



For the purposes of this form:

“**social assistance**” includes assistance within the meaning of the *Employment and Assistance Act* and the *Employment and Assistance for Persons with Disabilities Act*;

“**support**” includes maintenance.

## PART 1: INCOME

You must complete Part 1 if:

- (a) there is a claim, either by you or against you, for spousal support, or
- (b) there is a claim, either by you or against you, for child support and you are required by the *Child Support Guidelines* to provide income information.

1 I am

- employed as \_\_\_\_\_  
by \_\_\_\_\_
- self-employed as \_\_\_\_\_
- unemployed since 1 December 2012

2 I am paid

- every 2 weeks     twice a month     monthly
- other: \_\_\_\_\_

3 I have attached a copy of each of the applicable documents to my financial statement:

- every personal income tax return I have filed for each of the three most recent taxation years, together with any attachments
- every income tax notice of assessment or reassessment I have received for each of the three most recent taxation years
- (if you are an employee)** my most recent statement of earnings indicating the total earnings paid in the year to date, including overtime, or where such a statement is not provided by my employer, a letter from my employer setting out that information, including my rate of annual salary or remuneration
- (if you are receiving Employment Insurance benefits)** my three most recent EIC benefit statements
- (if you are receiving Worker’s Compensation benefits)** my three most recent WCB benefit statements
- (if you are receiving Social Assistance)** a statement confirming the amount that I receive
- (if you are self-employed)** for the three most recent taxation years
  - (i) the financial statements of my business or professional practice, other than a partnership, and
  - (ii) a statement showing a breakdown of all salaries, wages, management fees or other payments or benefits paid to, or on behalf of, persons or corporations with whom I do not deal at arm’s length,

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- (if you are a partner in a partnership)** confirmation of my income and draw from, and capital in, the partnership for its three most recent taxation years
- (if you control a corporation)** for its three most recent taxation years
- (i) the financial statements of the corporation and its subsidiaries, and
- (ii) a statement showing a breakdown of all salaries, wages, management fees or other payments or benefits paid to, or on behalf of, persons or corporations with whom the corporation and every related corporation does not deal at arm's length, and
- (if you are a beneficiary under a trust)** the trust settlement agreement and the trust's three most recent financial statements.

## ANNUAL INCOME

- |    |  |                |                |
|----|--|----------------|----------------|
| 1  | Employment income <i>(include wages, salaries, commissions, bonuses, tips and overtime)</i>          |                | \$ _____       |
| 2  | Other employment income  | +              | \$ _____       |
| 3  | Pension income <i>(include CPP, Old Age Security, disability, superannuation and other pensions)</i> | +              | \$ _____       |
| 4  | Employment insurance benefits  | +              | \$15,324       |
| 5  | Taxable dividends from Canadian corporations   | +              | \$ _____       |
| 6  | Interest and other investment income   | +              | \$200          |
| 7  | Net partnership income: limited or non-active partners only  | +              | \$ _____       |
| 8  | Rental income  | Gross \$ _____ | Net + \$ _____ |
| 9  | Taxable capital gains  | +              | \$ _____       |
| 10 | Child support  |                |                |
|    | (a) Total amount for children from another relationship or marriage                                  | \$ _____ *     |                |
|    | (b) Total amount for children from this relationship or marriage                                     | \$ _____ *     |                |
|    | (c) Taxable amount for children from another relationship or marriage                                | +              | \$ _____       |
|    | (d) Taxable amount for children from this relationship or marriage                                   | +              | \$ _____       |
| 11 | Spousal support  |                |                |

(a) From another relationship or marriage		+ \$ _____
(b) From this relationship or marriage		+ \$ _____
12 Registered retirement savings plan income		+ \$10,000
13 Other income <i>(include any taxable income that is not included on lines 1 to 17)</i>		+ \$ _____
14 Net self-employment income <i>(include business, professional, commission, fishing and farming income)</i>	Gross \$ _____	Net + \$ _____
15 Workers' compensation benefits		+ \$ _____
16 Total social assistance payments		+ \$ _____
17 Net federal supplements		+ \$ _____
<b>A Total Income:</b>		<b>A = \$25,524</b>

(\*Do not add these items into the total at A)

### TOTAL BENEFITS

List all allowances and amounts received and all non-monetary benefits from all sources, that are not included in total income at Line A. You do not have to include here any Child Tax Benefit or BC Family Bonus that you receive for your children.

