Respond – Change Custody, Access, Child and Spousal Support

Court of King's Bench

Responding to Application
To Change Custody, Access, Child and
Spousal Support



Resolution Services





Instructions Responding to an Application

Before you Begin:

- There is an important date in the Application (or Originating Application) form that you have been served with. The court date is in the box on the first page. If you do not go to court on that date, the judge will assume that you agree with whatever the Applicant is asking for.
- If you want to respond to the application, you **must** fill in an Affidavit, setting out everything that you want the judge to know, and attaching any documents that the judge will want to see.
- If the application deals with support, you must also fill in a Disclosure Statement. See our booklet "Providing Financial Disclosure" for that form, and instructions on how to complete it.
- See our booklet, "Making a Court Application in the Court of King's Bench (With an Application Form" for more information about how to prepare, file and serve court forms and how to present your case in court.

Gather up the documents you will need to prove your case

• If the application deals with support, the booklet "Providing Financial Disclosure" tells you what documents to gather up.

There may be other documents that you should attach to your court forms. For example:

- With respect to child support:
 - If you want to receive (or to continue to receive) payment for any special or extraordinary expenses for your children, attach receipts for those expenses, if you have them.
 - If you want to receive (or to continue to receive) support for a child over the age of 18, attach income information for that child for any year in which they have earned an income.
 - If you want to receive (or to continue to receive) support for a child over the age of 18 because they are in school, attach proof that they are registered in an educational institution, including the number of classes and/or hours per week of instruction.
 - If you are claiming undue hardship, attach income information for any other adult in your household, and evidence to support your undue hardship claim.

- With respect to spousal support:
 - Attach a list of your assets, showing the value of each asset and your debts, showing the amount owing on each debt.
 - If you are unable to support yourself because of medical problems or education, attach proof of the medical problems or registration at an educational institution.
- With respect to custody or access, think about which documents will help your case. Some of these might be relevant:
 - School report cards
 - Letters from the child's doctor, teacher or counsellor
 - Copies of e mails showing attempts to organize access
 - Your work schedule, if access must be scheduled around that
 - The children's extracurricular activity schedule

Fill in the Affidavit form

- This form has been prepared with the information that the court is likely to want to see. You can, if you wish, change the content of the form to set out the information in a way that you think is best.
- All of the documents that you want the judge to see must be written about in the Affidavit and attached as exhibits to the Affidavit.
- Make 2 copies of the sworn Affidavit and file the original with the Court of King's Bench.

Serving the other party

- You may serve the other party with your filed Affidavit in one of several ways:
 - You may serve them personally by handing a copy of the Affidavit to them.
 - o If they have a lawyer named on their application form, you can leave a copy with the lawyer or one of their staff.
 - You can leave a copy at the address for service listed on the Application form.
 - o If the Application form has a fax number or e mail address, you may fax or scan and e mail the form to the other party that way.



Tip:

You do not have to serve the other party yourself. You can have a friend or a process server do it for you.

After the other party has been served, fill in the Affidavit of Service form

• Make sure the Affidavit of Service states how you served the Applicant.

These instructions have been prepared for you by Resolution Services. Contact us at:

Calgary

7th floor, Calgary Courts Centre 8th floor, Brownlee Building 601 - 5 Street SW Phone 403-297-6981

Grande Prairie

Main Floor, Court House 10260 - 99 St. Phone: 780-833-4234

Red Deer

Main Floor, Court House 4909 - 48 Ave Phone: 403-340-7187

Edmonton

10365 – 97 Street Phone 780-415-0404

Lethbridge

1st Floor, Court House 320 - 4 St. S Lethbridge AB T1J 1Z8 Phone: 403-388-3102

Medicine Hat

Court House 460 First Street SE Medicine Hat, AB T1A 0A8 Phone 403-529-8716

Outside these centres, call the Resolution Services Contact Centre at 1-855-738-4747

		Clerk's Stamp
COURT FILE NUMBER	(File number, as on other court documents)	
COURT	Court of King's Bench of Alberta	
JUDICIAL CENTRE	(City or town where court is located)	
APPLICANT (Print t	the other party's full name, as on other court documents)	
RESPONDENT	(Print your full name, as on other court documents)	
DOCUMENT:	Affidavit – Responding to Changing Custody and Access, Spousal Support, and Child Support	
SWORN / AFFIRMED BY:	(Name of person making this Affidavit)	
SWORN / AFFIRMED ON:	(Date Affidavit sworn / affirmed)	
ADDRESS FOR SERVICE AND CONTACT INFORMATION OF PARTY FILING THIS DOCUMENT	(Name of party filing this document)	
	(Full address of party filing this document)	
	()	
I, Your name	, of	, Alberta,
MAKE OATH / AFFIRM AN		

- 1. I am the Respondent. I have personal knowledge of the facts set out below, except where I say that they are based on information and belief. In that case, I believe the facts to be true.
- 2. I have read the Affidavit filed by the Applicant, and I make this Affidavit in response to the application of the Applicant.

