**Form FL‑27 (Joint)** [Rule 12.53(c)]

|  |  |
| --- | --- |
| COURT FILE NUMBER | Clerk’s Stamp |
| COURT | COURT OF KING’S BENCH OF ALBERTA |
| JUDICIAL CENTRE |  |
| WIFE |  |
| HUSBAND |  |
| DOCUMENT | **COROLLARY RELIEF ORDER** |

|  |  |
| --- | --- |
| ADDRESS FOR SERVICE AND CONTACT INFORMATION OF WIFE |  |

|  |  |
| --- | --- |
| ADDRESS FOR SERVICE AND CONTACT INFORMATION OF HUSBAND |  |

DATE ON WHICH ORDER WAS PRONOUNCED:

LOCATION OF HEARING OR TRIAL:  **, Alberta**

NAME OF JUDGE WHO GRANTED THIS ORDER:

THE COURT HAS REVIEWED THE AFFIDAVITS FILED IN SUPPORT OF THIS APPLICATION AND HAS BEEN ADVISED OF THE FOLLOWING:

The Wife has a guideline income of $     ;

The Husband has a guideline income of $     ;

The name and birthdate of each child of the marriage is as follows: *(Indicate full names and dates of birth for each child of the marriage.)*

|  |  |
| --- | --- |
| **Name** | **Date of Birth** |
|  |  |
|  |  |

*(Use where appropriate and summarize reasons. Delete if not applicable.)*

The Parties have agreed to depart from the *Federal Child Support Guidelines* for the following reasons:

*(Use where a Divorce Judgment has already been granted. Delete if not applicable.)*

The Parties were divorced by a Divorce Judgment rendered on [date];

*(Add corollary relief clauses as appropriate in the circumstances, numbered consecutively - see clauses below.* ***Note: The clauses inserted below are provided as a guide and are variable – choose those which apply, delete those which do not apply, and make any changes that are appropriate in the circumstances.)***

**IT IS ORDERED THAT:**

1. The Parties shall have joint custody of the child(ren) of the marriage. The child(ren) shall reside primarily with [Name of party with primary residence], and [Name of other party, with reasonable and generous parenting time] shall have reasonable and generous parenting time with the child(ren).

*(Repeat this clause if the order will specify each party’s parenting time)*

1. [Name of party] shall have parenting time with the child(ren) as follows:

* 1. [Set out parenting time]

1. [Name of party to pay child support] shall pay to [Name of party to receive child support] the sum of **$****per month** for the support of the child(ren) of the marriage, payable on the first day of each month, **commencing** **[date]**.
2. [Name of party to pay child support] shall pay to [Name of party to receive child support] the sum of **$****per month** for additional expenses for the child(ren) of the marriage, payable on the first day of each month, **commencing [date]**, allocated as follows:

|  |  |  |
| --- | --- | --- |
| **Name of child** | **Nature of add-on** | **Amount or percentage** |
|  |  |  |
|  |  |  |

1. [Name of applicable party] shall provide medical and dental insurance coverage for the child(ren) of the marriage.
2. [Name of party to pay child support] shall pay to [Name of party to receive child support] the sum of **$****per month** for [Name of child], a child of the marriage over the age of majority, payable on the first day of each month, **commencing [date]**.
3. [Name of party to pay child support], having satisfied the Court that payment of the full amount of child support prescribed in the *Federal Child Support Guidelines* would cause undue hardship to       shall pay to [Name of party to receive child support] for the support of the child(ren) , the sum of **$****per month** payable on the first day of each month **commencing** **[date]**;

**Child support shall be revisited in** **[month] of** **[year], it being determined that the cause of the undue hardship should be eliminated by that date.**

**Commencing on** **[date]**, [Name of party to pay child support] shall pay child support in the amounts prescribed by the Guidelines, namely **$****per month**.

1. Child support shall not be recalculated by the Child Support Recalculation Program.
2. [Name of party to pay spousal support] shall pay spousal support to [Name of party to receive spousal support] in the sum of **$****per month**, payable on the first day of each month **commencing [date]**;

1. [Other clauses]

***(The following clauses must be included in every support order and should not be changed.)***

1. The amounts owing under this Order shall be paid to the Director of Maintenance Enforcement (“MEP”), 7th Floor North, 10365 ‑ 97 Street, Edmonton, Alberta, T5J 3W7, 780‑422‑5555 (website: www.albertamep.gov.ab.ca) and shall be enforced by MEP on the filing of the Order with MEP by the creditor (recipient of support) or debtor (payor of support). The amounts owing shall continue to be enforced by MEP until the party who filed this Order gives MEP notice in writing withdrawing this Order from filing in accordance with section 9 of the *Maintenance Enforcement Act*.
2. Each party shall provide the other party with a complete copy of his or her income tax return and any notices of assessment and reassessment issued to him or her by the Canada Customs and Revenue Agency on an annual basis, on or before June 30 of each year, as long as there is a child of the marriage as defined by the *Divorce Act* (Canada). In the event that a party has not filed an income tax return for the previous year, he or she shall provide the other party with copies of his or her T4, T4A, and all other relevant tax slips and statements disclosing any and all sources of income, including self-employment income.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Justice of the Court of King’s Bench of Alberta

**CONSENTED TO BY:**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Wife / Solicitor for the Wife

*(if Wife signs, attach Affidavit of Execution)*

**CONSENTED TO BY:**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Husband / Solicitor for the Husband

*(if Husband signs, attach Affidavit of Execution)*

**AFFIDAVIT OF EXECUTION**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| I, |  | , of |  | , Alberta |
|  | *(Name of Witness for Wife’s signature)* |  | *(City / Town)* |  |

SWEAR / AFFIRM AND SAY THAT:

|  |  |  |
| --- | --- | --- |
|  | I was personally present and did see |  |
|  |  | *(Name of Wife)* |

named in the within document,

who is personally known to me to be the person named therein

**OR**

who identified herself to me by means of photographic identification

duly sign and execute the same for the purposes named therein

1. The document was executed at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, Alberta, and I am the subscribing witness thereto.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Sworn / Affirmed before me** | | | | |  |  |
| on |  | , 20 |  |  |  |  |
| at |  | , Alberta. | |  |  |
|  | | | |  | *(Signature of witness)* |
| Commissioner for Oaths in and for the Province of Alberta, Justice of the Peace or Notary Public | | | |  | ID Verified \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

**AFFIDAVIT OF EXECUTION**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| I, |  | , of |  | , Alberta |
|  | *(Name of Witness for Husband’s signature)* |  | *(City / Town)* |  |

SWEAR / AFFIRM AND SAY THAT:

|  |  |  |
| --- | --- | --- |
|  | I was personally present and did see |  |
|  |  | *(Name of Husband)* |

named in the within document,

who is personally known to me to be the person named therein

**OR**

who identified himself to me by means of photographic identification

duly sign and execute the same for the purposes named therein

1. The document was executed at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, Alberta, and I am the subscribing witness thereto.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Sworn / Affirmed before me** | | | | |  |  |
| on |  | , 20 |  |  |  |  |
| at |  | , Alberta. | |  |  |
|  | | | |  | *(Signature of witness)* |
| Commissioner for Oaths in and for the Province of Alberta, Justice of the Peace or Notary Public | | | |  | ID Verified \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |