# To Complete a Financial Statement

Please read these instructions carefully.

You may not have to complete this form at all. Or, you may only have to complete parts of it.

#### **DO** fill out this form if:

- there is a claim, either by you or against you, for spousal support, or variation of an existing order or agreement,
- there is a claim, either by you or against you, for child support or variation of an existing order or agreement and one or more of the following applies:
  - you are the person being asked to pay.
  - the claim is for an amount other than the amount set out in the Child Support Guidelines.
  - there is an undue hardship claim.
  - there is a claim for special or extraordinary expenses.
  - the parents have split custody (that is, there are 2 or more children and each parent has sole custody of at least one child).
  - the parents have shared custody (that is, the child or children actually live with each parent at least 40% of the time during the year).
  - one or more of the children for whom support is claimed is the age of majority (19 in B.C.) or older.
  - the person being asked to pay has acted as a parent to a child, but is not the child's natural or adoptive parent.
  - the income of the person being asked to pay is more than \$150,000.

Read carefully and fill out ONLY those sections that apply to you.

**CONFIDENTIALITY OF FINANCIAL INFORMATION:** The Provincial Court (Family) Rule 20(9) says:

A person must not disclose any information contained in a record filed under Rule 4 (financial information) except to the extent necessary for the purposes of an application under the Family Law Act.

# AFFIDAVIT Complete the affidavit after you complete the rest of the financial statement. Before you sign the affidavit: • check the boxes to indicate the parts of the financial statement you have completed. • cross out the statement that does not apply to you. If the second statement applies, briefly explain the changes you are expecting in the space provided.

Remember to sign the affidavit in the presence of a Commissioner.

Commissioners. No fee is charged at the court registry for this service.

#### **FILING**

This is the last step. Follow these instructions after you have completed the financial statement and affidavit.

#### If you are the applicant, you must:

- make 3 photocopies of your financial statement and of each document listed on page 2 that applies to you.
- attach the documents together to make 4 sets: a set of originals and 3 sets of copies.
- file the 4 sets of documents (financial statement and attached documents) at the registry when you file your application.

Take the financial statement to a Commissioner for Taking Affidavits, who will take your oath or affirmation that the information

in your financial statement is complete and true. All lawyers, notaries public and certain staff at the court registry are

have a copy of the financial statement and attached documents served on the respondent, with a copy of your application.

#### If you are the respondent, you must:

- make 3 photocopies of your financial statement and of each document listed on page 2 that applies to you.
- attach the documents together to make 4 sets: a set of originals and 3 sets of copies.
- file the 4 sets of documents (financial statement and attached documents) at the registry when you file your reply.

# FINANCIAL STATEMENT In the Provincial Court of British Columbia

i the Provincial Co	ourt of British Colur	Пріа		Court Location:	
				FMEP Number:	
In the case between	n:				
NAME					
And:					
NAME					
AFFIDAVIT					
I					
NAME (Set out the street address of the address	s for service. One or both of a fax number and	d an e-mail address may be given as	s additional addresses for service.)		
ADDRESS FOR SERVICE			CITY		
PROVINCE	POSTAL CODE	PHONE	E-MAIL	FAX	
my income	plete disclosure in this final, including benefits and a ses, in Part 2 and debts, in Part 3	_			
3. I do not anticipate	any significant changes i	n the information set	t out in this financial stater	nent.	
OR					
I anticipate the follow	owing significant changes	s in the information s	set out in this financial stat	ement:	
Sworn or affirmed befo					
at		sh Columbia			
on					

Signature

Court File Number:

A Commissioner for taking Affidavits in British Columbia

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If you are required to complete Part 1 of this form, you must include copies of certain documents with your financial statement in order to comply with section 21 of the Child Support Guidelines. Read the list carefully and check the boxes that apply to you. Once you have completed the financial statement, attach a copy of each of those documents to your financial statement.



If you fail to file these documents, the other party may make an application under section 22 of the Guidelines,

- (a) to have the application for a child support order set down for a hearing, or move for judgment; or
- (b) for an order requiring you to provide the court and the other party with the required documents.

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
- (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 OCCUPATION by NAME AND ADDRESS OF EMPLOYER
		Self-employed  NAME AND ADDRESS OF BUSINESS
		unemployed since
2.	I am pai	every 2 weeks
3.		ttached a copy of each of the applicable documents to my financial statement applicable boxes):
		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
		<ul><li>(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</li></ul>
		(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
		<ul><li>(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</li></ul>
		(if you are a beneficiary under a trust) the trust settlement agreement and the trust's three most recent financial statements.