**B Total Benefits:** **B = \$0**

### ADJUSTMENTS TO INCOME

You must complete this section if

- (a) there is a claim, either by you or against you, for spousal support, or
- (b) there is a claim, either by you or against you, for child support and you are required by the Child Support Guidelines to provide income information.

### Deductions from Income:

1 Taxable amount of child support I receive	\$ _____
2 Spousal support I receive from the other party	+ \$ _____

- 3 Union and professional dues + \$250
- 4 Other employment expenses (*Refer to Schedule III of the Child Support Guidelines*):  
*Specify* + \$ \_\_\_\_\_
- 5 Social assistance I receive for other members of my household and included in my total income + \$ \_\_\_\_\_
- 6 Dividends from taxable Canadian corporations
- (a) taxable amount of dividends a \$ \_\_\_\_\_
- minus (b) actual amount of dividends - b \$ \_\_\_\_\_
- Excess portion of dividends (a - b) = \$ \_\_\_\_\_ → + \$ \_\_\_\_\_
- 7 Actual business investment losses during the year + \$ \_\_\_\_\_
- 8 Carrying charges and interest expenses paid and deductible under the *Income Tax Act* (Canada) + \$ \_\_\_\_\_
- 9 Prior period earnings
- (a) if net self-employment income included in total income includes an amount earned in a prior period, the amount earned in the prior period. a \$ \_\_\_\_\_
- minus (b) reserves - b \$ \_\_\_\_\_
- Prior period earnings (a - b) = \$ \_\_\_\_\_ → + \$ \_\_\_\_\_
- 10 Portion of partnership and sole proprietorship income required to be reinvested + \$ \_\_\_\_\_

**C Total Deductions from Income:** **C = \$250**

**Additions to Income:**

- 1 Capital gains
- (a) actual capital gains a \$ \_\_\_\_\_
- minus (b) actual capital losses - b \$ \_\_\_\_\_
- minus (c) taxable capital gains - c \$ \_\_\_\_\_
- Total capital gains (a - b - c) = \$ \_\_\_\_\_ → + \$ \_\_\_\_\_

*(If amount is zero or less than zero, record "0" on this line)*

2 Payments to family members and other non-arm's length persons

(a) salaries, benefits, wages or other payments to family members or other non-arm's length persons, deducted from self-employment income a \$ \_\_\_\_\_

minus (b) portion of payments necessary to earn self-employment income - b \$ \_\_\_\_\_

Non-arm's length payments (a - b) = \$ \_\_\_\_\_ → + \$ \_\_\_\_\_

3 Allowable capital cost allowance for real property + \$ \_\_\_\_\_

4 Employee stock options in Canadian-controlled private corporations exercised *(If some or all of the shares are disposed of in the same year you exercise the option, do not include those shares in the calculation)*

(a) value of shares when options are exercised a \$ \_\_\_\_\_

minus (b) amount paid for shares - b \$ \_\_\_\_\_

minus (c) amount paid to acquire option to purchase shares - c \$ \_\_\_\_\_

Value of employee stock options (a - b - c) = \$ \_\_\_\_\_ → + \$ \_\_\_\_\_

**D Total Additions to Income: D = \$0**

**OTHER ADJUSTMENTS TO INCOME FOR SPOUSAL SUPPORT**

*Complete this section only if there is a claim, either by you or against you, for spousal support.*

