## **REQUEST TO PAY CHILD** SUPPORT DIFFERENT THAN **CHILD SUPPORT TABLE AMOUNT**

1.

4.

Form G

\$

Total \$

I ask to pay child support in an amount different than that in the child support guidelines table. My claim is based on the information provided below. Documents to support each claim are attached.

1.		Undue hardship claim								
I ask the Court to determine that if the child support guidelines table amount is ordered, the child(rer in this application and/or I will suffer undue hardship because of the reasons set out below and that household standard of living will/may be lower than that of the other parent.										
	I ask to pay support of \$ per month. I have attached documents to support each claim. The child support guidelines table amount would cause me or the child(ren) undue hardship because:									
		I have large debts. The debts came are due to my expenses to earn a l	nt and I separated, or							
☐ My expenses in relation to exercising access to the child(ren) are unusually high.										
		I have a legal duty to support anoth written agreement. A copy is attach	person. This duty is in a judo	n a judgment, order, or						
	☐ I have a legal duty to support a child(ren) other than the child(ren) named in this application. The (or child is under the age of majority or, if over the age of majority is not able to be self-supporting, due to illness or disability or other cause.									
		Name (First Middle 1.	e Last)		Date of Birth (Month/Date/Year)					
		2.								
		3.								
		4.								
	☐ I have a legal duty to support a person who is not able to be self-supporting due to illness or									
		Name (First Middle	Last)	Relationship						
	☐ Other (specify):									
	☐ Details pertaining to selections made above (attached additional pages as required):									
2.		Child over the age of majority		Additional page(s) attached						
		The child(ren) listed below have reached the age of majority and no longer require the child support guidelines table amount.								
		Name (First Middle Last)	Date of Birth (Month/Date/Year)	Reasons and documentat relating to each child	ion Amount for Child					
		1.			\$					
		2.			\$					
		3.			\$					

3. [		Split custody / Sp	plit parenting ti	me						
		There are two or more children, and at least one child lives with each of us. The custody/parenting arrangements are in the attached custody/parenting order or agreement, or as follows:								
		I ask to pay child support of \$ per m the Respondent. My claim is based on the following calculates			per month fo	onth for the support of the child(ren) living with ons:				
			Total Income (known, or imputed as in Form F)	Number of Children	Guideline Table amount for Province/ Territory of residence	Amount Payable	Name(s) of Children			
		Respondent								
		Applicant				-				
		Subtract amou by Responden								
<b>4</b> . [		Shared custody /	Shared custody / Shared parenting time							
		The child(ren) live with each of us at least 40% of the time during the year. Our custody/parenting rrangements are in the attached custody/parenting order, or are as ollows:								
		☐ Additional page(s) attached  I ask to pay child support of \$ per month for the following child(ren):								
			Date of Birth							
		1.	(Month/Date/Year)							
		2.								
		3.								
		4.								
<b>5.</b> [		My income is over	er \$150,000 per	year						
	My income is \$ I ask to pay child support in the amount of \$ per month instead of the table amount based on the following:									
							☐ Additional page(s) attached			
Т	This document is attached to and forms part of the evidence in my support variation application.									
		(Signature of Applicant)								