THE QUEEN'S BENCH (FAMILY DIVISION)

				Centre	
ЗЕТ	WEEN:				
					petitioner
			- and -		
					respondent
-					
	FINANCIAL STAT				
	SWORN/AFFIR	MED:			
-					
					<u> </u>
		(Name, address a	and telephone numbe	er of party filing)	

THE QUEEN'S BENCH (FAMILY DIVISION)

	c	Centre	
BETWEEN:			
		р	etitioner
	– and –		
		resp	oondent
	FINANCIAL STATEN	MENT	
FINANCIAL STATEMENT OF	(Petitio	oner/Respondent)	
l,	, of the	of	
in the province of	, SWEAR (or	r AFFIRM) THAT:	
 Attached are the follow Part 1 — Annual Inc. Part 2 — Monthly Ex. Part 3 — Assets of Ex. Part 4 — Debts of Both 	come xpenses Both Parties		
2. To the best of my know financial statement is t		d belief, the information set out in	this
SWORN (or affirmed) before me at of of in the Province of Manitoba, this day of	the),)		
Deputy Registrar for Queen's Benc A Commissioner for Oaths in and fo The Province of Manitoba			

PART 1 – ANNUAL INCOME

1.	I am	
		employed as (describe occupation)
		by (name and address of employer)
		self-employed, carrying on business under the name of (name and address of business)
		·
		unemployed since
2.	(a)	Attached are copies of my Canada Revenue Agency income and deduction computer printouts for each of the three most recent taxation years,
	(b)	I cannot obtain the printouts for the years,, because (give reasons)

3. (a) I expect my total income for this year to be as follows:

SOI	IRCES	ΩF	INC	OME

Employment income (wages, salary, commissions, including overting		\$	
and bonuses) Other employment income (including tipe and gratuities)			c
Other employment income (<i>including tips and gratuities</i>) Old age security pension			Φ
Canada or Quebec Pension Plan benefits			φ
Other pensions or superannuation			φ
Employment insurance benefits			φ
Taxable amount of dividends from taxable Canadian corporations			\$
Interest and other investment income			\$
Net partnership income			\$
Rental income	Gross \$	Net	\$
Taxable capital gains	σισσο ψ		\$
Spousal support			\$
Child support (taxable only)			\$
Registered Retirement Savings Plan income			\$
Business income	Gross \$	Net	\$
Professional income	Gross \$	Net	
Commission income	Gross \$	Net	-:
Farming income	Gross \$	Net	· · · · · · · · · · · · · · · · · · ·
Fishing income	Gross \$	Net	
Workers' Compensation benefits	Οιουυ ψ <u></u>		\$
Social Assistance payments			\$
Net federal supplements			\$
Other income (specify)			\$
			Ψ
(A) TOTAL ANNUAL INC	OME:		\$
Total income as declared in most recent personal income tax return			\$
(year)			
ADJUSTMENTS TO INCOME			
Additions:			
Actual amount of dividends received from Canadian corporations			\$
Actual capital gains realized in excess of actual capital losses			\$
Salaries, benefits or other payments paid to non-arm's length perso	ns,		
and deducted from self-employment income, unless necessary to ea	arn		
self-employment income			\$
Allowable capital cost allowance for real property			\$
Employee stock options with a Canadian-controlled private corporat			
exercised (Do not include if you dispose of the shares in the same y	ear you		
exercise the option.)			
			\$
Value of shares at the time the options are exercised	\$		
Less: Amount paid for the shares	\$		
Amount paid to acquire the options to purchase the shares	\$		
	= \$		\$
(B) TOTAL ADDITIONS:			\$

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Dodu	uctions:		
Unio	n, professional dues and other employment expenses allowed under dule III		\$
Child	support received and included in total income above		\$
	sal support received from the other parent and included in total income ab	ove	\$
	al assistance received by the parent for other members of the household		\$
	ble amount of dividends from taxable Canadian corporations		\$
	ble capital gains		\$
	al amount of business investment losses		\$
	ring charges and interest expenses		\$
Self-	employment income, net of reserves, included in income for tax purposes as of the self-employment income for the 12 months ending on December		Ψ
	e reporting year	01	\$
Porti	on of partnership and sole proprietorship income that is required by the ership to be re-invested		Ψ
parti	ording to be to invested		\$
	(C) TOTAL DEDUCTIONS:		\$
	ual Income for Child Support Guidelines Table Amount Il income (A) plus additions (B) less deductions (C))		\$
(Ann	ual Income for Special or Extraordinary Expenses Amount ual Income for Child Support Guidelines Table Amount less spousal ort paid to the other parent, or, plus spousal support received		
	the other parent, as applicable)		\$
(b)	I receive child support for the following persons who are not the subjec	t of this applic	ation:
	Name	Annual amount	Taxable or not (indicate)
		\$	
(c)	I receive the following non-taxable benefits, allowances or amounts: (7 of a vehicle and room and board. Where the benefit is not an amount, of the benefit on an annual basis.)		mate of the value
	Benefit	Benefit	Annual amount or value
		•	•

