

# Financial Statement

Provincial Court (Family) Rules

Early Resolution and Case Management Registry

Registry location:	
Court File Number:	

I, *[full name of party]*, *[occupation]* of *[address of party, city, province]*,

SWEAR OR AFFIRM THAT:

1. The information set out in this financial statement is true, to the best of my knowledge.

2. I have made complete disclosure in this financial statement of:

*Select all options that apply*

- ☐ my income, including benefits and adjustments, if any, in Part 1
- ☐ my expenses and debts, in Part 2
- ☐ my assets, in Part 3
- ☐ income of other person(s) in my household, in Part 4
- ☐ undue hardship, in Part 5

Sworn or affirmed before me

at *[city]* British Columbia

on *[date]*

A Commissioner for taking Affidavits in British Columbia  
[print name or affix stamp of commissioner]

Signature

## PART 1 – Income

1. I am attaching a copy of each of the following documents to my financial statement:

- ☐ my tax return and related schedules for each of the three most recent taxation years; and
- ☐ any notice of assessment and reassessment issued by the CRA for each of the three most recent taxation years.

2. Income Summary:

<b>Total income before adjustments</b>		
1	My total income last year as indicated at line 150 of my [year] tax return was	\$
<b>Adjustments to total income (use annual amounts)</b>		
2	Taxable child support received (line 128 of tax return)	\$
3	Spousal support received (line 128 of tax return)	\$
4	Universal Child Care Benefit (line 117 of tax return)	\$
5	Split-pension amount (line 116 of tax return)	\$
6	Employment expenses (line 212 and 229 of tax return)	\$
7	Social assistance received for other members of your household (portion of line 145 of tax return that applies to other members)	\$
8	Excess portion of dividends from taxable Canadian Corporations (line 120 of tax return minus total amount of dividends on T5)	\$
9	Actual business investment losses (line 228 of tax return)	\$
10	Carrying charges (line 221 of tax return)	\$
11	Partnership or sole proprietorship income (any amount included in your income that is required by the partnership or sole proprietorship for capitalization purposes)	\$
12	<b>Total deductions from income</b> (add lines 2 through 11)	\$
<b>Additions</b>		
13	Capital gains and capital losses (line 197 of Schedule 3 minus line 127 of tax return – if zero or less, indicate “0” in this line)	\$
14	Net self-employment income	\$
15	Capital cost allowance for property	\$
16	Employee stock options with Canadian-controlled private corporation	\$
17	<b>Total additions to income</b> (add lines 13 through 16)	\$
18	<b>Annual income for support purposes</b> (line 1 minus line 12 plus line 17)	\$

3. *Select only one of the options below*

- ☐ I do not expect any significant changes to the total income at line 150 of my tax return this year.
- ☐ I expect my total income at line 150 of my tax return this year to be \$            because:

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4. All of my sources of income and amounts of income per month are as follows:

*Select and complete all that apply*

- ☐ Employment income of \$            from [employer]
- ☐ Employment insurance benefits of \$
- ☐ Workers Compensation Benefits of \$
- ☐ Interest and investment income of \$
- ☐ Pension income of \$
- ☐ Government assistance income of \$            from [source]
- ☐ Self-employment income of \$
- ☐ Trust income of \$
- ☐ Other income of \$            from [source]

5. I am attaching proof of my year-to-date income from all sources, including my most recent:

*Select and attach all that apply*

- ☐ pay stub or statement of earnings, or a letter from my employer stating my salary and/or wages
- ☐ employment insurance benefit statement and record of employment
- ☐ workers' compensation benefit statement
- ☐ interest and investment statement
- ☐ pension income statement
- ☐ government assistance statement
- ☐ self-employment income for the last three taxation years, including:
  - ☐ (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
- ☐ confirmation of income and draw from, and capital in, a partnership, including:
  - ☐ (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
- ☐ trust settlement agreement and the trust's three most recent financial statements
- ☐ Other (specify):

## PART 2 – Personal expenses and debts

### Expenses

An expense is the amount of money you spend on something.

