b) I have no supporting documents establishing the amount of the expenses claimed.

8. I attest that, to the best of my knowledge, the nature and the amount of the additional expenses incurred, described above, are accurate.

9. All the facts alleged in the present affidavit are true.

Solemnly declared before me, at

And I have signed :

This ____ day of _____ 2015

Commission for Oaths

Name of the member