#### ANNUAL INCOME

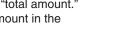
If line 150 (total income) of your most recent federal income tax return sets out what you expect your income to be for this year, skip to total income (line A) and record the amount from line 150 on line A. Otherwise, record what you expect your income for this year to be from each source of income that applies to you.

Remember to record these as ANNUAL, or YEARLY amounts. (For example, if you are paid every two weeks, multiply that amount by 26. If you are paid monthly, multiply by 12).

Except where the word "net" appears, use gross annual amounts.

Leave blank any lines that do not apply to you.

10. Child support: Record the total yearly amounts of child support you receive in the boxes labelled "total amount." If you are required to include any child support as income on your income tax return, record that amount in the boxes labelled "taxable amount."



Do not add lines 10a and 10b when calculating the total in line A.

- 16. Total social assistance payments: Record the total amount you receive including any amounts you receive for other members of your household.
- A. Total Income: After recording the annual amount of each type of income you receive, add them and record the total here.

#### TOTAL BENEFITS

Record all money or non-monetary benefits you receive that are not already included in Total Income (line A). An inheritance or large lottery winning are examples of amounts to be recorded here. Describe the benefit(s) on the lines provided.

You do not have to include here any Child Tax Benefit or BC Family Bonus that you receive for your children.

B. Total Benefits: After recording the yearly amount of all benefits you receive, add them and record the total here.



#### **ANNUAL INCOME**

If line 150 (total income) of your most recent federal income tax return sets out what you expect your income to be for this year, skip to total income (line A) and record the amount from line 150 on line A. Otherwise, record what you expect your income for this year to be from each source of income that applies to you. Record gross annual amounts unless otherwise stated.

1.	Employment income (include wages, salaries, commissions, bonuses, tips, and overtime)	\$
2.	Other employment income	+ \$
3.	Pension income (include Old Age Security, CPP, disability, superannuation and other pensions)	+ \$
4.	Employment insurance benefits	+ \$
5.	Taxable dividends from Canadian corporations	+ \$
6.	Interest and other investment income	+ \$
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 a. \$ *	
	(b) Total amount for children from this relationship or marriage b. \$	
	(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 a	+ \$
	(b) From this relationship or marriage b	
12.	Registered retirement savings plan income	
13.	Other income (include any taxable income that is not included on lines 1-17)	+ \$
14.	Net self-employment income	
	(include business, professional, commission, fishing and farming income)	+ \$
15.	Workers' compensation benefits	+ \$
16.	Total social assistance payments	+ \$
17.	Net federal supplements	+ \$
Α. ΄	Total income	A. \$
(*D	o not add these amounts 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 [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. \$

#### **ADJUSTMENTS TO INCOME**

These amounts will be subtracted from or added to your total income for the purposes of determining child or spousal support. **Deductions from income** 

- 1. Taxable amount of child support: If you recorded an amount in Annual Income, line 10(c) or (d), record that amount here.
- 2. Spousal support: If you recorded spousal support from this relationship in Annual Income, line 11(b), record that amount here.
- **4. Other employment expenses:** If you have any of these employment expenses, identify the expense and record the amount here. Paragraph numbers refer to the sections of the Income Tax Act where the expenses are described.
  - teacher's exchange fund contribution [paragraph 8(1)(d)]
  - railway employee's expenses [paragraph 8(1)(e)]
  - sales expenses [paragraph 8(1)(f)]
  - transport employee's expenses [paragraph 8(1)(g)]
  - travel expenses [paragraph 8(1)(h)]
  - motor vehicle and aircraft costs [paragraph 8(1)(j)]
  - CPP contributions and EI premiums paid for another employee who acts as your assistant or substitute [paragraph 8(1)(i.1)]

5.	<ul> <li>salary reimbursement [paragraph 8(1)(n)]</li> <li>forfeited amounts [paragraph 8(1)(o)]</li> <li>musician's musical instrument costs [paragraph 8(1)(p)]</li> <li>artist's employment expenses [paragraph 8(1)(q)]</li> <li>Social assistance received for any person other than yourself: If you recorded an amount in Annual Income, line 16 tl</li> </ul>	nat
6.	includes an amount for other members of your household, record the amount received for the others here.	ιαι
C.	Total deductions from income: After recording the annual amount of each of your deductions, add them and record the total here.	
Add	ditions to income	
2.	Payments to family members: If you deducted salaries, wages or benefits to arrive at an amount of self-employment income recorded in Annual Income, line 14, record on line 2(a) the salaries, wages and benefits you paid to family members or other non-arm's length people and on line 2(b), record the portion of these payments necessary to earn your self-employment income.  Subtract 2(b) from 2(a) and record the total here.	
	Total additions to income: After recording the annual amount of each of your additions to income, add them and record the total here.  HER ADJUSTMENTS TO INCOME - Spousal Support	
	uplete ONLY if there is a claim, either by or against you, for spousal support.	

