Hearing File No: [insert file no.]

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**LAW SOCIETY OF BRITISH COLUMBIA TRIBUNAL**

**HEARING DIVISION**

*[Insert appropriate style of cause – e.g. for disciplinary proceedings use:]*

BETWEEN:

THE LAW SOCIETY OF BRITISH COLUMBIA

AND:

*[INSERT NAME OF RESPONDENT]*

RESPONDENT

## **CONFIRMATION OF SERVICE**

I, *[name, title/position if applicable*], confirm that the document(s) set out below and all attachments have been served as required by Practice Direction 4.1 of the Directions on Practice and Procedure before the LSBC Tribunal.

**DOCUMENT(S) SERVED:**

1.

**METHOD OF SERVICE:**

[ ]  **Hand Delivery**

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Time: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Name of person who delivered document(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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[ ]  **Regular Mail** [ ]  **Registered Mail**

Date mailed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

[ ]  **Courier**

Date sent: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Expected delivery date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of courier: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Tracking No.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Is delivery confirmed? [ ]  Y [ ]  N

[ ]  **E-mail** [ ]  **Fax**

Date sent: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Time sent: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-mail address / fax no. sent to: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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[ ]  **Uploading to File Sharing Platform and Sending Notice of Upload**

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[ ]  **Other method** agreed to by the person being served or as directed by the LSBC Tribunal

Details: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_