

## SC-26-0060 Notice of Examination - September 10, 2026



**From** Lanctot, Tina (MAG) <Tina.Lanctot@ontario.ca>

**To** Litigatex <leonard@litigatex.com>

**Date** 2026-07-09 16:41

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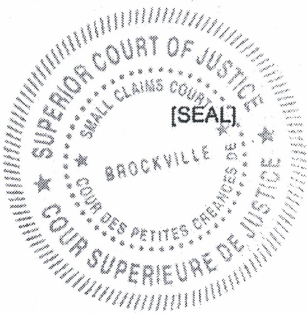
Good afternoon,

Please see attached Notice of Examination for September 10, 2026. Please serve personally on the Defendant at least 30 days prior to the date.

Once served please file the Affidavit of Service with the Court.

T. Lanctot  
Client Service Representative/Brockville Court  
County of Leeds and Grenville  
Court Services Division  
Ministry of the Attorney General  
Ontario Public Service  
613-341-2800 Ext 2268

ONTARIO  
Superior Court of Justice



BROCKVILLE  
Small Claims Court  
41 COURT HOUSE SQUARE  
BROCKVILLE, ONTARIO  
K6V 7N3  
Address  
613-341-2800  
Phone number

Notice of Examination

Form 20H Ont. Reg. No. 258/98

SC 26-0060  
SG-25-474602  
Claim No.

BETWEEN

LEONARD B

Creditor(s)

and

HELEN NADINE PHILLIPS

Debtor(s)

TO: HELEN NADINE PHILLIPS

(Name of person to be examined)

of 2 BALMORAL PLACE, UNIT 103, BROCKVILLE, ONTARIO K6V 6K1

(Address of person to be examined)

The creditor LEONARD B

(Name of creditor)

PO BOX 99900 DW 740 743 RPO  
of HAZELDEAN KANATA ON K2M 0K5

(Address of creditor)

has obtained a judgment against HELEN NADINE PHILLIPS on NOVEMBER 20,

(Name of debtor)

20 25, in the OTTAWA

(Name of court where judgment was made)

Small Claims Court.

According to the supporting affidavit filed by the creditor, the total due on the judgment is

\$ 15,698.76 . (This amount must match the total amount identified in the supporting affidavit.)  
(Total)

This total due takes into account all money received, accrued postjudgment interest and costs to

this date: DECEMBER 17, 20 25 . (This date must match the date of the supporting affidavit.)

YOU ARE REQUIRED TO ATTEND AN EXAMINATION HEARING to explain how the debtor will pay this judgment and if there are any reasons for not doing so.

Les formules des tribunaux sont affichées en anglais et en français sur le site [www.ontariocourtforms.on.ca](http://www.ontariocourtforms.on.ca). Visitez ce site pour des renseignements sur des formats accessibles.

## THIS COURT WILL HOLD AN EXAMINATION HEARING

or **SEP 10 2026** 10:00 am, or as soon as possible after that time  
(Time)☒ by videoconference☒ in personat BROCKVILLE COURTHOUSE 41 COURT HOUSE SQUARE BROCKVILLE, ONTARIO K6V 7N3

(Videoconference details or address of court location and courtroom number, as applicable)

MAR 16 2026, 20TLAUCHOT

(Signature of clerk)

**CAUTION TO  
PERSON BEING  
EXAMINED:**

If you fail to attend the examination hearing or attend and refuse to answer questions or produce documents, you may be ordered to attend a contempt hearing. At the contempt hearing, you may be found in contempt of court and the court may order you to be jailed.

**NOTE TO  
DEBTOR:**A debtor who is an individual must serve on the creditor a completed Financial Information Form (Form 20I) prior to the hearing. This form must **not** be filed with the court. The debtor must make a completed copy of this form available to the judge at the examination hearing. The debtor must also produce at the hearing documents that support the information given in this form.

For information on accessibility of court services for people with disability-related needs, contact:



Telephone: 416-326-2220 / 1-800-518-7901 TTY: 416-326-4012 / 1-877-425-0575

ONTARIO  
Superior Court of Justice

Affidavit for Enforcement Request

Form 20P Ont. Reg. No.: 258/98

SC-26-0060  
SC-25-171602

BROCKVILLE

Small Claims Court

41 COURT HOUSE SQUARE  
BROCKVILLE, ONTARIO K6V 7N3

Claim No.

Address

613-341-2800

Phone number

BETWEEN

LEONARD B

Plaintiff(s)/Creditor(s)

and / et

HELEN NADINE PHILLIPS

Defendant(s)/Debtor(s)

My name is LEONARD B

(Full name)

I live in OTTAWA, ONTARIO

(Municipality & province)

and I swear/affirm that the following is true:

1. In this action, I am the

(Check one  
box only.)