E. Total other adjustments: After recording the annual amount of each adjustment, add them and record the total here.

# **ADJUSTMENTS TO INCOME**

You must complete this section if:

- (a) there is a claim, either by you or against you, for spousal support
- (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

De	eductions from income		
1.	Taxable amount of child support I receive		
2.	Spousal support I receive from the other party		
3.	Union and professional dues		<u>+ \$</u>
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 in	ncome	<u>+ \$</u>
6.	Dividends from taxable Canadian corporations		
	Taxable amount of dividends		
	subtract Actual amount of dividends		
	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 <i>Income Tax Act (Carrying charges and interest expenses paid and deductible under the Income Tax Act (Carrying charges and interest expenses paid and deductible under the Income Tax Act (Carrying charges and interest expenses paid and deductible under the Income Tax Act (Carrying charges and interest expenses paid and deductible under the Income Tax Act (Carrying charges) and interest expenses paid and deductible under the Income Tax Act (Carrying charges) and interest expenses paid and deductible under the Income Tax Act (Carrying charges) and interest expenses paid and deductible under the Income Tax Act (Carrying charges) and interest expenses paid and deductible under the Income Tax Act (Carrying charges) and interest expenses paid and deductible under the Income Tax Act (Carrying charges) and interest expenses paid and deductible under the Income Tax Act (Carrying charges) and interest expenses paid and in</i>	Canada)	+ \$
9.	Prior period earnings		
	If net self-employment income included in total income includes an	•	
	amount earned in a prior period, the amount earned in the prior period .		
	subtract Reserves		
4.0	Prior period earnings (a - b)		
	Portion of partnership and sole proprietorship income required to be reinvested		
C.	Total deductions from income		<u>C. \$</u>
Ad	Iditions to income		
1.	1 0		
	Actual capital gains		
	subtract Actual capital losses		
		c. <u>- \$</u>	
	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		
	Salaries, benefits, wages or other payments to family members or other		
	non-arm's length persons, deducted from self-employment income		
	subtract Portion of payments necessary to earn self-employment income		
	Non-arm's length payments ( a - b )		
3.	Allowable capital cost allowance for real property		<u>+ \$</u>
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.)		
	Value of shares when options are exercised		_
	subtract Amount paid for shares		
	subtract Amount paid to acquire option to purchase shares		
_	Value of employee stock options (a - b - c)		
D.	Total additions to income		<u>D.</u> \$
	THER ADJUSTMENTS TO INCOME - Spousal Support u must complete this section if there is a claim, either by you or against you, for spousal sup	pport.	
1.	Total child support I receive		\$
2.	Social assistance I receive for other members of my household		
3.	Child Tax Benefit		
4.	BC Family Bonus		
E.	Total other adjustments		<u>E.</u> \$

#### INCOME SUMMARY

Complete this summary AFTER you have completed pages 2, 3 and 4.

### **EXPENSES, ASSETS AND DEBTS**

The next 2 pages ask for information about your expenses, assets and debts.

Complete the next 2 pages, titled "Part 2 - Expenses" and "Part 3 - Assets and Debts" ONLY if:

- there is a claim, either by or against you, for spousal support OR
- there is a claim, either by or against you, for child support and one or more of the following applies:
  - the claim includes a claim for a child 19 years or older
  - the person who is being asked to pay has a yearly income higher than \$150,000
  - the parents share custody (that is, the child or children actually live with each parent at least 40% of the time over the course of a year)
  - there is a claim for special or extraordinary expenses for a child or children (also complete schedule 1)
  - there is a claim of undue hardship (also complete schedule 2)
  - the person being asked to pay has acted as a parent to the child but is not the child's natural or adoptive parent

If you fall into one of these categories, turn to page 6 and continue filling out the form.

Otherwise, go back to page 1 now and follow the instructions for completing the affidavit and filing and serving the financial statement.

# Annual Income for a Child Support Claim

TOTAL INCOME [fror subtract add	Total additions to income [from line D]	\$ - \$ + \$
Annual income to be	used for a Child Support Table amount	\$
add subtract	Spousal support received from the other party (if any)	<u>+ \$</u> - \$
Annual income to be	used for a special or extraordinary expenses claim	\$
Annual Income		
	for a Spousal Support Claim	
		\$
		<u>    \$                                </u>
TOTAL INCOME [from		\$ - \$ + \$
TOTAL INCOME [fron subtract		\$ - \$ + \$ + \$
TOTAL INCOME [from subtract add add		

Annual Expenses
Remember to record your expenses as annual or yearly amounts.
If you are claiming <b>special or extraordinary expenses</b> as part of a child support claim, you must also complete Schedule 1.

