



## INSTRUCTION LETTER FOR CLAIMANTS

The Library Services Center Inc. (the “LSC”) passed a resolution to voluntarily windup pursuant to the *Not-for-Profit Corporations Act* (the “Act”). Further, on December 18, 2023, BDO Canada Limited (“BDO”) was appointed as liquidator (in such capacity, the “Liquidator”) pursuant to subsection 123(2) of the Act for the purpose of winding up the LSC’s activities and affairs as set out in the Act.

This letter provides general instructions for the completion and submission of a proof of claim (“Claim”), which is included herein. If you believe that you have a Claim against the LSC, please submit a Claim to the Liquidator.

All Claim submissions and inquiries with respect to the LSC should be directed to the Liquidator by prepaid registered mail, courier, personal delivery or electronic mail to the address below:

BDO Canada Limited  
Liquidator of Library Services Center Inc.  
20 Wellington East, Suite 500  
Toronto, Ontario M5E 1C5  
Attention: Antoinette Fielding  
Telephone: 416-865-0210  
Email: [afielding@bdo.ca](mailto:afielding@bdo.ca)

With all Claim submissions please be sure to supply adequate supporting documentation to evidence your Claim. The Liquidator may require that further details to evidence your Claim be provided upon request of the Liquidator.

Should a Claim not be filed and received by the Liquidator on or before 5:00 p.m. (Eastern Standard Time) on June 10, 2024, the Claim will not be considered for distribution purposes.



## PROOF OF CLAIM FORM

(See second page for instructions to complete.)

IN THE MATTER OF THE LIQUIDATION OF:

**LIBRARY SERVICES CENTRE INC.** (referred to in this form as "the debtor"),

and the claim of \_\_\_\_\_ (referred to in this form as "the creditor").  
(name of creditor)

**All notices or correspondence regarding this claim must be forwarded to the creditor to the following address:**

Telephone:

Fax :

Email :

I, \_\_\_\_\_ of \_\_\_\_\_  
(name of creditor or representative of the creditor) (City and Province)

DO HEREBY CERTIFY THAT:

- I am a creditor of the above-named debtor, or  
 I am \_\_\_\_\_ of the creditor.  
 (state position or title related to creditor)

2. I have knowledge of all the circumstances connected with the claim referred to below.

3. **Proof of Claim:**

The debtor was, at the date of the Liquidation, namely **December 18, 2023**, and still is, indebted to the creditor in the sum of \$ \_\_\_\_\_ as specified in the attached supporting documentation, after deducting any counterclaims to which the debtor is entitled.

4. **Particulars of Claim(s)**

The Liquidator recognizes three categories of Claims, namely, Trust Claims, Secured Claims and Unsecured Claims. If applicable to your Claim(s) you may file in any or all of these categories.

**4A.1 Trust Claim:**

- The amount claimed for Delivery/ provision of goods and/or services to, or at the request of the Debtor.

\$ \_\_\_\_\_

- Description of goods and/ or services provided:

\_\_\_\_\_

- Date(s) of the delivery/ provision of goods and/or services:

\_\_\_\_\_

**4A.2 Trust Claim that does not relate to the provision of goods and/or services.**

- Description of contract, agreement or enabling legislation (provincial or federal) which constitutes a trust or deemed trust.

\$ \_\_\_\_\_

**4C Secured Claim \$ \_\_\_\_\_.**

- The security claimed is evaluated to be \$ \_\_\_\_\_.

Note: (This will be the amount at which you value the secured claim. The difference between the secured claim amount and the value of your security, if any, will be added to the amount of your unsecured claim).

- Date(s) of the delivery/ provision of goods and/or services:

\_\_\_\_\_

**4C Unsecured Claim \$\_\_\_\_\_.**

1. Description of goods and/ or services provided:

\_\_\_\_\_

2. Date(s) of the delivery/ provision of goods and/or services:

\_\_\_\_\_

Dated at \_\_\_\_\_, this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Witness

\_\_\_\_\_  
Signature of Creditor

Phone Number: \_\_\_\_\_

Fax Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

**Note:** If an affidavit is attached, it must have been made before a person qualified to take affidavits or solemn declarations.

**INSTRUCTIONS FOR COMPLETING PROOF OF CLAIM FORMS**

Every creditor who does not prove his claim is not entitled to share in any distribution. Claims not completed correctly in every respect will be returned. In completing the proof of claim form (see reverse), your attention is directed to the marginal notes on the form and to the following requirements:

1. The form must be completed by an individual and not by a corporation. If you are acting for a corporation or other person, you must state the capacity in which you are acting, such as, "Credit Manager", "Treasurer", "Authorized Agent", etc.
2. The person signing the form must have knowledge of the circumstances connected with the claim.
3. **A Statement of Account containing details of the claim must be attached and marked "A".**
4. The nature of the claim must be indicated by completing the section of the type of claim which applies – Sections 4A-C.
5. The person signing the form must insert the place and date, and the signature must be witnessed.