☒ plaintiff/creditor.

☐ representative of the plaintiff(s)/creditor(s).

I make this affidavit in support of a request that the clerk of the court issue the following enforcement process(es):

☐ Certificate of Judgment (Form 20A) to the clerk of the

(Name of court where the judgment is to be filed)

Small Claims Court.

☐ Writ of Seizure and Sale of Personal Property (Form 20C) directed to the bailiff of

Small Claims Court.

(Name of court location)

☐ Writ of Seizure and Sale of Land (Form 20D) directed to the sheriff of

(Name of county/region in which the  
enforcement office is located)

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formats accessibles.

☒ Notice of Garnishment (Form 20E)/Notice of Renewal of Garnishment (Form 20E.1).

I believe that the garnishee \_\_\_\_\_

(Name of garnishee)

at \_\_\_\_\_

(Address of garnishee)

is indebted to the debtor or will become indebted to the debtor for the following reasons:

The Notice will be served on the debtor HELEN NADINE PHILLIPS

(Name of debtor)

at 2 BALMORAL PLACE, UNIT 103, BROCKVILLE, ONTARIO K6V 6K1

(Address of debtor for service)

within five days of serving it on the garnishee.

☒ Notice of Examination (Form 20H).

☐ Writ of Delivery (Form 20B).

☐ Other (Set out the nature of your request):

### Complete this section if you are requesting a Writ of Delivery.

#### 2. An order for the delivery of the following personal property:

(According to the court order, set out a description of the property to be delivered. Identify any marks or serial numbers.)

was made in this action against: \_\_\_\_\_

(Name of person against whom the order was made)

on \_\_\_\_\_, 20\_\_\_\_, in the \_\_\_\_\_

(Name of court location where order was made)

Small Claims Court. Since the above listed personal property has not been delivered, I make this affidavit in support of a request that the clerk of the court issue a Writ of Delivery (Form 20B) to the bailiff of the

\_\_\_\_\_  
Small Claims Court.

(Name of court location)

Complete this section if you are requesting a Certificate of Judgment, Writ of Seizure and Sale of Personal Property, Writ of Seizure and Sale of Land, Notice of Garnishment, Notice of Renewal of Garnishment or Notice of Examination.

3. A judgment was made in this action against HELEN NADINE PHILLIPS

(Name of debtor(s))

on NOVEMBER 20, 20 25 in the OTTAWA

(Name of court where judgment was made)

Small Claims Court for the following sums:

(A) **DEBT** \$ 13,759.55

(B) **PRE-JUDGMENT INTEREST** calculated

on the sum of \$ 13,759.55 at the rate of 5.3 %

per annum from AUGUST 1, 20 24 to NOVEMBER 20, 20 25,

being 476 days.

\$ 951.02

**SUBTOTAL (Amount of Judgment)** \$ 14,710.57

(C) **COSTS** to date of judgment

\$ 800.00

(D) **TOTAL AMOUNT OF PAYMENTS RECEIVED FROM DEBTOR**  
 after judgment (if any)

(minus) \$ 0.00

(E) **POST-JUDGMENT INTEREST** to date calculated

on the sum of \$ 15,510.57 at the rate of 4 %

per annum from NOVEMBER 21, 20 25 to DECEMBER 17, 20 25,

being 26 days.

\$ 44.49

**NOTE:** Calculation of interest is always on the amount owing from time to time as payments are received. This is true for both pre-judgment and post-judgment interest. Attach a separate sheet setting out how you calculated the total amount of any pre/post-judgment interest.

(F) **SUBSEQUENT COSTS** incurred after judgment (including the cost of issuing the requested enforcement(s))

\$ 144.00

**TOTAL DUE** \$ 15,698.76

Sworn/Affirmed before me (select one): ☐ in person OR ☐ by video conference

Complete if affidavit is being sworn or affirmed in person:

at the CITY of OTTAWA, in the PROVINCE

(city, town, etc.)

