

STATEMENT OF INCOME & EXPENSE FOR THE MONTH OF _____, 2018

Debtors: _____

JOINT ESTATE YES

INCOME (NET AFTER NORMAL DEDUCTIONS) PER MONTH FEDERAL GUIDELINE AMOUNT \$ (A)

<u>Name debtor #1</u>	<u>Name debtor #2</u>
Net Employment Income _____	Net Employment Income _____
Pension/Annuities _____	Pension/Annuities _____
Child Support _____	Child Support _____
Spousal Support _____	Spousal Support _____
Employment Insurance _____	Employment Insurance _____
Social Assistance/WCB _____	Social Assistance/WCB _____
Net Self-Employment Income (use worksheet) _____	Net Self-Employment Income _____
Other _____	Other _____
Subtotal of bankrupt #1	Subtotal of bankrupt #2
	Child Tax Benefits _____
	UCCB _____
	Other _____
	TOTAL FAMILY INCOME

Non-discretionary expenses:

Child Support Payments \$ _____	Employment-related expenses _____
Child Care _____	-which were not claimed on the _____
Health (Prescriptions/Med. Supply) _____	Self-employment worksheet _____
Health (MSP) _____	
Other: _____	
	Subtotal Non Discretionary exp. \$

Total Income less non-discretionary expenses

Adjusted Net Income: \$ (B)

Discretionary Expenses: PERSONAL USE PORTION

Rent/Mortgage \$ _____	Car payment / lease \$ _____
Property Taxes/Strata Fees _____	Repairs/Maintenance/Gas _____
Water _____	Parking _____
Heating – Gas/Oil _____	Vehicle Insurance _____
Hydro _____	House Insurance _____
Telephone (landline) _____	Contents Insurance _____
Cell Phone _____	Life Insurance _____
Cable _____	Allowances _____
Internet _____	Aesthetic Services _____
Dental _____	Alcohol _____
Dining/Lunches/Restaurant _____	Smoking _____
Food/Grocery _____	Entertainment/Sports _____
Health Supplements _____	Memberships _____
Grooming/Toiletries _____	Gifts _____
Laundry/Dry cleaning _____	Charitable Donations _____
Clothing _____	Other: _____
Furniture _____	Other: _____
Public Transportation _____	Paid to Trustee _____
	Subtotal Discretionary Expenses \$ (C)

NET Adjusted Income vs. Expenses(B - C) \$

SURPLUS INCOME per Directive (B – A)	\$	(D)
½ of surplus income per Directive	\$	
Bankrupt 1 payable = % income x (D)	\$	
	\$	

The above is an accurate statement of my income and expenses as witnessed by my signature. The Trustee has made me aware of my obligations to contribute a portion of my surplus income to the estate for the general benefit of creditors until I am discharged from bankruptcy.

Dated: _____

Signature: _____