



Acknowledgement from counsel authorizing legal aid to release information

To be completed by Counsel in the event that it is not practicable for client to execute the Consent and Waiver

Client name:

(First)

(Last)

Date of birth:

(YYYY-MM-DD)

LAO Client #:

Contact info:

Street address:

Unit/apt #:

City:

Province:

Postal code:

Home phone:

Cell:

Email:

Lawyer's name:

(First)

(Last)

Lawyers solicitor #:

I am a barrister and solicitor in good standing with the Law Society of Upper Canada. I have been consulted for the purpose of bringing an application for state funded counsel.

In an application for state funded counsel, the Crown and the court will be provided with information about the status of the applicant's application for legal aid assistance. This information may be privileged and/or confidential. Legal Aid Ontario has recommended that Counsel review this information with the applicant before consenting to the further release of that information.

As a barrister and solicitor, I confirm that my client expressly authorizes and consents to the release of his/her Legal Aid Ontario file to me for the purpose of bringing an application for state funded counsel. It is understood that this information may include the following:

- Financial case notes
- Report on financial information
- Area office Notice of Refusal and legal information case notes
- Applicant's appeal to the Area Committee

- Area Committee Decision Records (AC members names redacted)
- Area Committee Notice of Decision and legal information case notes
- Applicant's Notice of Appeal to the Provincial Office
- Provincial Office Notice of Decision and legal information case notes
- Reconsideration request to Provincial Office (where available)
- Applicant's change of solicitor request and counsel's reply (where applicable)
- Other

On behalf of my client, I will send this Authorization to Legal Aid Ontario via the gencasemgmt@lao.on.ca mailbox and I consent to LAO sending the file to my office via email or Portal.

Dated at _____, Ontario,
(YYYY-MM-DD)

Barrister and Solicitor

Personal information in this form is collected under the authority of section 84 of the *Legal Aid Services Act*. Questions about this collection should be directed to the FIPPA coordinator, 40 Dundas Street West, Suite 200, Toronto, ON, M5G 2H1, 416-979-1446 or 1-800-668-8258.