

## Fill in this information to identify the case:

Debtor CHC Group Ltd

United States Bankruptcy Court for the: Northern District of Texas

Case number 16-31854

RECEIVED

JUN 07 2016

KURTZMAN CARSON CONSULTANTS

04/16

## Official Form 410

## Proof of Claim

Read the instructions before filling out this form. This form is for making a claim for payment in a bankruptcy case. Do not use this form to make a request for payment of an administrative expense. Make such a request according to 11 U.S.C. § 503.

Filers must leave out or redact information that is entitled to privacy on this form or on any attached documents. Attach redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. Do not send original documents; they may be destroyed after scanning. If the documents are not available, explain in an attachment.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Fill in all the information about the claim as of the date the case was filed. That date is on the notice of bankruptcy (Form 309) that you received.

## Part 1: Identify the Claim

## 1. Who is the current creditor?

Adecco Employment Services Ltd

Name of the current creditor (the person or entity to be paid for this claim)

Other names the creditor used with the debtor \_\_\_\_\_

## 2. Has this claim been acquired from someone else?

☒ No☐ Yes. From whom? \_\_\_\_\_

## 3. Where should notices and payments to the creditor be sent?

Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)

## Where should notices to the creditor be sent?

Adecco Employment Services Ltd

Name

10 Bay Street # 330

Number Street

TorontoONM5J 2R8

City

State

ZIP Code

CanadaContact phone 416-646-3322 x 7595Contact email Maryllynn.Dalgety@adecco.ca

## Where should payments to the creditor be sent? (if different)

Name

Number

Street

City

State

ZIP Code

Contact phone \_\_\_\_\_

Contact email \_\_\_\_\_

Uniform claim identifier for electronic payments in chapter 13 (if you use one):  
\_\_\_\_\_

## 4. Does this claim amend one already filed?

☒ No☐ Yes. Claim number on court claims registry (if known) \_\_\_\_\_

Filed on \_\_\_\_\_

MM / DD / YYYY

## 5. Do you know if anyone else has filed a proof of claim for this claim?

☒ No☐ Yes. Who made the earlier filing? \_\_\_\_\_

**Part 2: Give Information About the Claim as of the Date the Case Was Filed**

6. Do you have any number you use to identify the debtor? ☒ No  
☐ Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor: \_\_\_\_\_

7. How much is the claim? \$\_\_\_\_\_. Does this amount include interest or other charges?  
☒ No  
☐ Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A).

8. What is the basis of the claim? Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card.  
Attach redacted copies of any documents supporting the claim required by Bankruptcy Rule 3001(c).  
Limit disclosing information that is entitled to privacy, such as health care information.  
Services performed - temporary staffing help provided

RECEIVED

JUN 07 2016

9. Is all or part of the claim secured? ☒ No  
☐ Yes. The claim is secured by a lien on property.

KURTZMAN CARSON CONSULTANT

**Nature of property:**

- ☐ Real estate. If the claim is secured by the debtor's principal residence, file a *Mortgage Proof of Claim Attachment* (Official Form 410-A) with this *Proof of Claim*.  
☐ Motor vehicle  
☐ Other. Describe: \_\_\_\_\_

**Basis for perfection:** \_\_\_\_\_

Attach redacted copies of documents, if any, that show evidence of perfection of a security interest (for example, a mortgage, lien, certificate of title, financing statement, or other document that shows the lien has been filed or recorded.)

Value of property: \$\_\_\_\_\_

Amount of the claim that is secured: \$\_\_\_\_\_

Amount of the claim that is unsecured: \$ 14,956.95 (The sum of the secured and unsecured amounts should match the amount in line 7.)

Amount necessary to cure any default as of the date of the petition: \$\_\_\_\_\_

Annual Interest Rate (when case was filed) \_\_\_\_\_ %

- ☐ Fixed  
☐ Variable

10. Is this claim based on a lease? ☒ No  
☐ Yes. Amount necessary to cure any default as of the date of the petition. \$\_\_\_\_\_

11. Is this claim subject to a right of setoff? ☒ No  
☐ Yes. Identify the property: \_\_\_\_\_

12. Is all or part of the claim entitled to priority under 11 U.S.C. § 507(a)?

A claim may be partly priority and partly nonpriority. For example, in some categories, the law limits the amount entitled to priority.

- ☐ No  
☐ Yes. Check one:

- ☐ Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).  
☐ Up to \$2,850\* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use. 11 U.S.C. § 507(a)(7).  
☐ Wages, salaries, or commissions (up to \$12,850\*) earned within 180 days before the bankruptcy petition is filed or the debtor's business ends, whichever is earlier. 11 U.S.C. § 507(a)(4).  
☐ Taxes or penalties owed to governmental units. 11 U.S.C. § 507(a)(8).  
☐ Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(5).  
☐ Other. Specify subsection of 11 U.S.C. § 507(a)( ) that applies.

