



FINANCIAL DISCLOSURE INFORMATION

Please provide the information requested below to our office in an organized fashion. Please bundle each set of documents with a paper clip, and place a post-it note or a piece of paper on top, indicating what paragraph number those documents relate to. For example, if you are providing your tax returns, put a #1 on a post-it note, and place that on top of your bundle of tax returns.

Please deliver all documents as single-sided copies. Please do not provide us with original documents. If you are unable to gather any of the items required, please list your reason in the space provided and the day we may expect to receive them.

1. A copy of every personal income tax return you have filed for each of the 3 most recent taxation years. If you have not filed a tax return for the previous year, you must provide copies of your T4, T4A, and all other relevant tax slips and statements disclosing any and all sources of income for the previous year.	Included? <input type="checkbox"/> Yes <input type="checkbox"/> No If not, please explain:
2. A copy of every notice of assessment and reassessment issued to you for each of the 3 most recent taxation years, or a copy of the Canada Revenue Agency printout of your last 3 years' income tax returns.	Included? <input type="checkbox"/> Yes <input type="checkbox"/> No If not, please explain:

<p>3. If you are an employee, a copy of each of your 3 most recent statements of earnings indicating your total earnings paid in the year to date, including overtime, or where such a statement is not provided by your employer, a letter from your employer setting out that information, including your rate of annual salary or remuneration.</p>	<p>Included? <input type="checkbox"/> Yes <input type="checkbox"/> No If not, please explain:</p>
<p>4. If you receive income from employment insurance, social assistance, a pension, workers' compensation, disability payments, dividends or any other source, the most recent statement of income indicating the total amount of income from the applicable source during the current year or, if such a statement is not provided, a letter from the appropriate authority stating the required information.</p>	<p>Included? <input type="checkbox"/> Yes <input type="checkbox"/> No If not, please explain:</p>
<p>5. If you are a student, a statement indicating the total amount of student funding you have received during the current academic year, including loans, grants, bursaries, scholarships and living allowances.</p>	<p>Included? <input type="checkbox"/> Yes <input type="checkbox"/> No If not, please explain:</p>
<p>6. If you are self-employed in an unincorporated business:</p> <ul style="list-style-type: none"> (a) particulars or copies of every cheque issued to you during the last 6 weeks from any business or corporation in which you have an interest, or to which you have rendered a service; (b) the financial statements of your business or professional practice for the 3 most recent taxation years; and (c) a statement showing a breakdown of all salaries, wages, management fees or other payments or benefits paid to yourself, or to persons or corporations with whom you do not deal at arm's length, for the 3 most recent taxation years. 	<p>Included? <input type="checkbox"/> Yes <input type="checkbox"/> No If not, please explain:</p>

<p>7. If you are a partner in a partnership, confirmation of your income and draws from, and capital in, the partnership for its 3 most recent taxation years.</p>	<p>Included? <input type="checkbox"/> Yes <input type="checkbox"/> No If not, please explain:</p>
<p>8. If you have a 1% or more interest in a privately held corporation:</p> <ul style="list-style-type: none"> (a) the financial statements of the corporation and its subsidiaries for its 3 most recent taxation years; (b) a statement showing a breakdown of all salaries, wages, management fees or other payments or benefits paid to yourself, or to persons or corporations with whom the corporation, and every related corporation, does not deal at arm's length for the corporation's 3 most recent taxation years; and (c) a record showing your shareholder's loan transactions for the past 12 months. 	<p>Included? <input type="checkbox"/> Yes <input type="checkbox"/> No If not, please explain:</p>
<p>9. A detailed list of any special or extraordinary expenses claimed (where child support is an issue) as well as copies of receipts or other documentation providing the amount of those expenses, namely:</p> <ul style="list-style-type: none"> (a) child care costs; (b) health care and extended medical and dental insurance premiums attributable to the child; (c) uninsured health care and dental expenses; (d) extraordinary educational expenses; (e) post-secondary educational expenses; and (f) extraordinary expenses for extracurricular activities. 	<p>Included? <input type="checkbox"/> Yes <input type="checkbox"/> No If not, please explain:</p>

