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Estate ID No. 25-094503 Trustee License No. 3052 Receiver Name of WEPP filing: FTI Consulting Canada Inc. Trustee Responsible: Deryck Helkaa

May 1, 2015

## Re: In the Matter of Pacer Promec Energy Corporation, ("PPEC") – In Receivership

Dear former employee of Pacer Promec Energy Corporation:

On March 10, 2015, FTI Consulting Canada Inc. was appointed receiver and manager (the "Receiver") of the assets, undertakings and property (the "Property") of Pacer Promec Energy Corporation ("PPEC" or the "Company"), pursuant to an Order of the Court of Queen's Bench of Alberta (the "Receivership Order"). A copy of the Receivership Order and other publicly available information relating to these proceedings will be posted on the Receiver's website at <a href="http://cfcanada.fticonsulting.com/ppec">http://cfcanada.fticonsulting.com/ppec</a>.

In accordance with paragraph 21(c) of the *Wage Earner Protection Program Act* (Canada) ("WEPPA"), a law created for making payments to individuals in respect of wages, vacation pay, severance or termination owed by employers who are subject to a receivership, the Receiver hereby gives notice of the existence of such program and advises that the date of receivership is March 10, 2015. Information pertaining to the WEPPA program may be obtained by visiting the Service Canada website at:

http://www.servicecanada.gc.ca/en/sc/wepp/index.shtml

Or by calling Service Canada directly at:

Toll free: 1 (866) 683 6516

An on-line application form to apply for payments under the WEPPA may be obtained at the Service Canada website under "Application Information," and "How do I apply for the WEPP?" The Service Canada website address is shown above.

If you do not wish to apply online, you can obtain a paper application form at your nearest Service Canada Centre. A list of Service Canada Centre's is available on the Service Canada website.

In accordance with the WEPPA Regulations, you must also file a proof of claim form with the Receiver for amounts owing to you as of the date of receivership. Attached to this letter is a blank proof of claim form, and instructions on how to fill out the proof of claim.



If you believe the unpaid eligible wages owing to you pursuant to the WEPP which are based on the books and records of Pacer Promec Energy Corporation are inaccurate, you will have an opportunity to file an application with Service Canada to challenge the amounts. Please contact Service Canada at the toll free number listed above for further information regarding this process.

The WEPPA requires that the Receiver provide certain details in respect of potential claims to Service Canada. In accordance with the provisions of the WEPPA, a copy of the materials that the Receiver has provided to Service Canada in respect of your potential claim is attached herein.

If you have any questions regarding the WEPPA process or require further information, please consult the Receiver's website at http://cfcanada.fticonsulting.com/ppec or call the Receiver's hotline at 1-855-344-1825 or email the Receiver at PPEC@fticonsulting.com.

Yours sincerely,

FTI Consulting Canada Inc. in its capacity as receiver of Pacer Promec Energy Corporation. and not in its personal or corporate capacity

## Instruction letter for Employees Regarding Filling out Proof of Claim

The proof of claim form is an important part of the WEPP application process. Service Canada requires that a proof of claim be submitted before an individual's application for payment can be completed.

### **Instructions:**

- A. On the Proof of Claim Form ("POC"), you will be required to fill out the following:
  - 1. Your address and an email address (if applicable) on the first two blank lines;
    - 2. Your name in the first paragraph;
    - 3. Your name again in the next blank space, in the next paragraph, and your city and province of residence in the next blank space.
- B. Leave the next two spaces blank in part 1.
- C. The Total Amount you are claiming in the space in part 3.
- D. On the following page, check the Box at 4E, Claim by Wage Earner, and fill in the Total Amount you are claiming for unpaid eligible wages<sup>1</sup>. Schedule 1 outlines the unpaid eligible wages under the WEPP owed as per PPEC's books and records.
- E. Check the Box on the second line below to make your claim for wages, salaries, commissions, or compensation owing by PPEC for services or employment that was terminated from September 10, 2014 (being six months prior to Receivership event) to March 10, 2015 (being the date of the receivership).
- F. If the amounts of unpaid eligible wages owing to you based on the books and records of PPEC differs from your personal records, you must include documents to support your claim (e.g. employment contracts, payroll stubs, etc.) when submitting the POC to the Receiver.
- G. Part 5, circle the two appropriate phrases, to indicate whether you are or are not related to the debtor (defined as a person who is a member of a related group that controls the entity) and the second box on the second line to indicate that you have or have not dealt with the debtor in a non-arms length manner.
- H. Below part 6: Fill out your location –City and Province or Country, the date, and sign the form on the righthand side. Have someone witness your signature by signing on the left-hand side (it can be anyone that you know). Add your telephone number, fax number and email address, if available, on the appropriate lines.

You have now completed the POC. You will need to send the POC to the Receiver (see below) as soon as possible.

<sup>&</sup>lt;sup>1</sup> As defined by the Wage Earner Protection Act which includes: salaries, commissions, compensation for services rendered, vacation pay, gratuities accounted for by the employer, disbursements of a travelling salesperson properly incurred in and about the business of the former employer, production bonuses ,shift premiums that were earned during the six-month period preceding up to and including the date of the receivership on March 10, 2015; and severance pay and termination pay that relate to employment that ended in that period.

Proofs of Claim can be submitted to the Receiver in one of two ways:

- 1. If you are able to scan the signed documents, you can email them to the Receiver at: ppec@fticonsulting.com, or
- 2. You can mail the documents to our address:

Attention: Claims Manager – Pacer Promec Energy Corporation FTI Consulting Canada Inc., in its capacity as Receiver of the PPEC Suite 720, 440 – 2nd Avenue SW Calgary, AB T2P 5E9

If your concerns are not addressed above: Email the Receiver at ppec@fticonsulting.com

# FORM 31

## Proof of Claim

# (Sections 50.1, 81.5, 81.6, Subsections 65.2(4), 81.2(1), 81.3(8), 81.4(8), 102(2), 124(2), 128(1), and Paragraphs 51(1)(*e*) and 66.14(*b*) of the Act)

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

In	the	matter	of	the	bankruptcy	(or	the	proposal	or	the	receivership)	of
			(name of debtor) of						(	city an	d province) and	the
clain	n of				_, creditor.							