Amount entitled to priority

\$ \_\_\_\_\_

\$ \_\_\_\_\_

\$ \_\_\_\_\_

\$ \_\_\_\_\_

\$ \_\_\_\_\_

\$ \_\_\_\_\_

\* Amounts are subject to adjustment on 4/01/19 and every 3 years after that for cases begun on or after the date of adjustment.

Part 3: Sign Below

The person completing this proof of claim must sign and date it. FRBP 9011(b).

If you file this claim electronically, FRBP 5005(a)(2) authorizes courts to establish local rules specifying what a signature is.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Check the appropriate box:

- ☒ I am the creditor.  
☐ I am the creditor's attorney or authorized agent.  
☐ I am the trustee, or the debtor, or their authorized agent. Bankruptcy Rule 3004.  
☐ I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.

I understand that an authorized signature on this *Proof of Claim* serves as an acknowledgment that when calculating the amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.

I have examined the information in this *Proof of Claim* and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on date 05/26/2016  
MM / DD / YYYY

Marylynn Dalgety  
Signature

Print the name of the person who is completing and signing this claim:

Name	Marylynn	Dalgety
	First name	Middle name Last name
Title	Credit and Collections Manager	
Company	Adecco Employment Services Ltd	
	Identify the corporate servicer as the company if the authorized agent is a servicer.	
Address	10 Bay Street # 330	
	Number	Street
	Toronto	ON M5J 2R8 Canada
	City	State ZIP Code
Contact phone	416-646-3322 x 7595	Email Marylynn.Dalgety@adecco.ca

26 May 2016

The Adecco logo consists of the word "Adecco" in a white, sans-serif font, centered within a solid black rectangular background.

CHC Group Claims Processing Center  
C/O KCC  
2335 Alaska Ave  
El Segunda, CA  
90245  
USA

**Accounts #: 1869449 & 2036868**  
**Amount Due: \$ 14,956.95**

Dear Sirs,

**Re: Bankruptcy Chapter 11 case 16-31854**

Attached, please find our claim paperwork, statement of account and invoice copies.

Would it be possible to send me e-mail confirmation that this has been received and that everything with the paperwork is in order? (I would hate to have missed something.)

In your paperwork it said to send a duplicate copy and pre-paid envelope if we wanted confirmation, however, being located in Canada I am not able to provide a pre-paid envelope as I have nowhere to purchase American stamps, so I am hoping you can send me e-mailed confirmation that our claim has been received.

Should you have any questions, please feel free to contact me.

Yours truly,

A handwritten signature in black ink, appearing to read "Marylynn Dalgety".

**Marylynn Dalgety**

Credit and Collections Manager

**Canadian Headquarters, Credit and Collections Department**

Adecco Employment Services Ltd (Canada)

10 Bay Street, Suite 330

Toronto, ON, M5J 2R8

T 647-288-8110 or Toll Free 1-866-646-3322 x 7595

Marylynn.Dalgety@adecco.ca

F 416-646-0410

[www.adecco.ca](http://www.adecco.ca)

**STATEMENT OF ACCOUNT FROM ADECCO EMPLOYMENT SERVICES LTD (CANADA) INVOICES PRIOR TO MAY 5, 2016**

**Heli-One Account # 1869449**

Invoice	Transaction	Invoice Date	Original Amount	Remaining Amount	Employee Name	Account	Week-ending
<b>68047266</b>	45849013	18-Apr-16	1,214.30 \$	1,214.30	LEE SEUNGHA	1869449	17-Apr-16
<b>68047266</b>	45849974	18-Apr-16	760.7 \$	760.70	COOPER JESSICA	1869449	17-Apr-16
<b>68047266</b>	45849222	18-Apr-16	1,008.79 \$	1,008.79	MOU TYSON	1869449	17-Apr-16
				<b>\$ 2,983.79</b>			
<b>68047267</b>	45849787	18-Apr-16	1,214.30 \$	<b>1,214.30</b>	LEE SEUNGHA	1869449	03-Apr-16
<b>68047268</b>	45849786	18-Apr-16	607.15 \$	<b>607.15</b>	LEE SEUNGHA	1869449	27-Mar-16
<b>68055608</b>	45858212	25-Apr-16	1,164.24 \$	1,164.24	WONG NANCY	1869449	24-Apr-16
<b>68055608</b>	45858577	25-Apr-16	950.88 \$	950.88	COOPER JESSICA	1869449	24-Apr-16
<b>68055608</b>	45858578	25-Apr-16	1,062.52 \$	1,062.52	LEE SEUNGHA	1869449	24-Apr-16
<b>68055608</b>	45858697	25-Apr-16	1,240.31 \$	1,240.31	MOU TYSON	1869449	24-Apr-16
				<b>\$ 4,417.95</b>			