*Estimate how much you pay in a month and a year for each of the expenses listed below. Note: You may be asked to provide the court with proof of an amount or a breakdown of how you came to the estimate.*

Expenses			Monthly	Yearly
<b>Housing</b>			\$	\$
	Monthly	Yearly		
Rent/Mortgage property taxes				
Property taxes and strata fees				
Utilities				
Homeowner/Renter's Insurance				
Home maintenance and repair				
Other				
Housing Subtotal:	\$	\$ →		
<b>Food &amp; Household supplies</b>			\$	\$
	Monthly	Yearly		
Groceries				
Eating out				
Household supplies such as cleaning supplies, lightbulbs, batteries, toilet paper and laundry detergent				
Other				
Food & Household supplies Subtotal:	\$	\$ →		
<b>Transportation</b>			\$	\$
	Monthly	Yearly		
Car Insurance and car loan payments				
Fuel				
Maintenance and repairs				
Public Transit, taxis and parking				
Other				
Transportation Subtotal:	\$	\$ →		
<b>Clothing &amp; Self-care</b>			\$	\$
Include clothing, hair dresser/barber and cosmetics				
<b>Health &amp; Medical</b>			\$	\$
Include regular dental care, orthodontics, medicine, eye glasses or contact lenses				
<b>Children</b>			\$	\$
Include school activities, extracurricular activities, tuition/school fees, camps, baby sitting, allowances and daycare				
<b>Miscellaneous/Other</b>			\$	\$
Include gifts & donations, alcohol, tobacco & cannabis, entertainment & recreation, pet expenses and vacations				
<b>Premiums, Contributions and Debt Repayment</b>			\$	\$
Include life or term insurance premiums, RRSP or other contributions, debt repayment (for expenses not itemized above)				
<b>Other (specify):</b>			\$	\$
<b>Total</b>			\$	\$

## Debts

A debt is an amount of money you owe someone that you have a duty to pay.

*Identify any outstanding debts. Do NOT record the monthly payment for mortgage, car loans, credit card payments or other debts included in the expenses section above, just the total balance owing.*

<b>Name of creditor</b> (name of bank, finance company, person, etc)	<b>Reason for borrowing</b> (for example, mortgage, car loan, school)	<b>Balance owing</b>
<b>Total</b>		

### PART 3 – Assets

Complete this part only if you are required to provide information about assets. See the chart in the instructions for this form to determine if this part applies to your situation.

An asset is something of value that you own or that belongs to you.

List all your assets in the table below, provide a brief description and how much the asset is currently worth (the value).

Asset	Description of the Asset	Current Value of Asset
Real Estate	Street address	Market Value
Cars/Boats/Vehicles	Make, model, year	Market Value
Cash assets (including cash and bank accounts)	Type of cash asset (e.g. cash, savings account, chequing account)	Current Balance
Investments (including TFSAs, RRSPs, stocks and bonds, pensions)	Type of investment	Current Balance
Loans and Credit (money owing to me)	Name of borrower	Amount owing
Other (including precious metals, art, jewelry or other items of high value)	Brief description	Market Value
Total		

### DISPOSITION OF ASSETS

I have sold or disposed of an asset(s) in the last two years ☐ yes ☐ no

If yes, please describe the asset(s) you sold or disposed of and indicate how much you made from the sale or disposal

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#### PART 4 – Income of Other Persons in Household

Complete this part only if you or the other party has made a claim for undue hardship in a child support claim.  
Complete all sections that apply to your circumstances.

1. ☐ I live alone.
2. ☐ I am living with *[full legal name of person I am married to or cohabitating with]*. They have an annual income of \$ .

3. ☐ I/we live with the following other adult(s):

Full legal name of adult	Annual income

4. ☐ I/we have *[number of children]* child(ren) who live(s) in the home.
5. My spouse/partner or other adult(s) residing in the home contributes about \$ per *[frequency of contribution(s)]* towards the household expenses.

## PART 5 – Undue Hardship

Complete this part only if you have made a claim for undue hardship in a child support claim.  
Select all sections that apply and complete the required information.

1. ☐ I have an unusual or excessive amount of debt I incurred to support the family prior to separation or to earn a living as follows:

Name of creditor and reason for borrowing (name of bank, finance company, etc)	Balance owing	Annual debt repayment

2. ☐ I have high costs to be able to spend time with the child(ren).  
*Specify below*

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3. ☐ I have a legal duty to support another person, such as a former spouse, or a new spouse who is too ill or disabled to support themselves.

Full legal name of adult you support	Monthly amount paid for support	Annual amount paid for support

4. ☐ I have a legal duty to support a dependant child from another relationship

Full legal name of dependant you support	Monthly amount paid for support	Annual amount paid for support

5. ☐ other undue hardship circumstances (*specify*):

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