1 Total child support I receive + \$ \_\_\_\_\_

2 Social assistance I receive for other members of my household + \$ \_\_\_\_\_

3 Child Tax Benefit + \$3,456

4 BC Family Bonus + \$ \_\_\_\_\_

**E Total Other Adjustments: E = \$3,456**

## INCOME SUMMARY

### ANNUAL INCOME FOR A CHILD SUPPORT CLAIM

<b>Total income</b>	[from line A]	A \$25,524
<i>minus</i>	Total deductions from income [from line C]	– C \$250
<i>plus</i>	Total additions to income [from line D]	+ D \$0
<b>Annual income to be used for a Child Support table amount</b>		<b>= \$25,274</b>
<i>plus</i>	Spousal support <i>received</i> from the other party (if any)	+ \$0
<i>minus</i>	Spousal support <i>paid</i> to the other party (if any)	– \$0
<b>Annual income to be used for a special or extraordinary expenses claim</b>		<b>= \$25,274</b>

### ANNUAL INCOME FOR A SPOUSAL SUPPORT CLAIM

<b>Total income</b>	[from line A]	A \$25,524
<i>minus</i>	Total deductions from income [from line C]	– C \$250
<i>plus</i>	Total additions to income [from line D]	+ D \$0
<i>plus</i>	Total other adjustments [from line E]	+ E \$3,456
<b>Annual income to be used for a spousal support claim</b>		<b>= \$28,630</b>
<b>Total Benefits</b>	[from line B]	<b>B \$0</b>

## PART 2: EXPENSES

*You do not have to complete Part 2 if the only support claimed is child support in the amount set out in the Child Support Tables and all children for whom support is claimed are under the age of majority, 19 years in British Columbia.*

### ANNUAL EXPENSES

Estimate your **annual** expenses:

<b>Compulsory deductions</b>	
CPP contributions	
Employment insurance premiums	
Income taxes	\$2,700
Employee pension contributions to a Registered Pension Plan	

<b>Personal</b>	
Clothing	\$600
Hair care	\$180
Toiletries, cosmetics	\$120
Education:	

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<b>Compulsory deductions, continued</b>	
Other:	
<b>Housing</b>	
Rent or mortgage	\$9,600
Property taxes	
Homeowner's/Tenant's insurance	\$300
Water, sewer and garbage	
Strata fees	
House repairs and maintenance	\$300
Other:	
<b>Utilities</b>	
Heat	
Electricity	\$720
Telephone	\$960
Cable TV	\$660
Other: internet	\$360
<b>Household expenses</b>	
Food	\$6,000
Household supplies	\$240
Meals outside the home	
Furnishings and equipment	\$600
Other:	
<b>Transportation</b>	
Public transit, taxis	
Gas and oil	\$2,400
Car insurance and licence	\$1,800
Parking	\$240
Repairs and maintenance	\$240
Lease payments	
Other: car loan	\$600
<b>Health</b>	
MSP premiums	\$768
Extended health plan premiums	
Dental plan premiums	
Health care (net of coverage)	
Drugs (net of coverage)	\$180
Dental care (net of coverage)	\$360
Other:	

<b>Personal, continued</b>	
Life insurance	\$600
Dry cleaning/laundry	\$240
Entertainment, recreation	\$2,400
Alcohol, tobacco	
Gifts	
Other:	
<b>Children</b>	
Child care	
Clothing	\$1,200
Hair care	\$600
School fees and supplies	\$600
Entertainment, recreation	\$3,600
Activities, lessons	\$600
Gifts	\$1,200
Insurance	
Other: transit pass	\$1,440
<b>Savings for the future</b>	
RRSP	
RESP	
Other:	
<b>Support payments to others</b>	
<b>Debt payments</b>	
Canadian Tire MasterCard	\$1,200
VanCity personal loan	\$600
<b>Other</b>	
Charitable donations	
Vacation	
Pet care	
Newspapers, publications	\$120
Reserve for income tax	
Other:	