<p>10. If you are a beneficiary under a trust, a copy of the trust settlement agreement and copies of the trust's 3 most recent financial statements.</p>	<p>Included? <input type="checkbox"/> Yes <input type="checkbox"/> No If not, please explain:</p>
<p>11. Copies of all statements and cancelled cheques for all bank accounts held solely or jointly in your name for the most recent 6 months.</p>	<p>Included? <input type="checkbox"/> Yes <input type="checkbox"/> No If not, please explain:</p>
<p>12. Copies of credit card statements for all credit cards solely or jointly in your name for the most recent 6 months.</p>	<p>Included? <input type="checkbox"/> Yes <input type="checkbox"/> No If not, please explain:</p>
<p>13. Your monthly budget of expenses (where spousal or adult interdependent partner support is an issue).</p> <p>Please use the document attached.</p>	<p>Included? <input type="checkbox"/> Yes <input type="checkbox"/> No If not, please explain:</p>
<p>14. A sworn itemized list of your income, assets and liabilities (in the form attached as Schedule A).</p> <p>Please use the document attached. Please <u>do not sign</u> Schedule A.</p>	<p>Included? <input type="checkbox"/> Yes <input type="checkbox"/> No If not, please explain:</p>
<p>15. Copies of the most recent statement for all RRSPs, pensions, term deposit certificates, guaranteed investment certificates, stock accounts and other investments in your name or in which you have an interest.</p>	<p>Included? <input type="checkbox"/> Yes <input type="checkbox"/> No If not, please explain:</p>
<p>16. A list of any exemptions claimed (where the action involves the division of matrimonial property).</p>	<p>Included? <input type="checkbox"/> Yes <input type="checkbox"/> No If not, please explain:</p>

**SCHEDULE A TO FORM FL-17
STATEMENT OF INCOME, ASSETS AND LIABILITIES**

This is the statement of income, assets and liabilities of _____
(name) the Plaintiff/Defendant in this action.

A. INCOME

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

- (a) Employment income of \$_____ from _____ (employer);
- (b) Employment insurance benefits of \$_____;
- (c) Worker's Compensation Benefits of \$_____;
- (d) Interest and investment income of \$_____;
- (e) Pension income of \$_____;
- (f) Government assistance income of \$_____ from _____ (source);
- (g) Self-employment income of \$_____;
- (h) Other income of \$_____ from _____ (source).

My total income last year as indicated at line 150 of my 2013 tax return was \$_____.

I expect my income at line 150 of my tax return this year to be \$_____.

B. ASSETS

Asset	Particulars	Date Acquired	Value (Estimated)
1. Real Estate (List any interest in land, including leasehold interests and mortgages, whether or not you are registered as owner. Provide legal descriptions and indicate estimated market value of your interest without deducting encumbrances or costs of disposition.)(Record encumbrances under debts.)			

<p>2. Vehicles</p> <p>(List cars, trucks, motorcycles, trailers, motor homes, boats, etc.)</p>			
<p>3. Financial Assets</p> <p>(List savings and chequing accounts, cash, term deposits, GICs, stocks, bonds, Canada Savings Bonds, mutual funds, insurance policies (indicate beneficiaries), accounts receivable, etc.)</p>			
<p>4. Pensions and RRSPs</p> <p>(Indicate name of institution where accounts are held, name and address of pension plan and pension details.)</p>			
<p>5. Corporate/ Business Interests</p> <p>(List any interest you hold, directly or indirectly, in any corporation, unincorporated business, partnership, trust, joint venture, etc.)</p>			
<p>6. Other</p> <p>(List anything else of value that you own, including precious metals, collections, works of art, jewellery or household items of high value.</p> <p>Include location of any safety deposit boxes.)</p>			

