If you are a lawyer that does not practise civil litigation and has not completed a Restricted Area of Practice Declaration, you may exempt yourself from filling quarterly by filing this annual exemption form.

2024 Exemption from Civil Litigation Transaction Levy Surcharge Quarterly Filings

Due April 30, 2024

١.	General Information (print or type)				
	Firm number*:	(Sole practition	ners may enter their Law Society number)		
	Name of Law Firm, Association or Sole Practitioner:				
	Managing Partner, Association LAWYER or Sole Practitioner:				
	Firm contact:				
	Address:				
	Phone: Fa	ax:	Email:		
2.	practice claim exemption from payment of the tra	ansaction levy surc	EHOLDER(S) (if any), of the above firm, association or sole harge in respect of civil litigation on the grounds that the Use page 17 of this booklet to list additional LAWYERS and I.		
	Law Society #	Name			
3.	Declaration I hereby certify on behalf of all the LAWYERS and PARALEGAL PARTNER(S) OR SHAREHOLDER(S) (if any), listed on this form on on the attached schedule, that the above information is correct.				
	Date Sig	gnature of Managing Par	tner/Lawyer, LAWYER on behalf of Association, or Sole Practitioner		
A)	Copy this form.				
B)	Forward copy to: Lawyers' Professional Indemnity Company 250 Yonge Street, Suite 3101, P. O. Box 3	or fax:	416-599-8341 1-800-286-7639		
	Toronto, Ontario M5B 2L7 Attn: Finance Department	or email:	levies@lawpro.ca		

 $[\]ensuremath{^{*}}$ Firm number is the number used by your firm to e-file LAWPRO insurance forms.

Additional LAWYER and PARALEGAL PARTNER(S) OR SHAREHOLDER(S) (if any), listing

(for Civil Litigation Transaction Levy filings or Exemption)

Make additional copies of this page, as required

Law Society #	LAWYER o Name	LAWYER or PARALEGAL PARTNER OR SHAREHOLDER (if any) Name		