### STATEMENT OF FINANCES

### Step 1

**COMPLETE** the STATEMENT OF FINANCES. Please print clearly and firmly. There are 3 copies, so be sure all copies are legible. If there are more parties who need to be served, you will need to make additional copies. If you accessed this form from the Government of BC website, you may also complete it using the computer and print copies for the court, yourself and one for each of the other parties.

## Forms and guides can be found at the Government of BC website:

www.gov.bc.ca/smallclaims



### Step 2

**FILE** the STATEMENT OF FINANCES and all attachments by taking, mailing, or submitting it to the small claim **registry at least 7 days before the hearing**. Staff will check the form and when it is accepted for filing, apply the registry stamp. They will return the copies you need for your records and for serving on all other parties. The judge or justice at the hearing may require you to swear or affirm to the truth of the contents of your Statement of Finances.



### Step 3

**SERVE** each other party named in the file with a copy of the document and all attachments at their address for service on file at least 2 days before the hearing.

For more help with service there is a guide called "Serving Documents" found here:

https://www2.gov.bc.ca/gov/content/justice/courthouse-services/small-claims/how-to-quides/serving-documents

### IN THE CASE BETWEEN:

Copy the full names from the first document filed with the court, and the court file number if it is known.



### **COPIES OF THIS FORM:**

If you have been summoned to court, you must submit to the court for filing the original of the *STATEMENT OF FINANCES* and one copy for yourself and one for each other party(ies). The total number of copies required will depend on how many parties need to be served. You are responsible for providing a filed copy and all attachments to the other party(ies) before the appearance.

### **ATTACHMENTS**

If you attach any documents to the Statement of Finances attach them to the document and label them as an appendix for the section you are continuing. For example: "Appendix 1-D, Additional Values of Assets" or "Appendix 4: Additional Supporting Records Attached". A copy of the attached pages must accompany each copy of the Statement of Finances.

### REMINDER

You must file any records or other things specifically listed in a summons served upon you by attaching them to a completed Supporting Materials Cover Sheet, Form 39.

If there are no documents mentioned in the summons, you should exhibit the following items to support your Statement of Finances and file this form, along with a completed Supporting Materials Cover Sheet, Form 39:

- Copies of your last 2 years' Income Tax Returns and T-4 slips
- If you are not employed, recent proof of the source and amount of your income (such as your 3 most recent Employment Insurance benefit statements)
- Copies of your last 2 months utility bills for electricity, gas, water, waste, telephone/cellular, and cable/internet
- Copies of your last 6 monthly bank statements for all bank accounts
- Copies of any mortgage or rent agreements and receipts for the last 6 months
- Any other documents you feel are important to establish your financial situation

# STATEMENT OF FINANCES

# STATEMENT OF FINANCES IN THE PROVINCIAL COURT OF BRITISH COLUMBIA (SMALL CLAIMS COURT)

| REGISTRY FILE NUMBER |  |
|----------------------|--|
| REGISTRY LOCATION    |  |

| Name and occupation | ı. NAME  |  |  |  |  |  |
|---------------------|--|--|--|--|--|--|
|                     | OCCUPATION   |  |  |  |  |  |
|                     | Complete all that apply and write N/A for anything that does not apply. See page 2 for further instruction |  |  |  |  |  |
| Circle one.         | 1. I am married / single / in a common law relationship / other (specify)                                  |  |  |  |  |  |
| ;                   | 2. I am responsible for financially supporting (check if applicable, and indicate number)                  |  |  |  |  |  |
|                     | a child or children under 19   |  |  |  |  |  |
|                     | another person or persons  |  |  |  |  |  |
|                     | 3. Listed below is an accurate statement of my household's finances:                                       |  |  |  |  |  |