CUSTODY AND ACCESS

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'(`ni	mnlete	this	section	it VOL	are	respondina	t∩ an	annlication	tor.	changes t	n an	AVISTINA	order 1	or custod	v and/∩	r access

3.		I agree with the following things the Applicant is asking for: (Give details)
4.		I disagree with the following things the Applicant is asking for: (Give details of what you disagree with)
		because:
		There has been no change of circumstances since the last Order made.
		Uther: (Give details as to why you disagree)
(Com	plete ti	L SUPPORT nis section if you are responding to an application for changes to an existing order for spousal support. Make sure e the Income sections below) I agree with the Applicant's application to change spousal support.
0.		ragice with the Applicant a application to change operation capport.
6.	I an	n opposing the Applicant's application for changes to an existing order for spousal support because: There has been no change of circumstances since the last Order made.
		My income is not what the Applicant claims it is. (Complete #17)
		The Applicant's income is not what the Applicant claims it is. (Complete #18) Other reasons:
	Ш	(Give other reasons for opposing the Applicant's application, including your response to any claims for retroactive support.)

7.		Attached as Exhibit '' is my detailed information regarding my assets, liabilities and my nonthly budget of expenses.	
		PORT section if you are responding an application for changes to an existing order for child support)	
8.		agree with the Applicant's application to change child support.	
9.		am opposing the Applicant's application for changes to an existing order for child support bed. There has been no change of circumstances since the last Order made. My income is not what the Applicant claims it is. (Complete #17) The Applicant's income is not what the Applicant claims it is. (Complete # 18) The custody and/or access arrangements for the child(ren) are not what the Applicant say are. The current custody and/or access arrangements for the child(ren) are:	
		I disagree with the special expenses that the Applicant is claiming. (Complete #11) Other reasons: (Give other reasons for opposing the Applicant's application, including your response to any claims retroactive support, undue hardship, or imputing income)	for
10.	I asl	he court to set the amount of child support payable at: The same amount as in the previous order. The amount of \$ This is the amount payable under the Federal Child Support Guidelines. This is different from the amount that would be payable under the Federal Child Support Guidelines. (Complete #15 to explain why you want a different amount)	

'Add-on' or Special Expenses

	• •	· openia =xponese					
11.	(Ch	oose all that apply)					
	☐ I have no special expenses for the child(ren).						
		My current child support Order does not include special expense	es and I would like the Applicant to				
		pay a share of the children's special expenses.					
		My special expenses for the children have changed since the last	st Order.				
		I have the following special expenses for the child(ren):					
		Special Expense	Gross Annual Amount				
		Child care expenses (daycare / babysitting)	\$				
		Children's portion of medical or dental premiums	\$				
		Health-related expenses in excess of \$100 annually, net of insurance reimbursement	\$				
		Extraordinary expenses for primary/secondary school	\$				
		Expenses for post-secondary education Tuition amount: \$	\$				
		· 	\$				
		Extraordinary expenses for extracurricular activities I attach a child support calculation printout which shows the net					
12.	(Giv	as Exhibit "". ditional information about the special expenses: we details about each expense, including any contribution from child, the and the nature of each expense. If you are attaching any receipts, they receipts, they receipts and the nature of each expense.					
13.	I be	lieve the above special expenses are necessary and reasonable	because: (Give details)				
14.		ant to stop paying the following special expenses, claimed by the of the expenses that you do not want to pay, and explain why you believe	•				

Setting child support at an amount different from the Guidelines

15. (Complete only if you are asking the court to set child support at an amount different from the Federal Child Support Guidelines. Make sure the amount is set out in #10. It is strongly recommended that you talk to a lawyer before filling out this section. Check and complete the section that relates to your claim.) **Undue Hardship** I am claiming undue hardship for the following reasons: (Explain your reasons for claiming undue hardship. If your reasons include a payment of money, provide the dollar amounts paid, and attach proof of payment and any other supporting documents as exhibits.) I live with the adults and children listed below. If I live with another adult, their income is set out below. (List the names of any adults and children in your household. If living with an adult, state their gross annual income from all sources and attach proof of their income as exhibits.) **Child Over Age of Majority** I am proposing that child support be set at a different amount because the child, is over the age of majority. That child's (Name of child) circumstances are as follows: (Explain where the child is living, details of their educational program (if applicable), what their expenses are, how those expenses are being paid, the child's own income and other resources, and any other information needed to make a decision about the amount to be paid for child support.) I propose that child support for the child over the age of majority be set at \$_ Income Over \$150,000. I am proposing that child support be set at a different amount because the parent who pays support has an income over \$150,000. My reasons for the amount I have proposed are: (Specify)

