

SECTION 1 CONTACT AND EMPLOYMENT INFORMATION

1(a) CLIENT'S INFORMATION						
Full Legal Name				Maiden Name (If Applicable)		
Other Names You May Go By				Surname Before Marriage		
Current Address				Primary Phone		
Email Address		Date of Birth		Place of Birth		
Matrimonial Status at Time of Marriage □ SINGLE □ DIVORCED □ WIDOWED □ YES				in Alberta for at least 1 year?		
Occupation		Employer		Length of employment		
Employer's Address				Gross Annual Income		
Please list all other sources of current income (i.e. secondary employment, rent, etc.)						
Source	Annual G	Gross Income Source			Annual Gross Income	
1(b) SPOUSE'S INFORMA	ATION					
Full Legal Name				Maiden Name (If Applicable)		
Other Names You May Go By				Surname Before Marriage		
Current Address				Primary Phone		
Email Address		Date of Birth		Place of Birth		
Matrimonial Status at Time of Marriage Have you ☐ SINGLE ☐ DIVORCED ☐ WIDOWED ☐				resided in Alberta for at least 1 year? YES □ NO		
Occupation		Employer		Length of employment		
Employer's Address				Gross Annual Income		
Please list all other sources of current income (i.e. secondary employment, rent, etc.)						
Source	Annual Gross Income		Source		Annual Gross Income	

SECTION 2 RELATIONSHIP HISTORY

2 MARITAL / RELATIONSHIP HISTORY				
Date of Marriage	Place of Marriage	Date of Cohabitation	Date of Separation	
Is there a Cohabitation or Pre	l nuptial Agreement? NO	Are there previous divorce proceedings with your spouse? □ YES □ NO		
Please provide any and all: Agreements and/or Pleadings and/or Court Orders associated with your proceedings, along with any pertinent/applicable documentation from any Court proceedings or previous legal counsel.				
Are there any Court dates pending? □ YES □ NO If Yes, what is the date?				
	Which Court is the d	ate set? Court of Queen	i's Bench	
		□ Provincial Fam	ily Court	
Is your spouse represented by YES	NO			
If so, what is the name of your	spouse's lawyer?			
Do you have any desire to red	concile with your spouse?	Would you like info about med	diation and counselling?	
If efforts have been made to reconcile with your spouse, what efforts were made and when were these efforts made? If you are filing for divorce we will require the following documents from you:				
 Original Government Issued Marriage Certificate Marriage Certificate issued by the Church or Civil Office that performed my out-of-country ceremony Current picture of my spouse 				
SECTION 3 SPOUSAL SUPPORT				
3 SPOUSAL SUPPORT	г			
Were you employed prior to m	narriage? NO	Occupation	Approx. Annual Income	
Was your spouse employed p	rior to marriage? NO	Occupation	Approx. Annual Income	
Did you take time off work after	er your children were born (if ap NO	plicable)?	If yes, how long?	
Have you been a stay-at-hom	e parent for any length of time? NO		If yes, how long?	
What is your educational back	ground?	□ Last Grade Completed		
Post-SecondaryInstitution and Highes	t Degree Obtained:	☐ Other Courses/Training:		

SECTION 4 CHILDREN

	•			
	Date of Birth	From Current of Previous Relationship?		
	Date of Birth	From Current of Previous Relationship?		
	Date of Birth	From Current of Previous Relationship?		
	Date of Birth	From Current of Previous Relationship?		
	Date of Birth	From Current of Previous Relationship?		
	Both my spouse an Other	d myself (shared)		
		nedical/dental expenses that exceed your		
	_	xtra-ordinary school or educational costs.		
\square I am currently paying for medical and/or dental \square		My children are involved in extra-curricular activities such as		
	sports teams or les	sons.		
details	s for these expenses	:		
		Date of Birth Both my spouse an Other My children have minsurance coverage My children have e My children are inv		

SECTION 5 MATRIMONIAL PROPERTY

5 MATRIMONIAL PROPERTY					
Principal Residence					
Address			Market Value	Mortgage Owing	
Other Land				•	
Address	Market Value		Mortgage Owing		
Bank Accounts and Investment A				•	
(Chequing, Savings, RRSP, TFSA, I					
Institution Name	Account Type and Description		Account Number	Value	
Institution Name	Account Type and Description		Account Number	Value	
Institution Name	Account Type and Description		Account Number	Value	
Institution Name	Account Type and Description		Account Number	Value	
Vehicles			•	·	
Vehicle Description	on		Current Value	Amount Owing	
Vehicle Description		Primary Operator	Current Value	Amount Owing	

SECTION 6 PROPERTY EXEMPTIONS

6 PROPERTY EXEMPTIONS			
Have you acquired any property as a gift from a third party? ☐ YES ☐ NO If yes, please explain:	Have you acquired any property from an inheritance? □ YES □ NO If yes, please explain:		
Do you have any property owned prior to the marriage? ☐ YES ☐ NO If yes, please explain:	Have you received any awards / settlements for damages? □ YES □ NO If yes, please explain:		
Have you received any proceeds from an insurance policy? □ YES □ NO If yes, please explain:			
SECTION 7 FINA	ANCIAL DISCLOSURE		
7 FINANCIAL DISCLOSURE			
Both parties will be required to provide financial disclosure to organize disclosure, we would ask that you start collecting a			
 □ Tax return for last three taxation years □ Notices of (re)assessments for last three taxation years □ If you are an employee: □ Three most recent statements of earnings or letter from employer showing annual salary 	 If you have 1% or more interest in a privately held corporation: Financial statements of the corporation and all subsidiaries for the last three taxation years Statements showing all salaries, wages, 		
 Statements of income for any other source of income for the current year (EI, Social Assistance, Pension, Worker's Compensation, Disability, Dividends) If you are a student: 	management fees or other payments made to yourself, or to other persons or corporations that you do not deal at arm's length for the last three taxation years		
 Statements showing all student funding for the current academic year, including loans, grants, bursaries, scholarships, and living allowances 	 If you are a beneficiary under a trust: Copy of the trust settlement agreement Three most recent financial statements for the trust 		
☐ If you are self-employed: ☐ Copies of every payment made to you during the last 6 weeks from any business or corporation that	Bank Statements and cancelled cheques from the last six months for each account held, either solely or jointly:		
you have an interest or to which you have rendered a service Financial statements of your business for the last	 If you are making a claim for child support: List of any special or extraordinary expenses claimed per child and receipts or statements 		
three taxation years Statements showing all salaries, wages, management fees or other payments made to yourself, or to other persons or corporations that you do not deal at arm's length for the last three	showing these amounts. (Medical/dental insurance premiums, health expenses, extraordinary school expenses, post-secondary expenses, extracurricular expenses) If you are claiming spousal support:		
taxation years ☐ If you are in a partnership:	A detailed monthly budget of expensesIncome, Assets and Liabilities Declaration. We will		
 Confirmation of your income, your draws from, and capital in, the partnership for the last three taxation years 	provide you with this declaration, if required List of all investment accounts held either solely or jointly together with the most recent statement for each		
☐ For each credit card account held, either solely or	account		

jointly, statements for the last six months