(County, Regional Municipality, etc.)

of ONTARIO

, on DECEMBER 17, 2025

(date)

Signature of Commissioner (or as may be)

Signature of Deponent

Use one of the following if affidavit is being sworn or affirmed by video conference:

Complete if deponent and commissioner are in same city or town:

by \_\_\_\_\_ at the \_\_\_\_\_  
(deponent's name) (city, town, etc.)  
of \_\_\_\_\_ in the \_\_\_\_\_  
(County, Regional Municipality, etc.)  
of \_\_\_\_\_, before me on \_\_\_\_\_  
(date)

in accordance with O. Reg. 431/20, Administering Oath or Declaration Remotely. \_\_\_\_\_

Commissioner for Taking Affidavits (or as may be)

\_\_\_\_\_  
Signature of Commissioner (or as may be)

\_\_\_\_\_  
Signature of Deponent

Complete if deponent and commissioner are not in same city or town:

by \_\_\_\_\_ at the \_\_\_\_\_  
(deponent's name) (city, town, etc.)  
of \_\_\_\_\_ in the \_\_\_\_\_  
(County, Regional Municipality, etc.)  
of \_\_\_\_\_, before me at the \_\_\_\_\_  
(city, town, etc.)  
of \_\_\_\_\_ in the \_\_\_\_\_  
(County, Regional Municipality, etc.)  
of \_\_\_\_\_, on \_\_\_\_\_ in accordance  
(date)

with O. Reg. 431/20, Administering Oath or Declaration Remotely. \_\_\_\_\_

Commissioner for Taking Affidavits (or as may be)

\_\_\_\_\_  
Signature of Commissioner (or as may be)

\_\_\_\_\_  
Signature of Deponent

**WARNING: IT IS AN OFFENCE UNDER THE CRIMINAL CODE TO KNOWINGLY SWEAR OR AFFIRM A FALSE AFFIDAVIT.**

## FINANCIAL INFORMATION FORM

Form 201 Ont. Reg. No.: 258/98

This form is to be completed by the debtor and served on the creditor.

This form is not to be filed at the court office. The debtor must provide a completed copy of this form to the judge at the examination hearing. The debtor must also bring to the hearing documents that support the information given in this form.

| MONTHLY INCOME                                  |                 | MONTHLY EXPENSES                                                          |                 |
|-------------------------------------------------|-----------------|---------------------------------------------------------------------------|-----------------|
| Employer(s) _____                               |                 | Rent/Mortgage                                                             | \$ _____        |
| Employer(s) _____                               |                 | Maintenance/Support Payments                                              | \$ _____        |
| Net salary                                      | \$ _____        | Property taxes                                                            | \$ _____        |
| Commissions                                     | \$ _____        | Utilities (heat, water & light)                                           | \$ _____        |
| Tips and gratuities                             | \$ _____        | Phone                                                                     | \$ _____        |
| Employment insurance                            | \$ _____        | Cable                                                                     | \$ _____        |
| Pension income                                  | \$ _____        | House/Tenant insurance                                                    | \$ _____        |
| Investment income                               | \$ _____        | Life insurance                                                            | \$ _____        |
| Rental income                                   | \$ _____        | Food                                                                      | \$ _____        |
| Business income                                 | \$ _____        | Childcare/Babysitting                                                     | \$ _____        |
| Child tax benefit                               | \$ _____        | Motor vehicle (lease or loan)<br>(licence, insurance, fuel & maintenance) | \$ _____        |
| Maintenance (if any)                            | \$ _____        | Transportation (public)                                                   | \$ _____        |
| Monthly income of other adult household members | \$ _____        |                                                                           |                 |
| Other                                           | \$ _____        |                                                                           |                 |
| Income assistance                               | \$ _____        |                                                                           |                 |
| <b>INCOME TOTAL</b>                             | <b>\$ _____</b> | <b>EXPENSES TOTAL</b>                                                     | <b>\$ _____</b> |

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| MONTHLY DEBTS                                                    | VALUE OF ASSETS                                                    |
|------------------------------------------------------------------|--------------------------------------------------------------------|
| Credit card(s) payments ( <i>please specify</i> ):               | Real estate equity \$ _____                                        |
| _____ \$ _____                                                   | Market value \$ _____                                              |
| _____ \$ _____                                                   | Mortgage balance \$ _____                                          |
| _____ \$ _____                                                   | Automobile equity \$ _____                                         |
| Bank or finance company loan payments ( <i>please specify</i> ): | Make and year _____                                                |
| _____ \$ _____                                                   | Loan balance \$ _____                                              |
| _____ \$ _____                                                   | Bank or other account balance(s) ( <i>include RRSPs</i> ) \$ _____ |
| Department store(s) payments ( <i>please specify</i> ):          | Stocks & bonds \$ _____                                            |
| _____ \$ _____                                                   | Life insurance (cash value) \$ _____                               |
| _____ \$ _____                                                   | Money owing to you \$ _____                                        |
| DEBTS TOTAL \$ _____                                             | Name of debtor _____                                               |
|                                                                  | Personal property \$ _____                                         |
|                                                                  | Cash \$ _____                                                      |
|                                                                  | Other \$ _____                                                     |
|                                                                  | TOTAL VALUE OF ASSETS \$ _____                                     |

(Name)

(Signature)