



ACKNOWLEDGEMENT OF REDUCED / OR POSTPONED MAINTENANCE PAYABLE

The personal information requested on this form is collected under the authority of and will be used for the purpose of administering the Employment and Assistance Act, and the Employment and Assistance for Persons with Disabilities Act. Disclosure of personal information is subject to the provisions of the Freedom of Information and Protection of Privacy Act. Any questions about this form should be directed to your local Employment and Assistance Centre.

RE:	CLIENT	RESPONDENT	
MAINTENANCE ORDER	COURT	JUDGE	DATE SIGNED (YYYY MM DD)
FMEP REGIONAL OFFICE	FMEP CASE NUMBER	FMP FILE ID FM	

APPLICANT'S ACKNOWLEDGEMENT AND AGREEMENT

I, _____ agree that during the period of _____ to _____

The Respondent may:

reduce the Maintenance Order payments from \$ _____ /month to \$ _____ /month for

(CLIENT &/OR EACH OF _____ CHILDREN)

OR

postpone making all payments under the Maintenance Order

AND

the Respondent will pay \$ _____, being the amount of arrears accumulating during this period by

(DATE AND TERMS OF REPAYMENT)

I acknowledge that the Family Maintenance Worker (FMW) has reviewed with me the Respondent's circumstances and financial disclosure provided to the FMW by the Respondent to support his/her request for a reduction or postponement of maintenance payments and I agree that the Respondent not pay the full amount required by the maintenance order during the agreed period.

I further acknowledge that I have read this document carefully and that I know and understand the terms of the agreement set out and have agreed to the terms voluntarily and without any undue influence or coercion.

SIGNATURE OF CLIENT	DATE SIGNED (YYYY MM DD)
SIGNATURE OF FAMILY MAINTENANCE WORKER	DATE SIGNED (YYYY MM DD)
SIGNATURE OF FAMILY MAINTENANCE WORKER SUPERVISOR	DATE SIGNED (YYYY MM DD) <input type="checkbox"/> APPROVED <input type="checkbox"/> NOT APPROVED

Note: You have the right to seek legal advice before responding to this form/letter.