<b>68064792</b>	45867590	02-May-16	1,240.31 \$	1,240.31	MOU TYSON	1869449	01-May-16
<b>68064792</b>	45867591	02-May-16	1,517.88 \$	1,517.88	LEE SEUNGHA	1869449	01-May-16
<b>68064792</b>	45865802	02-May-16	1,164.24 \$	1,164.24	WONG NANCY	1869449	01-May-16
<b>68064792</b>	45866348	02-May-16	713.16 \$	713.16	COOPER JESSICA	1869449	01-May-16
				<b>\$ 4,635.59</b>			

**Heli-One Account # 2036868**

Invoice	Transaction	Transaction Date	Original Amount	Remaining Amount	Employee Name	Account	Week-ending
<b>68064794</b>	45867328	02-May-16	1,098.17 \$	<b>1,098.17</b>	KIM MINSOO	2036868	01-May-16

<b>Grand</b>	<b>Total</b>	<b>\$ 14,956.95</b>
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**Adecco**

better work, better life

Adecco Employment Services Limited  
 Lockbox # T46033  
 P.O. Box 46033, Postal Station "A"  
 Toronto, Ontario, M5W 4K9  
**RETURN SERVICE REQUESTED**

**HELI-ONE CANADA INC**  
**ACCOUNTS PAYABLE\***  
 4740 AGAR DRIVE  
 RICHMOND BC V7B 1A3

**ORIGINAL INVOICE**

**INVOICE #:** 68047266  
**INVOICE DATE:** 04/18/2016  
**AMOUNT DUE:** \$2,983.79  
**CUSTOMER #:** 1869449  
**BILL TO ID:** 3491545  
**OFFICE ID:** 020603  
**PO #:**  
**GST/HST Reg#:** 86958 9697

DEPT CODE:575 HS Global Admin Base

NAME	WEEK END DATE	DESCRIPTION	LABOR TYPE	HOURS	RATE	TAX	TOTAL W/ TAX	TRANSACTION NUMBER
Xref Track ID:CH13882								
Cooper Jessica	04/17/2016	CLERKS	REG	32.00	\$22.64	\$36.22	\$760.70	45849974-6527
Approved on 04/18/2016 felipe.reyes@heli-one.ca Confirmation/TC # 1404477568								
				<b>32.00</b>		<b>\$36.22</b>	<b>\$760.70</b>	

SUBTOTAL FOR: DEPT CODE:575 HS Global Admin Base

32.00 \$36.22 \$760.70

Tax Summary	Subtotal	GST Total	QST Total	PST Total	HST Total	Total Tax
	\$724.48	\$36.22	\$0.00	\$0.00	\$0.00	\$36.22

Open Invoice Status for Bill To ID 3491545 as of 04/17/2016. This invoice is not included in the summary below.

1-30 Days	31-60 Days	61-90 Days	91-120 Days	121-150 Days	Over 151 Days
\$3,039.29	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

This represents the outstanding balance for this bill to only. There may be additional balances for other bill to's associated with this customer  
 If copies of outstanding invoices are required, please contact : (416) 646-3322

Except as otherwise provided in a current written agreement between the parties, Invoice payments are due in full upon receipt. Please pay invoices promptly to avoid late fees and/or interest charges. After payments are made, any disputes must be communicated within 60 days from the invoice date. In the event that you do not dispute the invoiced amounts within (60) days of invoice date the billed amounts will be deemed accurate.

-----Detach Here-----

Please Include This Portion With Your Payment

**PAYMENT ADVICE****Adecco**

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**REMIT TO: Adecco Employment Services Limited**  
**Lockbox # T46033**  
**P.O. Box 46033, Postal Station "A"**  
**Toronto, Ontario, M5W 4K9**  
**GST/HST Reg#:** 86958 9697

CUSTOMER SERVICE : (416) 646-3322

**HELI-ONE CANADA INC**  
**ACCOUNTS PAYABLE\***  
 4740 AGAR DRIVE  
 RICHMOND BC V7B 1A3

**Amount Due:** \$2,983.79  
**Customer Number:** 1869449  
**Invoice Date:** 04/18/2016  
**Invoice Number:** 68047266  
**Payment Terms:** PAYABLE UPON RECEIPT

Please check this box if change of address is required and fill in the appropriate information in space provided

☐ Company Name  
☐ Bill To Name  
☐ Bill To Address  
☐ City, Province, Postal Code