C. DEBTS

Debt	Particulars	Date Incurred	Balance Owing	Monthly Payment
<p>1. Secured Debts</p> <p>(List all mortgages, lines of credit, car loans, and any other debt secured against an asset that you own.)</p>				
<p>2. Unsecured Debts</p> <p>(List all bank loans, personal loans, lines of credit, overdrafts, credit cards and any other debts that you have.)</p>				
<p>3. Other</p> <p>(List any other debts, including obligations that are relevant to a claim for undue hardship – e.g. car lease payment)</p>				

I, _____ solemnly declare that the facts set out in this document are true. I make this solemn declaration conscientiously believing it to be true and knowing that it is of the same force and effect as if made under oath.

SWORN BEFORE ME)
 at Calgary, Alberta, this ____ day of)
 _____, 2014)
)
 _____)

**A COMMISSIONER FOR OATHS
 IN AND FOR THE PROVINCE
 OF ALBERTA**

NOTE: It is an offence to make a false declaration.



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MONTHLY BUDGET OF EXPENSES OF

HOUSING AND LODGING	
Rent	
Mortgage payments	
Property tax	
Contents insurance	
Condominium fees	
Electricity	
Heating	
Water and sewer	
Repairs and maintenance	
Other	
TOTAL:	\$ -

HOUSEHOLD EXPENSES	
Food	
Supplies	
Laundry and dry cleaning	
Telephone	
Cable TV	
Internet fees	
Furniture repairs and replacements	
Cleaning expenses	
Gardening	
Other	
TOTAL:	\$ -

CHILDREN – DIRECT EXPENSES	
Clothing	
Hairdresser/barber	
Entertainment/activities	
Restaurants	
Food	
Children's allowances	
Birthdays, Christmas and gifts	
Vacation reserve	
Education savings plan	
Insurance	
Babysitter	
Toys and books	
School lunches	
Daycare	
Tuition	
Education expenses	
Counseling	
Orthodontist	
Prescriptions and medicines	
Library fees	
Other	
TOTAL:	\$ -

YOURSELF – DIRECT EXPENSES	
Clothing	
Hairdresser/personal hygiene	
Toiletries/cosmetics	
Entertainment/recreation	
Pocket money	
Educational expenses	
Birthdays, Christmas and gifts	
Restaurants	
Vacation reserve	
Prescriptions and medicines	
Orthodontist	
Life insurance premiums	
Group insurance	
Support for others	
Dog groomer	
TOTAL:	\$ -

Initial: _____

TRANSPORTATION	
Auto insurance	
License and registration	
Gas and oil	
Parking	
Auto servicing / oil change	
Public transit and taxis	
other	
TOTAL:	\$ -

MISCELLANEOUS	
Newspapers and magazines	
Cigarettes	
Liquor	
Charities	
Legal fees	
Bank/credit card service charges	
Financial planning fees	
TOTAL:	\$ -

EMPLOYMENT DEDUCTIONS	
Union or professional dues	
CPP contributions	
Employment insurance premiums	
Pension contributions	
Income tax	
Other	
TOTAL:	\$ -

MEDICAL/DENTAL	
Medical insurance	
Medical payments not covered	
Dental insurance	
Dental payments not covered	
Other	
TOTAL:	\$ -

DEBT PAYMENTS	
Credit card payments	
Bank loan payments	
Car payment	
Personal loans	
TOTAL:	\$ -

RESERVE FOR INCOME TAX INSTALLMENTS	
Monthly reserve	
TOTAL:	\$ -

SUMMARY	MONTHLY	ANNUALLY
Housing and lodging	0.00	0.00
Household expenses	0.00	0.00
Children – direct expenses	0.00	0.00
Yourself – direct expenses	0.00	0.00
Transportation	0.00	0.00
Miscellaneous	0.00	0.00
Employment deductions	0.00	0.00
Medical/dental	0.00	0.00
Debt payments	0.00	0.00
Reserve for income tax installments	0.00	0.00
TOTAL:	\$ -	\$ -

Initial: _____