PART 2 - MONTHLY EXPENSES

4. My monthly expenses are as follows and are for me and the following members of my household:

(If the payment of an expense is shared with another person, insert only the amount that you pay. Convert all

expenses incurred in a year, whether on a yearly, quarterly, weekly, or other basis, to monthly amounts. Give actual amounts where known or you can obtain the information. If this is impossible, give estimates.) **Compulsory Deductions** SUB-TOTAL Income Tax **Adult Household Members Employment insurance** Canada Pension Plan Clothina **Employer pension** Hair care Union dues Toiletries, cosmetics Insurance Education fees, supplies Other (specify) Entertainment and recreation **Household Expenses Fitness** Groceries and household Insurance Charitable donations supplies Meals outside the home Gifts to others Telephone Alcohol, tobacco Cable television Children Laundry and dry cleaning Child care Newspapers, publications Babysitting Stationery, computer supplies Clothing Vacation \$ Hair care Pet care Allowances Housing (primary residence) School fees and supplies Rent or mortgage Entertainment and recreation Taxes Insurance Home Insurance Gifts (toys, books, etc) Heat Activities, lessons and supplies Water Camp Hydro Gifts to other children Savings for the future House repairs and maintenance **RRSP** Yard maintenance **RESP** Other (specify) Other Debt (other than mortgage repayment) (calculated as in Part 4) Health Medical Insurance Drugs (Net of coverage) Lease payments (specify) Support payments to others Dental Care (Net of coverage) Optical Care (Net of coverage) (specify)* Reserve for income taxes Other (specify) **Transportation** Other (specify) Public transit, taxis, etc. Car Operation TOTAL Gas and Oil Insurance and licence Maintenance Parking **SUBTOTAL** \$_

^{*} List only persons whose support is not at issue in this application. Specify the person who is supported, whether the payments are tax deductible to you, and whether they are voluntary or pursuant to a court order or agreement.

(Complete only if claiming child support and special or extraordinary expenses.)				
I have the following special or extraordinary expense:	s for the named childre	n:		
(a) Child care expenses				
Name of child	Gross annual cost	Net annual cost		
(specify expense)	\$	\$		
(apeciny expense)	\$	\$		
(b) Health-related expenses that exceed insurance reimburs	ement by at least \$100 ar	nnually:		
Name of child	Gross annual cost	Net annual cost		
	\$	\$		
(specify expense)	\$	\$		
Name of child	Gross annual cost \$	Net annual cost \$ \$		
(d) Post-secondary education				
Name of child	Gross annual cost	Net annual cost		
	\$	\$		
(specify expense)	\$	\$		
(e) Extraordinary expenses for extracurricular activities				
Name of child	Gross annual cost	Net annual cost		
(specify expense)	\$	\$		
(specify expense)	Ф	Φ.		

PART 3 — ASSETS OF BOTH PARTIES

6. Our assets are as follows:

(Include all assets, whether or not shareable under The Family Property Act, including jointly owned assets. Where there is a claim under The Family Property Act, identify with an asterisk (*) those assets alleged to be non-shareable. Do not complete the column headed "Market Value at Date of Separation" if there is no claim under The Family Property Act.)

	Asset in Possession of Petitioner (P) or Respondent (R)	Present Market Value	Market Value at Date of Separation
Real estate		\$	\$
Cars, boats, vehicles (municipal address)		\$	\$
Household goods, furniture and appliances		\$	\$
Tools, sports and hobby equipment		\$	\$
Bank accounts and cash on hand		\$	\$
R.R.S.P.		\$	\$
Bonds, shares, term deposits, investment certificates, mutual funds		\$	\$
Money owed to us		\$	\$
Life Insurance (cash value)		\$	\$
Pension plans		\$	\$
Business assets		\$	\$
Other (specify)		\$	\$
TOTAL		\$	\$

PART 4 — DEBTS AND OTHER LIABILITIES OF BOTH PARTIES

7. Our debts and liabilities are as follows:

(List all your debts and liabilities as well as any joint debts and liabilities. Identify joint liabilities with an asterisk (*). Do not complete the column headed "Amount Outstanding at Date of Separation" if there is no claim under The Family Property Act.)

	<u>Debt of</u> <u>Petitioner (P) or</u> <u>Respondent (R)</u> <u>or Joint (*)</u>		Amount Outstanding at Date of Separation	Present Monthly Payments
Mortgage		\$	\$	\$
Loans (specify)		\$ \$ \$	\$ \$ \$	\$ \$ \$
Credit cards		\$ \$ \$	\$ \$ \$	\$ \$ \$
Other (specify)		\$ \$ \$	\$ \$	\$ \$ \$
	TOTAL	\$	\$	\$