To receive Invoices via email or to update an existing email address check the box and enter the new email address

☐ Email Address

0000068047266000000002983790000018694495

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**Adecco Employment Services Limited**  
 Lockbox # T46033  
 P.O. Box 46033, Postal Station "A"  
 Toronto, Ontario, M5W 4K9  
**RETURN SERVICE REQUESTED**

**HELI-ONE CANADA INC**  
**ACCOUNTS PAYABLE\***  
 4740 AGAR DRIVE  
 RICHMOND BC V7B 1A3

**ORIGINAL INVOICE**

**INVOICE #:** 68047266  
**INVOICE DATE:** 04/18/2016  
**AMOUNT DUE:** \$2,983.79  
**CUSTOMER #:** 1869449  
**BILL TO ID:** 3491545  
**OFFICE ID:** 020603  
**PO #:**  
**GST/HST Reg#:** 86958 9697

DEPT CODE:758

NAME	WEEK END DATE	DESCRIPTION	LABOR TYPE	HOURS	RATE	TAX	TOTAL W/ TAX	TRANSACTION NUMBER
<b>Xref Track ID:AM14822</b>								
Lee Seungha	04/17/2016	DOCUMENT CONTROL SR	REG	32.00	\$36.14	\$57.82	\$1,214.30	45849013-6527
Approved on 04/18/2016 david.taylor@heli-one.ca Confirmation/TC # 1404468649								
				<b>32.00</b>		<b>\$57.82</b>	<b>\$1,214.30</b>	
<b>Xref Track ID:AM14837</b>								
Mou Tyson	04/17/2016	ADMINISTRATIN JR CPE	REG	30.50	\$31.50	\$48.04	\$1,008.79	45849222-6527
Approved on 04/18/2016 scott.markwick@heli-one.ca Confirmation/TC # 1404484189								
				<b>30.50</b>		<b>\$48.04</b>	<b>\$1,008.79</b>	

SUBTOTAL FOR: DEPT CODE:758

62.50 \$105.86 \$2,223.09

Tax Summary	Subtotal	GST Total	QST Total	PST Total	HST Total	Total Tax
	\$2,117.23	\$105.86	\$0.00	\$0.00	\$0.00	\$105.86

**HOURS SUMMARY**

STRAIGHT TIME: 94.50  
 OVER TIME : 0.00  
 OTHER TIME : 0.00  
**TOTAL HOURS:** 94.50

**INVOICE TOTAL:** \$2,841.71  
**GST:** \$142.08  
**QST:** \$0.00  
**PST:** \$0.00  
**HST:** \$0.00  
**TOTAL AMOUNT DUE:** \$2,983.79

Continued From Prior Page....

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Adecco Employment Services Limited  
 Lockbox # T46033  
 P.O. Box 46033, Postal Station "A"  
 Toronto, Ontario, M5W 4K9  
**RETURN SERVICE REQUESTED**

**HELI-ONE CANADA INC**  
**ACCOUNTS PAYABLE\***  
**4740 AGAR DRIVE**  
**RICHMOND BC V7B 1A3**

**ORIGINAL INVOICE**

**INVOICE #:** 68055608  
**INVOICE DATE:** 04/25/2016  
**AMOUNT DUE:** \$4,417.95  
**CUSTOMER #:** 1869449  
**BILL TO ID:** 3491545  
**OFFICE ID:** 020603  
**PO #:**  
**GST/HST Reg#:** 86958 9697

DEPT CODE:575 HS Global Admin Base

NAME	WEEK END DATE	DESCRIPTION	LABOR TYPE	HOURS	RATE	TAX	TOTAL W/ TAX	TRANSACTION NUMBER
Xref Track ID:CH13882								
Cooper Jessica	04/24/2016	CLERKS	REG	40.00	\$22.64	\$45.28	\$950.88	45858577-6527
Approved on 04/25/2016 felipe.reyes@heli-one.ca Confirmation/TC # 1408107237								
				<b>40.00</b>		<b>\$45.28</b>	<b>\$950.88</b>	

**SUBTOTAL FOR: DEPT CODE:575 HS Global Admin Base** **40.00** **\$45.28** **\$950.88**

Tax Summary	Subtotal	GST Total	QST Total	PST Total	HST Total	Total Tax
	\$905.60	\$45.28	\$0.00	\$0.00	\$0.00	\$45.28

Open Invoice Status for Bill To ID 3491545 as of 04/24/2016. This invoice is not included in the summary below.