		- 0 -	
Medi	cal o	or Dental Insurance Coverage	
16.		I do not have health benefit coverage available to me for the children.	
		I have health benefit coverage available to me for the children. Details of the plan are: (Give details of coverage and cost of the plan)	
	olete i	E OF THE RESPONDENT this section if: you are the support payor,	
•		you are a child support recipient whose income is needed to determine the child support amount [for are claiming special expenses, or you share custody of the child(ren)], or you are the spousal support recipient)	or example: you
17.		nave or will be filing a Financial Statement, which will provide evidence of my income. I ask	the court to
	set	et my guideline income at \$, based on:	
		This is what I believe my gross annual income from all sources will be this year	
		This is my gross annual income for last year	
		Other: (Explain how you have calculated your guideline income and why you believe this amount accepted as your guideline income)	it should be
INICC	ME	OF THE ADDITIONAL	
	olete i	this section if: the Applicant is the support payor, the Applicant is a child support recipient whose income is needed to determine the child support am example: they are claiming special expenses, or they share custody of the child(ren) with you], or the Applicant is the spousal support recipient)	ount [for
18.	The	ne Applicant has has not filed a Financial Statement, which has provided evidence	of their
	inc	come. I ask the court to set the Applicant's guideline income at \$,	based on:

This is what I believe the Applicant's gross annual income from all sources will be this year

should be accepted as their guideline income. Attach any supporting documents as exhibits.)

Other: (Explain how you have calculated the Applicant's guideline income and why you believe this amount

Affidavit - Responding to Changing Custody/Access, Spousal and Child Support

This is the Applicant's gross annual income for last year

(Corr	plete	this section if the Applicant is asking to reduce arrears of child support and/or spousal support)
19.		I agree the Court should reduce the Applicant's support arrears to \$
		I do not agree that the Court should reduce the Applicant's support arrears. My reasons are: (Specify)
ОТН	IER I	INFORMATION
20.	l ha	ave the following other information in response to the Applicant's application:
Swo	rn (O	R Affirmed) before me
on _		, 20
at _		, Alberta(Signature of person swearing / affirming Affidavit)
	Ju	Commissioner for Oaths, ustice of the Peace, or Notary Public in and for the Province of Alberta ID Verified

Assets.	Debts and Monthly Budget of	
		(Your name)
as of		
-	(Date you complete this form)	

A. ASSETS

	Asset	Particulars	Date Acquired	Value (Estimated)
1.	Real Estate: (List any interest in land, including leasehold interests and mortgages owing to you, whether or not you are registered as owner. Provide legal descriptions and indicate without deducting encumbrances or costs of disposition. Record encumbrances under debts)		•	
2.	Vehicles: (List cars, trucks, motorcycles, trailers, motor homes, boats, etc.)			
3.	Financial Assets: (List savings and chequing accounts, term deposits, GIC's, stocks, bonds, Canada Savings Bonds, mutual funds, insurance policies (indicate beneficiaries), accounts receivable, etc.)			
4.	Pensions and RRSP's: (Indicate name of institution where accounts are held, name and address of pension plan and pension details)			

5.	Corporate / Business Interests: (List any interest you hold, directly or indirectly, in any corporation, unincorporated business, partnership, trust, joint venture, etc.)		
6.	Other: (List anything else of value that you own, including precious metals, collections, works of art, jewelry or household items of high value.) (Include location of any safety deposit boxes)		

B. DEBTS

	Debt	Particulars	Date incurred	Balance Owing	Monthly Payment
1.	Secured Debts: (List all mortgages, lines of credit, car loans, and any other debt secured against an asset that you own.)				•
2.	Unsecured Debts: (List all bank loans, personal loans, lines of credit, overdrafts, credit cards and any other debts that you have)				
3.	Other: (List any other debts not listed above)				
_•					
_•					

C. Monthly Budget

Line 1: Total Net Monthly Income from all sources (e.g. include employment income (After payroll deductions), El Benefits, social assistance, Child Tax Benefit etc.) \$

Rent or mortgage	\$ Clothing	\$
Property Taxes	\$ Laundry, dry cleaning	\$
Home insurance	\$ Haircuts, personal care	\$
Cable television	\$ Newspaper, subscriptions	\$
nternet	\$ Alcohol, tobacco	\$
Telephone	\$ Savings for future	\$
Jtilities	\$ Vacation Savings	\$
Home maintenance	\$ Entertainment, recreation	\$
/ehicle Loan	\$ Activities for children	\$
Gas for Vehicle	\$ School expenses	\$
/ehicle maintenance	\$ Day care, babysitting	\$
/ehicle Insurance	\$ Gifts, allowances	\$
Public transportation	\$ Other: (please specify)	\$
Food, groceries, Household supplies	\$	\$
Meals outside the home	\$	\$
Dental/Medical Insurance if not deducted by your employer)	\$	\$
Dental/Medical expenses not covered by insurance Total Monthly Debt	\$	\$
payments	\$	\$
-	\$ Total Column 2	\$

Total Monthly Income from Line 1:		\$
(Minus) Total Monthly Expenses from Line 2:	-	\$
Equals Monthly Surplus or Deficit	+/-	\$

TABLE OF EXHIBITS

(Exhibits are numbered, starting with the first page of the first exhibit being #1, and continuing through to the last page of the last exhibit. On this chart, write the page number where each exhibit starts.)

Exhibit Letter	Brief Description of Exhibit	Page Number
A		
_		
В		