| A MONTH VINCOME   |                                       |
|---|---------------------------------------|
| A. MONTHLY INCOME (net of tax an  | · · · · · · · · · · · · · · · · · · · |
| Salary  | \$                                    |
| Commissions   | \$                                    |
| Tips and Gratuities   | \$                                    |
| Self-Employment Income  | \$                                    |
| Employment Insurance  | \$                                    |
| Workers' Compensation   | \$                                    |
| Pension Income  | \$                                    |
| Interest and Investment Income  | \$                                    |
| Rental Income   | \$                                    |
| Business Income   | \$                                    |
| Government Child Benefit<br>any government benefits received for a child that is not<br>included on another income line | \$                                    |
| Spousal Support   | \$                                    |
| Income of spouse/partner residing in the home   | \$                                    |
| Income of Children children residing in the home 19 years of age and over   | \$                                    |
| Income Assistance   | \$                                    |
| Other Income specify where the other income is from   |                                       |
|   | \$                                    |
| A.1 INCOME TOTAL  | \$                                    |

| Rent  | \$ |
|---|----|
| Mortgage  | \$ |
| Property Taxes/Strata Fees  | \$ |
| Home maintenance and repair                                       | \$ |
| Utilities<br>electricity, gas, water, waste                       | \$ |
| Phone/cellular/internet   | \$ |
| Cable/streaming subscriptions                                     | \$ |
| Homeowners/Renters Insurance                                      | \$ |
| Life Insurance  | \$ |
| Medical/Dental including regular dental care and contact lenses   | \$ |
| Groceries/household supplies                                      | \$ |
| Restaurant meals/food delivery                                    | \$ |
| Personal grooming and self-care hair dresser/barber and cosmetics | \$ |
| Clothing  | \$ |
| Laundry & Dry Cleaning  | \$ |
| Motor Vehicle (lease or loan) license, insurance, fuel & service  | \$ |
| Transportation<br>bus, taxi, parking and ride share               | \$ |
| Newspapers & subscriptions  | \$ |
| Entertainment & recreation  | \$ |
| Alcohol, tobacco & non-medicinal cannabis                         | \$ |
| Gift  | \$ |
| Charitable Donations  | \$ |
| Support Payments/Child Maintenance                                | \$ |
| Childcare/Babysitting   | \$ |
| Children's Expenses: School, Activities and Lessons               | \$ |
| Pets  | \$ |
| Vacation  | \$ |
| Other   | \$ |

| Credit Card(s) provide card type and issuer                             |    | Real Estate   |    |
|---|----|---|----|
| рголие саги туре али issuer   | \$ | Market Value  | \$ |
|   | \$ | Mortgage Balance  | \$ |
|   | \$ | -   |    |
|   |    | Cars/Boats/Vehicles   |    |
| Bank or Finance Company   |    | Make, Model,and Year  |    |
|   | \$ | Market Value  | \$ |
|   | \$ | Loan Balance  | \$ |
|   | \$ |   | •  |
| Government Debt student loan, income tax, etc.                          |    | Bank or Other Accounts  | \$ |
|   | \$ | TFSA/RRSP   | \$ |
|   | \$ | Stocks, Bonds & Pensions  | \$ |
|   | \$ | Investment Accounts   | \$ |
| Other including all other personal debts                                |    | Cash  | \$ |
| including all other personal debts                                      | \$ | Life Insurance  | \$ |
|   | \$ | Loans and Credit  | \$ |
|   | \$ | money owing to me   |    |
| C.1 DEBT PAYMENT TOTAL  | \$ | name of debtor  |    |
|   |    | Other includes precious metals, art, jewelry or other items of high value | \$ |
|   |    | D.1 TOTAL VALUE OF ASSETS   | \$ |
|   |    |   |    |
| If you need more space to compl   |    | A.1 INCOME TOTAL  | \$ |
| Statement of Finances Form, atta  |    | B.1 EXPENSES TOTAL —  | \$ |
| to this form and label them as an ayyou are continuing. For example: "A |    | C.1 DEBT PAYMENT TOTAL —  | \$ |
| Values of Assets" or "Appendix 4: A Records Attached".                  |    | BALANCE =   | \$ |
|   |    |   |    |

4. Attached are additional pages(s). The additional pages or supporting records are List

sign, print or type name

5. I understand at the hearing the judge/justice may require me to swear or affirm to the truth of the contents of this

**D. VALUE OF ASSETS** 

Statement of Finances.

C. MONTHLY DEBT PAYMENTS