1-30 Days	31-60 Days	61-90 Days	91-120 Days	121-150 Days	Over 151 Days
\$7,274.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

This represents the outstanding balance for this bill to only. There may be additional balances for other bill to's associated with this customer  
 If copies of outstanding invoices are required, please contact : (416) 646-3322

Except as otherwise provided in a current written agreement between the parties, Invoice payments are due in full upon receipt. Please pay invoices promptly to avoid late fees and/or interest charges. After payments are made, any disputes must be communicated within 60 days from the invoice date. In the event that you do not dispute the invoiced amounts within (60) days of invoice date the billed amounts will be deemed accurate.

-----Detach Here-----

Please Include This Portion With Your Payment

**PAYMENT ADVICE****Adecco**

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**REMIT TO: Adecco Employment Services Limited**  
**Lockbox # T46033**  
**P.O. Box 46033, Postal Station "A"**  
**Toronto, Ontario, M5W 4K9**  
**GST/HST Reg#:** 86958 9697

**CUSTOMER SERVICE :** (416) 646-3322

**HELI-ONE CANADA INC**  
**ACCOUNTS PAYABLE\***  
**4740 AGAR DRIVE**  
**RICHMOND BC V7B 1A3**

**Amount Due:** \$4,417.95  
**Customer Number:** 1869449  
**Invoice Date:** 04/25/2016  
**Invoice Number:** 68055608  
**Payment Terms:** PAYABLE UPON RECEIPT

Please check this box if change of address is required and fill in the appropriate information in space provided

☐ Company Name  
☐ Bill To Name  
☐ Bill To Address  
☐ City, Province, Postal Code

To receive Invoices via email or to update an existing email address check the box and enter the new email address

☐ Email Address

0000068055608000000004417950000018694495



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**Adecco Employment Services Limited**

Lockbox # T46033  
P.O. Box 46033, Postal Station "A"  
Toronto, Ontario, M5W 4K9

**RETURN SERVICE REQUESTED**

**HELI-ONE CANADA INC**  
**ACCOUNTS PAYABLE\***  
**4740 AGAR DRIVE**  
**RICHMOND BC V7B 1A3**

**ORIGINAL INVOICE**

**INVOICE #:** 68055608  
**INVOICE DATE:** 04/25/2016  
**AMOUNT DUE:** \$4,417.95  
**CUSTOMER #:** 1869449  
**BILL TO ID:** 3491545  
**OFFICE ID:** 020603  
**PO #:**  
**GST/HST Reg#:** 86958 9697

DEPT CODE:758

NAME	WEEK END DATE	DESCRIPTION	LABOR TYPE	HOURS	RATE	TAX	TOTAL W/ TAX	TRANSACTION NUMBER
<b>Xref Track ID:AM14822</b>								
Lee Seungha	04/24/2016	DOCUMENT CONTROL SR	REG	28.00	\$36.14	\$50.60	\$1,062.52	45858578-6527
Approved on 04/25/2016 david.taylor@heli-one.ca Confirmation/TC # 1408092655								
				<b>28.00</b>		<b>\$50.60</b>	<b>\$1,062.52</b>	
<b>Xref Track ID:AM14837</b>								
Mou Tyson	04/24/2016	ADMINISTRATIN JR CPE	REG	37.50	\$31.50	\$59.06	\$1,240.31	45858697-6527
Approved on 04/25/2016 scott.markwick@heli-one.ca Confirmation/TC # 1408156906								
				<b>37.50</b>		<b>\$59.06</b>	<b>\$1,240.31</b>	
<b>Xref Track ID:AM14837-1</b>								
Wong Nancy	04/24/2016	ADMINISTRATIN JR CPE	REG	40.00	\$27.72	\$55.44	\$1,164.24	45858212-6527
Approved on 04/26/2016 scott.markwick@heli-one.ca Confirmation/TC # 1409688043								
				<b>40.00</b>		<b>\$55.44</b>	<b>\$1,164.24</b>	

**SUBTOTAL FOR: DEPT CODE:758****105.50****\$165.10****\$3,467.07**

Tax Summary	Subtotal	GST Total	QST Total	PST Total	HST Total	Total Tax
	\$3,301.97	\$165.10	\$0.00	\$0.00	\$0.00	\$165.10

**HOURS SUMMARY**

STRAIGHT TIME: 145.50  
OVER TIME : 0.00  
OTHER TIME : 0.00  
**TOTAL HOURS: 145.50**

**INVOICE TOTAL:** \$4,207.57  
**GST:** \$210.38  
**QST:** \$0.00  
**PST:** \$0.00  
**HST:** \$0.00

**TOTAL AMOUNT DUE: \$4,417.95**

Continued From Prior Page....