F. Total expenses: After recording the annual amount of each expense, add them and record the total here.

#### **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 B.C.).

# **Annual Expenses:**

Estimate your annual expenses		Personal	
, i		Clothing	\$
Compulsory deductions		Hair care	\$
CPP contributions	\$	Toiletries, cosmetics	\$
Employment insurance premiums			\$
Income taxes			
Employee pension contributions to a		Dry cleaning / laundry	\$
Registered Pension Plan	\$		\$
Other (specify)			\$
Housing		Gifts	\$
Rent or mortgage		Other (specify)	\$
Property taxes		A	
Homeowners / tenants insurance			\$
Water, sewer and garbage			\$
Strata fees			\$
House repairs and maintenance			\$
Other (specify)		Entertainment, recreation	
Utilities	Ψ	Activities, lessons	
Heat	\$	0:4-	- <del></del>
Electricity			\$
Telephone			\$
Cable TV		<del></del>	
Other (specify)		RRSP	\$
Household expenses	Ψ	RESP	
Food	¢	• · · · · · · · · · · · · · · · · · · ·	\$
Household supplies		<del></del>	
Meals outside the home		<del></del>	\$
		<del></del>	\$
Furnishings and equipment  Other (specify)			\$
Transportation	Φ		\$
Public transit, taxis	¢		\$
			\$
Gas and oil  Car insurance and licence		Debt Payments	
		<del></del>	\$
Parking			\$
Repairs and maintenance			\$
Lease payments			\$
Other (specify)	\$		<u> </u>
Health <sup>a</sup>	Φ.		\$
MSP premiums		Other	
Extended health plan premiums		Charitable donations	\$
Dental plan premiums		Vacation	\$
Health care (net of coverage)		Pet care	<del>Ф</del>
Drugs (net of coverage)			\$ \$
Dental care (net of coverage)		Newspapers, publications	\$
Other (specify)	\$	Reserve for income tax	Φ
		F. Total expenses	F. \$

<sup>[</sup>a If you claim child support and special or extraordinary expenses, you must also complete Schedule 1.

b List only the names of those for whom support is not claimed in this application. Indicate whether the payments are tax deductible to you and whether you make the payments under a court order or agreement.]

#### **Assets**

Assets include property, money and investments, and money that is owed to you.

If you need more space, attach a separate list and indicate on the form that there is an attached list.

- 1. Real estate equity is the difference between market value and the amount owing on the mortgage. For market value, use the amount on your most recent assessment notice.
- 2. Cars, boats, vehicles: your equity is the difference between market value and the amount owing on your loan(s). Estimate the **market value** and be prepared to justify your estimate.

G.	Asset value total:	After recording	asset values.	add them	and record	d the total her
٠.	Accet value totali	/ titol rocoluing	accet values,	add tiloili	aria rocori	a tilo total lio

#### **Debts**

Remember to record these as ANNUAL, or YEARLY amounts.

Do NOT record mortgage or car payments here, as they are included under Annual Expenses.

If you need more space, attach a separate list and indicate on the form that there is an attached list.

H. Debt payment total: After recording debt payments, add them and record the total here.



# **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 Child Support Tables and all children for whom support is claimed are under the age of majority (19 years in B.C.).

Assets	
Real estate equity	\$
Market value: \$	
Mortgage balance: \$	
Cars, boats, vehicles	+ \$
Make and year:	
Market value: \$	
Loan balance: \$	
Pension plans	_+ \$
Other property	
Bank or other account (include RRSPs)	
Stocks and bonds	+ \$
Life insurance (cash surrender value)	+ \$
Money owing to me	
Name of debtor	_ · Ψ
Other	_+ \$
[attach list if necessary]	_ · Ψ
G. Asset value total	G \$
di Asset value total	Δ. ψ
Credit card	
Reason for borrowing:	•
Department store	+ \$
Balance owing: \$	
Date of last payment:	
Reason for borrowing:	
Other [attach list if necessary]	+ \$
Balance owing: \$	
Date of last payment:	
Reason for borrowing:	
H. Debt payment total	Н. \$

#### **SCHEDULES**

#### Complete a schedule only if it applies to you

- Schedule 1: You must complete this ONLY if you are claiming special or extraordinary expenses in a claim for child support.
- Schedule 2: You must complete this ONLY if you are claiming undue hardship in a claim for child support.
- **Schedule 3:** You must complete this ONLY if there is a claim, either by you or against you, for **undue hardship**, in a claim for child support.