**F Total expenses: F = \$43,728**

### PART 3: ASSETS AND DEBTS

*You do not have to complete Part 3 if the only support claimed is child support in the amount set out in the*

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*Child Support Tables and all children for whom support is claimed are under the age of majority.*

**ASSETS**

Real estate equity		\$217,810
Address: 123 Queen Street, Vancouver, British Columbia		
Market value:	\$650,000	
Mortgage balance:	\$432,190	
Address:		
Market value:		
Mortgage balance:		
Address:		
Market value:		
Mortgage balance:		
Cars, boats, vehicles		+ \$17,214
Make and year: 2002 Dodge Dakota pickup truck		
Market value:	\$5,000	
Loan balance:		
Make and year: 2006 Hyundai Elantra		
Market value:	\$15,000	
Loan balance:	\$2,786	
Make and year:		
Market value:		
Loan balance:		
Pension plans		
Other property		
Bank or other account ( <i>include RRSPs</i> )		+ \$53,243
Stocks and bonds		
Life insurance ( <i>cash surrender value</i> )		
Money owing to me		
Name of debtor:		
Name of debtor:		
Name of debtor:		
Other ( <i>attach list if necessary</i> )		+ \$10,000
Stamp collection	\$10,000	

**G Asset Value Total**

**G = \$298,267**

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ANNUAL DEBT PAYMENTS	Balance Owing	Annual Payment
Credit card debt		
Type of card: Canadian Tire MasterCard		\$1,200
Balance owing:	\$9,487	
Date of last payment: 15 February 2013		
Reason for borrowing: to meet living expenses		
Type of card:		
Balance owing:		
Date of last payment:		
Reason for borrowing:		
Type of card:		
Balance owing:		
Date of last payment:		
Reason for borrowing:		
Bank or finance company ( <i>do not include amount owing on mortgage</i> )		
Nature of debt: VanCity personal loan		+ \$600
Balance owing:	\$3,452	
Date of last payment: 1 March 2013		
Reason for borrowing: to meet living expenses		
Nature of debt: Hyundai finance		+ \$600
Balance owing:	\$2,786	
Date of last payment: 20 February 2013		
Reason for borrowing: to purchase Elantra		
Nature of debt:		
Balance owing:		
Date of last payment:		
Reason for borrowing:		
Department store		
Balance owing:		
Date of last payment:		
Reason for borrowing:		
Other ( <i>attach list if necessary</i> )		
Loan from parents to meet living expenses	\$15,000	\$0
<b>H Debt Payment Total</b>		<b>H = \$2,400</b>

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**SCHEDULE 1: SPECIAL OR EXTRAORDINARY EXPENSES**

Complete if you claim special or extraordinary expenses as part of a child support claim.

Name of child:	Jennifer Jean Doe		Jeffrey Jonas Doe	
	Gross amount	Net amount*	Gross amount	Net amount*
Child care expenses				
Medical/dental insurance premiums attributable to child				
Health related expenses over \$100	\$400	\$400	\$243	\$243
Extraordinary expenses for primary or secondary school	\$320	\$320	\$400	\$400
Post secondary education expenses		\$ _____		
Extraordinary extracurricular expenses	\$1,200	\$1,200	\$800	\$800
<i>Minus</i> contributions from child	– \$200	– \$200		
<b>Total</b>	<b>= \$2,120</b>	<b>= \$2,120</b>	<b>= \$1,443</b>	<b>= \$1,443</b>

Name of child:				
	Gross amount	Net amount*	Gross amount	Net amount*
Child care expenses				
Medical/dental insurance premiums attributable to child				
Health related expenses over \$100				
Extraordinary expenses for primary or secondary school				
Post secondary education expenses				
Extraordinary extracurricular expenses				
<i>Minus</i> contributions from child				
<b>Total</b>				

\* To calculate the net amount, subtract, from the gross amount, subsidies, benefits, income tax deductions or credits related to the expense. Give details below.