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Adecco Employment Services Limited  
 Lockbox # T46033  
 P.O. Box 46033, Postal Station "A"  
 Toronto, Ontario, M5W 4K9  
**RETURN SERVICE REQUESTED**

**HELI-ONE CANADA INC**  
**ACCOUNTS PAYABLE\***  
**4740 AGAR DRIVE**  
**RICHMOND BC V7B 1A3**

**ORIGINAL INVOICE**

**INVOICE #:** 68064792  
**INVOICE DATE:** 05/02/2016  
**AMOUNT DUE:** \$4,635.59  
**CUSTOMER #:** 1869449  
**BILL TO ID:** 3491545  
**OFFICE ID:** 020603  
**PO #:**  
**GST/HST Reg#:** 86958 9697

DEPT CODE:575 HS Global Admin Base

NAME	WEEK END DATE	DESCRIPTION	LABOR TYPE	HOURS	RATE	TAX	TOTAL W/ TAX	TRANSACTION NUMBER
Xref Track ID:CH13882								
Cooper Jessica	05/01/2016	CLERKS	REG	30.00	\$22.64	\$33.96	\$713.16	45866348-6527
Approved on 05/02/2016 felipe.reyes@heli-one.ca Confirmation/TC # 1411784900								
				<b>30.00</b>		<b>\$33.96</b>	<b>\$713.16</b>	

SUBTOTAL FOR: DEPT CODE:575 HS Global Admin Base

30.00 \$33.96 \$713.16

Tax Summary	Subtotal	GST Total	QST Total	PST Total	HST Total	Total Tax
	\$679.20	\$33.96	\$0.00	\$0.00	\$0.00	\$33.96

Open Invoice Status for Bill To ID 3491545 as of 05/01/2016. This invoice is not included in the summary below.

1-30 Days	31-60 Days	61-90 Days	91-120 Days	121-150 Days	Over 151 Days
\$9,223.19	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

This represents the outstanding balance for this bill to only. There may be additional balances for other bill to's associated with this customer  
 If copies of outstanding invoices are required, please contact : (416) 646-3322

Except as otherwise provided in a current written agreement between the parties, Invoice payments are due in full upon receipt. Please pay invoices promptly to avoid late fees and/or interest charges. After payments are made, any disputes must be communicated within 60 days from the invoice date. In the event that you do not dispute the invoiced amounts within (60) days of invoice date the billed amounts will be deemed accurate.

-----Detach Here-----

Please Include This Portion With Your Payment

**PAYMENT ADVICE****Adecco**

better work, better life

**REMIT TO: Adecco Employment Services Limited**  
**Lockbox # T46033**  
**P.O. Box 46033, Postal Station "A"**  
**Toronto, Ontario, M5W 4K9**  
**GST/HST Reg#:** 86958 9697

CUSTOMER SERVICE : (416) 646-3322

**HELI-ONE CANADA INC**  
**ACCOUNTS PAYABLE\***  
**4740 AGAR DRIVE**  
**RICHMOND BC V7B 1A3**

**Amount Due:** \$4,635.59  
**Customer Number:** 1869449  
**Invoice Date:** 05/02/2016  
**Invoice Number:** 68064792  
**Payment Terms:** PAYABLE UPON RECEIPT

Please check this box if change of address is required and fill in the appropriate information in space provided	<input type="checkbox"/> Bill To Name	_____
	<input type="checkbox"/> Bill To Address	_____
	City, Province, Postal Code	_____
To receive Invoices via email or to update an existing email address check the box and enter the new email address	<input type="checkbox"/> Email Address	_____
		_____

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**Adecco Employment Services Limited**  
 Lockbox # T46033  
 P.O. Box 46033, Postal Station "A"  
 Toronto, Ontario, M5W 4K9  
**RETURN SERVICE REQUESTED**

**HELI-ONE CANADA INC**  
**ACCOUNTS PAYABLE\***  
 4740 AGAR DRIVE  
 RICHMOND BC V7B 1A3

**ORIGINAL INVOICE**

**INVOICE #:** 68064792  
**INVOICE DATE:** 05/02/2016  
**AMOUNT DUE:** \$4,635.59  
**CUSTOMER #:** 1869449  
**BILL TO ID:** 3491545  
**OFFICE ID:** 020603  
**PO #:**  
**GST/HST Reg#:** 86958 9697