If none of the schedules apply to you, go back to page 1 now and follow the instructions for completing the affidavit and filing and serving the financial statement.

## Schedule 1 - Special or Extraordinary Expenses

Please read these instructions carefully.

Complete this schedule if you are claiming special or extraordinary expenses in a claim for child support.

The form contains columns for recording special expenses for 4 children. If your claim is for more than 4 children, photocopy this form before you begin and use the photocopy for the additional children.

Remember to record the expenses as ANNUAL, or YEARLY amounts.

If your claim includes an expense for child care, health care or post secondary education, you must subtract from the gross or full amount, any related subsidies, income tax deductions or credits you are eligible to receive for the expense. After you subtract any subsidies, deductions or credits from the expense, record the result in the space labelled "net". Give details of the subsidy, deduction or credits in the space provided at the bottom of schedule 1.

After you record the annual amount of each expense, subtract the child's contribution. For example, a child may use money from a summer job to help pay university tuition.

**Total:** Add the special or extraordinary expenses claimed for each child. Subtract the child's contribution from the amount. Record the difference here.

If neither schedule 2 nor 3 applies to you, go back to page 1 now and follow the instructions for completing the affidavit and filing and serving the financial statement.

SCHEDULE 1 -			/ EVBELIAEA
	CDETINI	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	L A D L VIC L C
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Complete if you claim special or extraordinary expenses as part of a child support claim.

Name of Child:				_				_				_			
Child care expenses	Gross	\$	Net *	\$	Gross	\$	Net *	\$	Gross	\$	Net *	\$	Gross	\$	Net *
Medical / dental insurance premiums attributable to child		\$				\$				\$				\$	
Health related expenses (over \$100.00)	Gross	\$	Net *	\$	Gross	\$	Net *	\$	Gross	\$	Net *	\$	Gross	\$	Net *
Extraordinary expenses for primary or secondary school		\$				\$				\$				\$	
Post secondary education expenses	Gross	\$	Net *	\$	Gross	\$	Net *	\$	Gross	\$	Net *	\$	Gross	\$	Net *
Extraordinary extracurricular expenses		\$				\$				\$				\$	
Subtract Contributions from child	(	<u>(</u> \$	<u> </u>	>	<	(\$	>	,	<	<u></u> \$	\ 	>	<	<u>\$</u>	
Total		\$				\$				\$				\$	

Give details below:	
	_
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# SCHEDULE 2

SCHEDULE 2	
Complete this schedule only if you are claiming undue hardship in a child support claim.	
Schedule 2 lists 6 categories that may cause undue hardship. Choose the category that applies to your claim and provide the inferequested.	ormation
SCHEDULE 3	
Complete this schedule if you or the other party claims undue hardship in a child support claim.	
Record the name of each member of your household. Calculate the annual gross income of each of these people.	
Now go back to page 1 and follow the instructions for completing the affidavit and filing and serving the financial statement.	

# **SCHEDULE 2 - UNDUE HARDSHIP**

Complete if you plead undue hardship in respect of a child support claim.

	Terms of Debt	ed to support the family prior to separa	ation or to earn a living:  Monthly Amount \$
			\$
<b>Unusually high expenses for</b> Details of Expense:	exercising parenting time or	contact with a child:	Monthly Amount
egal duty under a court ord	er or separation agreement to Relationship:	support another person:  Nature of Duty:	Monthly Amount
value of Ferson.	rielationship.	Nature of Duty.	\$
			\$
egal duty to support a child	other than a child for whom	support is claimed in this application:	
Name of Person:	Relationship:	Nature of Duty:	Monthly Amount
			\$
egal duty to support a pers	on who is unable to support h	imself or herself because of illness or	disability:
lame of Person:	Relationship:	Nature of Duty:	Monthly Amount
			\$
			\$
	nstances:		
Other undue hardship circun		Mont	thly Amount
	o dirodinotanoco.	WOTE	inly Amount
		World	
		Work	
		Work	
		World	· ·
Other undue hardship circun Details of other undue hardship SCHEDULE 3 - INCON	ME OF OTHER PERSON		
Details of other undue hardship  SCHEDULE 3 - INCOM	ЛЕ OF OTHER PERSON		
Details of other undue hardship  SCHEDULE 3 - INCOM	ЛЕ OF OTHER PERSON		
SCHEDULE 3 - INCOM	ЛЕ OF OTHER PERSON		· ·
SCHEDULE 3 - INCOM	ЛЕ OF OTHER PERSON		\$ 
Details of other undue hardship	ЛЕ OF OTHER PERSON		\$ Annual Income