

PLAINTIFF'S FACTUM AND LIST OF EXHIBITS

Section 115 of the *Charter of Human Rights and Freedoms*, CQLR, c. C-12
Sections 16 and 28 of the *Regulation of the Human Rights Tribunal*, CQLR, c. C-12, r. 6

GENERAL INFORMATION

This form allows the plaintiff to file a *Factum*, a *List of Exhibits* and exhibits.

The plaintiff must:

- (1) Have filed an *Application to Institute Proceedings* with the office of the Court of Québec;
- (2) Have served the *Application to Institute Proceedings* to the other parties by court bailiff;
- (3) File the *Factum* at the same time or within **15 days** of filing the *Application to Institute Proceedings* with the office of the Court of Québec (otherwise, you will have to file an *Application for Relief from Default of Filing the Factum in the Time Limit*).
- (4) File the *List of Exhibits* and the Exhibits.

PROCEDURE

FILING AT THE COURT OFFICE

You must file **5 copies, plus 1 additional copy for each defendant** (e.g. when there are 2 defendants, you must file 7 copies) of your *Factum*, your *List of Exhibits* and your exhibits at the office of the Court of Québec of the judicial district where the *Application to Institute Proceedings* was filed.

To find the location of a courthouse: <https://www.justice.gouv.qc.ca/en/join-us/find-a-courthouse>

JUDICIAL FEES

There are no judicial fees to file your *Factum* and your *List of Exhibits*.

FILE NUMBER

The file number was assigned by the clerk of the office of the Court of Québec when you filed your *Application to Institute Proceedings*. This number must appear on all the documents or proceedings that you file.

NOTIFICATION

You do not have to send your *Factum*, your *List of Exhibits* and your exhibits to the other parties. The Tribunal will take care of this matter.

CHECKLIST

Before filing your *Factum*, your *List of Exhibits* and your exhibits:

- You must print your procedures on one side of each page (recto);
- You must sign on pages 3 and 4;
- You must attach all your exhibits (see the *List of Exhibits*);
- You must have 5 copies of the procedures, plus 1 additional copy for each defendant.

File n°: _____

and

and

Plaintiffs

v.

and

and

Defendants

PLAINTIFF'S FACTUM

Section 115 of the *Charter of Human Rights and Freedoms*, CQLR, c. C-12
Section 16 of the *Regulation of the Human Rights Tribunal*, CQLR, c. C-12, r. 6

1	YOU BELIEVE YOU WERE A VICTIM OF		
<i>The information in this section must match the Application to Institute Proceedings. Check the boxes that apply to your case.</i>			
<input type="checkbox"/>	Discrimination	<input type="checkbox"/>	Harassment
<input type="checkbox"/>	Exploitation of an aged or handicapped person		
In cases of discrimination or harassment:			
<i>Check the box or boxes corresponding to each ground of discrimination or harassment that applies to your case.</i>			
<input type="checkbox"/>	Age	<input type="checkbox"/>	Gender identity or expression
<input type="checkbox"/>	Employment-related criminal record	<input type="checkbox"/>	Pregnancy
<input type="checkbox"/>	Social condition	<input type="checkbox"/>	Handicap or use of any means to palliate a handicap
<input type="checkbox"/>	Political convictions	<input type="checkbox"/>	Language
<input type="checkbox"/>	Civil status	<input type="checkbox"/>	Sexual orientation
<input type="checkbox"/>	Ethnic or national origin		
<input type="checkbox"/>	Race/Colour		
<input type="checkbox"/>	Religion		
<input type="checkbox"/>	Sex		
Field(s) or sector(s) of activities concerned:			
<i>Check the box or boxes that apply to your case.</i>			
<input type="checkbox"/>	Access to a means of transportation or a public space	<input type="checkbox"/>	Judicial rights
<input type="checkbox"/>	Juridical act concerning goods or services ordinarily offered to the public	<input type="checkbox"/>	Political rights
<input type="checkbox"/>	Discriminatory clause in a juridical act	<input type="checkbox"/>	Hiring/Employment
<input type="checkbox"/>	Economic and social rights	<input type="checkbox"/>	Fundamental freedoms and rights
<input type="checkbox"/>	Profiling		
<input type="checkbox"/>	Discriminatory publicity		
<input type="checkbox"/>	Reprisals		