I, \_\_\_\_\_\_ (name of creditor or representative of the creditor), of \_\_\_\_\_\_ (city and province), do hereby certify:

1. That I am a creditor of the above-named debtor (*or* that I am \_\_\_\_\_\_ (*state position or title*) of \_\_\_\_\_\_ (*name of creditor or representative of the creditor*)).

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

3. That the debtor was	, at the date of b	ankruptcy (or the date of the receivership or, in the case of
a proposal, the date of	of the notice of	intention or of the proposal, if no notice of intention was
filed), namely the	day of	, and still is, indebted to the creditor in the
sum of \$	, as specified	I in the statement of account (or affidavit) attached and
marked Schedule "A,	" after deductin	g any counterclaims to which the debtor is entitled. (The
attached statement of	account or affid	lavit must specify the vouchers or other evidence in support
of the claim.)		

- 4. *Check and complete appropriate category* 
  - □ A. UNSECURED CLAIM OF \$\_\_\_\_
- (Other than as a customer contemplated by Section 262 of the Act)

That in respect of this debt, I do not hold any assets of the debtor as security and *(Check appropriate description)* 

- □ Regarding the amount of \$\_\_\_\_, I claim a right to priority under section 136 of the Act.
- □ Regarding the amount of \$\_\_\_\_\_, I do not claim a right to a priority.

(Set out on an attached sheet details to support priority claim)

B. CLAIM OF LESSOR FOR DISCLAIMER OF A LEASE \$\_\_\_\_\_

That I hereby make a claim under subsection 65.2(4) of the Act, particulars of which are as follows:



# FORM 31 – Continued

(Give full particulars of the claim, including the calculations upon which the claim is based)

# □ C. SECURED CLAIM OF \$\_\_\_\_

That in respect of this debt, I hold assets of the debtor valued at \$\_\_\_\_\_ as security, particulars of which are as follows:

(Give full particulars of the security, including the date on which the security was given and the value at which you assess the security, and attach a copy of the security documents)

# D. CLAIM BY FARMER, FISHERMAN OR AQUACULTURIST OF \$\_\_\_\_\_

That I hereby make a claim under subsection 81.2(1) of the Act for the unpaid amount of \$\_\_\_\_\_

(Attach a copy of sales agreement and delivery receipts)

- E. CLAIM BY WAGE EARNER OF \$\_\_\_\_\_
- □ That I hereby make a claim under subsection 81.3(8) of the Act in the amount of \$\_\_\_\_\_
- □ That I hereby make a claim under subsection 81.4(8) of the Act in the amount of \$\_\_\_\_\_
- □ F. CLAIM BY EMPLOYEE FOR UNPAID AMOUNT REGARDING PENSION PLAN OF \$\_\_\_\_\_
- □ That I hereby make a claim under subsection 81.5 of the Act in the amount of \$\_\_\_\_\_
- □ That I hereby make a claim under subsection 81.6 of the Act in the amount of \$\_\_\_\_\_
- G. CLAIM AGAINST DIRECTOR \$\_\_\_\_\_

(To be completed when a proposal provides for the compromise of claims against directors)

That I hereby make a claim under subsection 50(13) of the Act, particulars of which are as follows:

(Give full particulars of the claim, including the calculations upon which the claim is based)

□ H. CLAIM OF A CUSTOMER OF A BANKRUPT SECURITIES FIRM \$\_\_\_\_\_

That I hereby make a claim as a customer for net equity as contemplated by section 262 of the Act, particulars of which are as follows:

(*Give full particulars of the claim, including the calculations upon which the claim is based*)



## FORM 31 -- Concluded

5. That, to the best of my knowledge, I am (*or* the above-named creditor is) (*or* am not *or* is not) related to the debtor within the meaning of section 4 of the Act, and have (*or* has) (*or* have not *or* has not) dealt with the debtor in a non-arm's-length manner.

6. That the following are the payments that I have received from, the credits that I have allowed to, and the transfers at undervalue within the meaning of subsection 2(1) of the Act that I have been privy to or a party to with the debtor within the three months (*or, if the creditor and the debtor are related within the meaning of section 4 of the Act or were not dealing with each other at arm's length*, within the 12 months) immediately before the date of the initial bankruptcy event within the meaning of subsection 2(1) of the Act: (*provide details of payments, credits and transfers at undervalue*)

- 7. (Applicable only in the case of the bankruptcy of an individual)
  - □ Whenever the trustee reviews the financial situation of a bankrupt to redetermine whether or not the bankrupt is required to make payments under section 68 of the Act, I request to be informed, pursuant to paragraph 68(4) of the Act, of the new fixed amount or of the fact that there is no longer surplus income.
  - $\Box$  I request that a copy of the report filed by the trustee regarding the bankrupt's application for discharge pursuant to subsection 170(1) of the Act be sent to the above address.

Dated at	, this	day of					
Witness		Creditor					
		Telephone No.: Fax No.:					
		Email address:					
NOTE:	If an affidavit is attached, it must have been made before a person qualified to take affidavits.						
WARNINGS:		of the Act, redeem a security on payment to the secured creditor of sed, in a proof of security, by the secured creditor.					
	Subsection 201(1) of the Act provides severe penalties for making any false claim, proof, declaration or statement of account.						