



## WELCOME PACKAGE

Client#: [REDACTED]

Dear [REDACTED],

My name is Ronan Levy and I am the founder of TDF Debt Advisory Law PC.

I would like to take this opportunity to say welcome to our team! You have just taken new steps towards reducing and eliminating your debt, and we are thrilled to begin this journey with you, Congratulations!

As a commitment to you, we here at TDF Debt Advisory Law PC will strive to do our best everyday to make this experience as comfortable as possible and I feel very confident saying that you are in the hands of the best debt negotiators.

As you have already discussed with your debt consultant, settling financial obligations at a reduced amount is the fastest and least expensive method of becoming debt free, and often the best way to avoid bankruptcy. That is why it is extremely important that you take a few moments to read all the content enclosed in this package and follow the 4 simple step instructions. This will help you gain a strong understanding of what to expect over the course of the program and how your debt settlement plan will work for you.

Along the way, if you have any questions regarding anything at all, please feel free to contact us, we are here for you and we are on your team! Once again, congratulations on choosing TDF Debt Advisory Law PC!

Let's Begin...

### STEP #1:

#### Send us the information we need to help you!

Over the next 5 days, our team will be working diligently to get you set up in our program and we need your help. Enclosed are three forms to fill out and fax or e-mail back to us within this time. Each of these forms are located on the following pages, please fax them to:

1 (866) 472-8738 or e-mail them to [clients@debtdconsolidationlaw.ca](mailto:clients@debtdconsolidationlaw.ca).

- **Financial Capacity Assessment and Proof of Income (Most Recent Pay Stub)**
- **Financial Hardship Letter**

## **STEP #2**

### **Eliminate harassing calls and collection letters!**

As your debt ages, your creditors **will** call you and send collection notices. The first thing to understand is that the only reason they are calling is because they want their money back. That's it, that's all, it is not personal. You have the right to privacy and do not need to answer to a bill collector, so if you receive a call from any of your enrolled creditors, please contact your assigned law clerk and he/she will be able to help eliminate the calls being directed to you.

When you receive statements from the creditors, please forward them to our office so we can ensure we have the most recent listing for each account.

## **STEP #3**

### **Follow the Payment Plan outlined in the Client Retainer Agreement**

As a team we need to work together, and it is paramount to the success of our relationship and your debt elimination plan, that all payments are made every month. As you know, settlements cannot be made without money so we need your payments to clear throughout the duration of the program while we commit to helping you, in five years or less, reach your goal of debt freedom!

## **STEP #4**

### **Stay in touch and hang in there!**

It usually takes six to eight months to settle your first debt due to the time it takes to save a sufficient amount in our mixed trust account. We understand that you will be anxious to see your first debt settled and as a member of your team, we pledge to do our best to get that done as soon as sufficient funds are available. Once that process begins, there will be occasions when settlements are time sensitive and we may need to reach you quickly, so please be sure to keep us up to date with all of your current contact information.

Over the next few days, your dedicated law clerk will be assigned to you and will be calling to welcome you into our plan. If you have any questions before then or throughout your time with us, any law clerk can be reached toll free at: **1 (866) 833-1992**, Monday & Tuesday from 8:30AM – 6:00PM, Wednesday & Thursday from 8:30AM – 5:30PM, and Friday from 8:30 AM – 1:00 PM (all times are EST)

Once again Congratulations on taking the first step to debt freedom.

Here's to the Journey!

Ronan Levy  
Barrister & Solicitor



## Financial Capacity Assessment

Please include all details as accurately as possible &  
**Fax us your Proof of Income (Most Recent Pay Stub)**

### Monthly Income

Client Net Monthly Income (After taxes)	\$
Spouse Net Monthly Income (After taxes)	\$
Other Income (Alimony, Child Support etc)	\$
<b>Total Household Income</b>	<b>\$</b>

### Monthly Expenses

Mortgage/Rent	\$	Car Insurance	\$
Property Taxes	\$	Home Insurance	\$
Food	\$	Life Insurance	\$
Child Care	\$	Clothing	\$
Medical	\$	Alimony/Support	\$
Phone/Cell	\$	Membership Dues	\$
Cable	\$	Personal (Toiletries, etc)	\$
Internet	\$	Car Loan/Lease	\$
Hydro	\$	Student Loans	\$
Heating	\$	Credit Cards	\$
Water	\$	Loans	\$
Public Transit	\$	Entertainment	\$
Gas/Car Maintenance	\$	Other	\$
		<b>Total Expenses</b>	<b>\$</b>

<b>Cash Flow (Income – Expenses)</b>	<b>\$</b>
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<b>Assets</b>	<b>(Value)</b>		<b>(Value)</b>
House	\$	Cottage	\$
Vehicle 1	\$	Savings/Other	\$
Vehicle 2	\$	<b>Total Assets</b>	<b>\$</b>

<b>Liabilities</b>	<b>(Total Owed)</b>		<b>(Total Owed)</b>
Mortgages	\$	Student Loans	\$
Taxes (Income, etc)	\$	Unsecured Debts	\$
Car Loan	\$	<b>Total Liabilities</b>	<b>\$</b>

<b>Net Worth (Assets – Liabilities)</b>	<b>\$</b>
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Number of Dependents: \_\_\_\_\_

Client Name: \_\_\_\_\_

# **Financial Hardship Letter**

This form will be needed by our team to help negotiate your settlement, for the purpose of influencing creditors to accept a better settlement in some cases. This copy is for our reference only.

Remember, people do not intentionally fall into a position of financial hardship, something in life changes that prevents the ability to meet creditor's demands for payment obligations. The reason(s) may be one or more of the following: loss of work/job, injury or change in health, marital separation or other factors that affect your ability to make payments. Please state the reason you are seeking debt management and provide supporting documentation when submitting this information back to us. Remember to write legibly.

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Print Name: \_\_\_\_\_ Client Signature: \_\_\_\_\_ Date: \_\_\_\_\_