2 FACTS IN SUPPORT OF YOUR APPLICATION	
Describe each event in chronological order. Be sure to mention the date, location and a description of what happened. If you need more space, please continue on a separate blank page and attach it to the present document.	
DATE	EVENT
<div>_____ / _____ / _____</div> <div>Year Month Day</div>	[1]
<div>_____ / _____ / _____</div> <div>Year Month Day</div>	[2]
<div>_____ / _____ / _____</div> <div>Year Month Day</div>	[3]
<div>_____ / _____ / _____</div> <div>Year Month Day</div>	[4]
3 CONCLUSIONS SOUGHT	
State and explain the amounts that you are claiming, and, if applicable, the orders you are requesting, if any. If there is more than one defendant, state the amounts claimed against each defendant. The amounts claimed can be different than the ones suggested in the Resolution of the Commission.	
Amount for material damages	
These are the amounts that you lost or were forced to pay as a result of the discrimination, harassment or exploitation of which you claim to have been a victim. For example: loss of salary, increase in rent or moving expenses.	
Amount for moral damages	
These are the amounts that the Tribunal can grant to compensate for the moral damage that was caused by the discrimination, harassment or exploitation of which you claim to have been a victim. For example: loss of quality of life, psychological suffering, attack to your dignity, humiliation, loss of self-esteem.	

Amount for punitive damages		
<i>These are the amounts that the Tribunal can award if the discrimination, harassment or exploitation of which you claim to have been a victim was intentional, that is, if the consequences were intended or, at least, foreseeable.</i>		
Total amount		
Order(s) sought:		
<i>The Tribunal may order the defendant(s) to take the necessary measures to restore the situation and put an end to the infringement of your rights. For example: reinstatement in the work place, implementation of the necessary adaptive measures.</i>		
4 WITNESSES AND EXPERTISES		
List of witnesses		
<i>State the name of the witnesses that you will summon for the hearing before the Tribunal.</i>		
1. 2. 3. 4.		
List of experts		
<i>If you wish to file an expertise, state the name of the expert and the subject of the expert's opinion.</i>		
1. 2.		
5 TIME REQUIRED TO PRESENT YOUR EVIDENCE AND YOUR ARGUMENTS		
<i>Indicate the number of hours you estimate will be necessary to present your evidence (testimonies, questioning, and cross-examining) and your arguments.</i>		
_____ hours		
SIGNATURE		
Plaintiff 1 Signed in _____, City on _____, Date _____	Plaintiff 2 Signed in _____, City on _____, Date _____	Plaintiff 3 Signed in _____, City on _____, Date _____

File n°: _____

and

and

Plaintiffs

v.

and

and

Defendants

LIST OF EXHIBITS FILED BY THE PLAINTIFF

Section 28 of the *Regulation of the Human Rights Tribunal*, CQLR, c. C-12, r. 6

6 EXHIBITS IN SUPPORT OF YOUR APPLICATION

*List the exhibits you intend to file in support of your application. For example: documents, pictures, letters, emails.
The exhibits are identified by an exhibit number starting by the letter "P" (e.g.: P-1, P-2, P-3).
Make sure to indicate the exhibit number on each of your exhibits, in accordance with the present list of exhibits.
Please attach all of your exhibits.*

EXHIBIT P-1	Copy of the letter of the Commission
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EXHIBIT P-2	Copy of the Resolution of the Commission
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EXHIBIT P-3	
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EXHIBIT P-4	
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EXHIBIT P-5	
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EXHIBIT P-6	
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EXHIBIT P-7	
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EXHIBIT P-8	
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Note: If there are more exhibits, please add them on a separate blank page. Continue your list starting with exhibit number P-9.

SIGNATURE

Plaintiff 1

Signed in _____,
City

on _____.
Date

Plaintiff 2

Signed in _____,
City

on _____.
Date

Plaintiff 3

Signed in _____,
City

on _____.
Date

No:

HUMAN RIGHTS TRIBUNAL
(Office of the Court of Québec)
DISTRICT OF

and

and

v.

Plaintiffs

and

and

Defendants

**PLAINTIFF'S FACTUM, LIST OF EXHIBITS
AND EXHIBITS**

Name:

Address:

Telephone:

Email: