		REGISTRY FILE NUMBER
	REPLY IN THE PROVINCIAL COURT OF BP (1SH COLOMBIA) (SMALL CLAIMS COURT)	REGISTRY LOCATION
	✓ To a Claim	Sechelt
το.	To a Counterclaim 16-Sep-14	
TO: Copy the name, address and telephone	ADDRESS Box 2312 REGISTRY	ALL CLAIMS COURT) CLAIMANT(S) POSTAL CODE DEFENDANT On Sara Dubinsky This Postal Code On Sara Dubinsky The Claimant has suffered no loss. Were in breach of the District of Sechelt Sign Bylaw to its statutory authority and sign bylaw. No associated with the adoption of a sign bylaw. Ovincial Court does not have jurisdiction over matters loms. Sechelt acted in good faith. agree to pay\$ FYOU WISH TO MAKE A CLAIM AGAINST THE CLAIMANT)
number of the claimant from the Notice of		7
Claim.	PROV, POSTAL CODE	
FROM: Fill in the name, address and telephone number of the	ADDRESS Lidstone and Company Law Corporation, attention Sara Dubinsky 1300-128 West Pender Street	DEFENDANT
defendant filing this reply.	HENGE NETT	-2269
DISPUTE: Using the "HOW MUCH" section of the	a The Claimant has admitted these signs were returned to him. The Claimant has suf	fered no loss.
Notice of Ciaim as a guide, tell why you disagree with each part (a - e). If you agree	b The District lawfully removed these signs, as they were in breach of the District of S No. 456, 2006.	
with parts of the claim say so.	c The District lawfully removed these signs pursuant to its statutory authority and sign compensation is payable for any loss or damages associated with the adoption of a	
	d The Claimant's legal expenses are not recoverable.	
AGREEMENT	No violation of freedom of speech occurred. The Provincial Court does not have jur involving the Canadian Charter of Rights and Freedoms. Sechelt acted in good faith WITH THE CLAIM: I (NAME) agree	1.
If you agree to pay all or part of what is cialmed, make a proposal.	I could make the following payments: (GIVE DATES AND AMOUNTS)	to pay o
COUNTERCLA WHAT HAPPENED? Briefly tell what has led to your counterclaim.	(YOU SHOULD ONLY FILL OUT THIS PART OF THE FORM IF YOU WISH TO MAKE A CLAIM AGA (THIS PART IS NOT TO BE USED WHEN REPLYING TO A COUNTERCLAIM)	NST THE CLAIMANT)
HOW MUCH?	a	le !!
Tell what you are claiming. If your		
counterciaim has more than one part, separate each part and fill in each individual amount,	_b	Dursuant to its statutory authority and sign bylaw. No amages associated with the adoption of a sign bylaw. Overable. d. The Provincial Court does not have jurisdiction over matters and Freedoms. Sechelt acted in good faith. agree to pay \$ HE FORM IF YOU WISH TO MAKE A CLAIM AGAINST THE CLAIMANT)
then add the Individual amounts to make the total.	_ c	\$
	TOTAL	\$
	+ FILING FEES	\$
	= TOTAL CLAIMED	\$
FORM 2 SCL 002 01/2008 (OPC 7530854502)		1