DEPT CODE:758

NAME	WEEK END DATE	DESCRIPTION	LABOR TYPE	HOURS	RATE	TAX	TOTAL W/ TAX	TRANSACTION NUMBER
<b>Xref Track ID:AM14822</b>								
Lee Seungha	05/01/2016	DOCUMENT CONTROL SR	REG	40.00	\$36.14	\$72.28	\$1,517.88	45867591-6527
Approved on 05/02/2016 david.taylor@heli-one.ca Confirmation/TC # 1411796286								
				<b>40.00</b>		<b>\$72.28</b>	<b>\$1,517.88</b>	
<b>Xref Track ID:AM14837</b>								
Mou Tyson	05/01/2016	ADMINISTRATIN JR CPE	REG	37.50	\$31.50	\$59.06	\$1,240.31	45867590-6527
				<b>37.50</b>		<b>\$59.06</b>	<b>\$1,240.31</b>	
<b>Xref Track ID:AM14837-1</b>								
Wong Nancy	05/01/2016	ADMINISTRATIN JR CPE	REG	40.00	\$27.72	\$55.44	\$1,164.24	45865802-6527
Approved on 05/02/2016 john.seckel@heli-one.ca Confirmation/TC # 1411644870								
				<b>40.00</b>		<b>\$55.44</b>	<b>\$1,164.24</b>	

SUBTOTAL FOR: DEPT CODE:758

117.50

\$186.78

\$3,922.43

Tax Summary	Subtotal	GST Total	QST Total	PST Total	HST Total	Total Tax
	\$3,735.65	\$186.78	\$0.00	\$0.00	\$0.00	\$186.78

**HOURS SUMMARY**

STRAIGHT TIME: 147.50  
 OVER TIME : 0.00  
 OTHER TIME : 0.00  
**TOTAL HOURS:** 147.50

**INVOICE TOTAL:** \$4,414.85  
**GST:** \$220.74  
**QST:** \$0.00  
**PST:** \$0.00  
**HST:** \$0.00

**TOTAL AMOUNT DUE:** \$4,635.59

Continued From Prior Page....

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**HELI-ONE CANADA INC**  
**ACCOUNTS PAYABLE\***  
**4740 AGAR DRIVE**  
**RICHMOND BC V7B 1A3**

**ORIGINAL INVOICE**

**INVOICE #:** 68047267  
**INVOICE DATE:** 04/18/2016  
**AMOUNT DUE:** \$1,214.30  
**CUSTOMER #:** 1869449  
**BILL TO ID:** 3491545  
**OFFICE ID:** 020603  
**PO #:**  
**GST/HST Reg#:** 86958 9697

DEPT CODE:758

NAME	WEEK END DATE	DESCRIPTION	LABOR TYPE	HOURS	RATE	TAX	TOTAL W/ TAX	TRANSACTION NUMBER
Xref Track ID:AM14822								
Lee Seungha	04/03/2016	DOCUMENT CONTROL SR	REG	32.00	\$36.14	\$57.82	\$1,214.30	45849787-6527
				<b>32.00</b>		<b>\$57.82</b>	<b>\$1,214.30</b>	

SUBTOTAL FOR: DEPT CODE:758

32.00 \$57.82 \$1,214.30

Tax Summary	Subtotal	GST Total	QST Total	PST Total	HST Total	Total Tax
	\$1,156.48	\$57.82	\$0.00	\$0.00	\$0.00	\$57.82

Open Invoice Status for Bill To ID 3491545 as of 04/17/2016. This invoice is not included in the summary below.

1-30 Days	31-60 Days	61-90 Days	91-120 Days	121-150 Days	Over 151 Days
\$3,039.29	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

This represents the outstanding balance for this bill to only. There may be additional balances for other bill to's associated with this customer  
 If copies of outstanding invoices are required, please contact : (416) 646-3322

Except as otherwise provided in a current written agreement between the parties, Invoice payments are due in full upon receipt. Please pay invoices promptly to avoid late fees and/or interest charges. After payments are made, any disputes must be communicated within 60 days from the invoice date. In the event that you do not dispute the invoiced amounts within (60) days of invoice date the billed amounts will be deemed accurate.

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**P.O. Box 46033, Postal Station "A"**  
**Toronto, Ontario, M5W 4K9**  
**GST/HST Reg#:** 86958 9697

CUSTOMER SERVICE : (416) 646-3322

**HELI-ONE CANADA INC**  
**ACCOUNTS PAYABLE\***  
**4740 AGAR DRIVE**  
**RICHMOND BC V7B 1A3**

**Amount Due:** \$1,214.30  
**Customer Number:** 1869449  
**Invoice Date:** 04/18/2016  
**Invoice Number:** 68047267  
**Payment Terms:** PAYABLE UPON RECEIPT

Please check this box if change of address is required and fill in the appropriate information in space provided

☐ Company Name  
☐ Bill To Name  
☐ Bill To Address  
☐ City, Province, Postal Code

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☐ Email Address

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**HELI-ONE CANADA INC**  
**ACCOUNTS PAYABLE\***  
**4740 AGAR DRIVE**  
**RICHMOND BC V7B 1A3**

**ORIGINAL INVOICE**

**INVOICE #:** 68047268  
**INVOICE DATE:** 04/18/2016  
**AMOUNT DUE:** \$607.15  
**CUSTOMER #:** 1869449  
**BILL TO ID:** 3491545  
**OFFICE ID:** 020603  
**PO #:**  
**GST/HST Reg#:** 86958 9697

DEPT CODE:758

NAME	WEEK END DATE	DESCRIPTION	LABOR TYPE	HOURS	RATE	TAX	TOTAL W/ TAX	TRANSACTION NUMBER
Xref Track ID:AM14822								
Lee Seungha	03/27/2016	DOCUMENT CONTROL SR	REG	16.00	\$36.14	\$28.91	\$607.15	45849786-6527
				16.00		\$28.91	\$607.15	

SUBTOTAL FOR: DEPT CODE:758

16.00 \$28.91 \$607.15

Tax Summary	Subtotal	GST Total	QST Total	PST Total	HST Total	Total Tax
	\$578.24	\$28.91	\$0.00	\$0.00	\$0.00	\$28.91

Open Invoice Status for Bill To ID 3491545 as of 04/17/2016. This invoice is not included in the summary below.

1-30 Days	31-60 Days	61-90 Days	91-120 Days	121-150 Days	Over 151 Days
\$3,039.29	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

This represents the outstanding balance for this bill to only. There may be additional balances for other bill to's associated with this customer  
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**Toronto, Ontario, M5W 4K9**  
**GST/HST Reg#:** 86958 9697

CUSTOMER SERVICE : (416) 646-3322

**HELI-ONE CANADA INC**  
**ACCOUNTS PAYABLE\***  
**4740 AGAR DRIVE**  
**RICHMOND BC V7B 1A3**

**Amount Due:** \$607.15  
**Customer Number:** 1869449  
**Invoice Date:** 04/18/2016  
**Invoice Number:** 68047268  
**Payment Terms:** PAYABLE UPON RECEIPT

Please check this box if change of address is required and fill in the appropriate information in space provided

☐ Company Name  
☐ Bill To Name  
☐ Bill To Address  
☐ City, Province, Postal Code

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**HELI-ONE CORPORATE  
 ACCOUNTS PAYABLE  
 4740 AGAR DRIVE  
 RICHMOND BC V7B 1A3**

**ORIGINAL INVOICE**

**INVOICE #:** 68064794  
**INVOICE DATE:** 05/02/2016  
**AMOUNT DUE:** \$1,098.17  
**CUSTOMER #:** 2036868  
**BILL TO ID:** 3280805  
**OFFICE ID:** 020603  
**PO #:**  
**GST/HST Reg#:** 86958 9697

DPT CODE:995

NAME	WEEK END DATE	DESCRIPTION	LABOR TYPE	HOURS	RATE	TAX	TOTAL W/ TAX	TRANSACTION NUMBER
Xref Track ID:SN13504								
Kim Minsoo	05/01/2016	CLERICAL	REG	37.50	\$27.89	\$52.29	\$1,098.17	45867328-6527
Approved on 05/02/2016 Morten.Johannessen@heli-one.ca Confirmation/TC # 1411912502								
				37.50		\$52.29	\$1,098.17	

SUBTOTAL FOR: DPT CODE:995

37.50 \$52.29 \$1,098.17

Tax Summary	Subtotal	GST Total	QST Total	PST Total	HST Total	Total Tax
	\$1,045.88	\$52.29	\$0.00	\$0.00	\$0.00	\$52.29

Open Invoice Status for Bill To ID 3280805 as of 05/01/2016. This invoice is not included in the summary below.

1-30 Days	31-60 Days	61-90 Days	91-120 Days	121-150 Days	Over 151 Days
\$374.89	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

This represents the outstanding balance for this bill to only. There may be additional balances for other bill to's associated with this customer  
 If copies of outstanding invoices are required, please contact : (416) 646-3322

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**Toronto, Ontario, M5W 4K9**  
**GST/HST Reg#:** 86958 9697

CUSTOMER SERVICE : (416) 646-3322

**HELI-ONE CORPORATE  
 ACCOUNTS PAYABLE  
 4740 AGAR DRIVE  
 RICHMOND BC V7B 1A3**

**Amount Due:** \$1,098.17  
**Customer Number:** 2036868  
**Invoice Date:** 05/02/2016  
**Invoice Number:** 68064794  
**Payment Terms:** PAYABLE UPON RECEIPT

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☐ Bill To Name  
 Bill To Address  
 City, Province, Postal Code

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☐ Email Address

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