**Form FL‑48**

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| COURT FILE NUMBER |      Clerk’s Stamp |
| COURT |

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COURT OF JUSTICE

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COURT OF KING’S BENCH |
| JUDICIAL CENTRE (KING’S BENCH) |       |
| COURT LOCATION (COURT OF JUSTICE) |       |
| APPLICANT(S) |       |
| RESPONDENT(S) |       |
| DOCUMENT | **STATEMENT – SPOUSAL / PARTNER SUPPORT** |

|  |  |
| --- | --- |
| ADDRESS FOR SERVICE ANDCONTACT INFORMATION OFPARTY FILING THIS DOCUMENT |       |

I,      , swear/affirm that:

*(Choose one)*

1. I am applying for:

|  |  |
| --- | --- |
|   | spousal support from the Respondent. |
|  |  |
|   | adult interdependent partner support from the Respondent. |

2. The Respondent and I began living together on [date]. We continued to live together until [date].

*(Choose any applicable statements)*

3. I ask the Court for support:

|  |  |
| --- | --- |
|   | in the amount of $      per month to commence on and to continue until [date]. |
|  |  |
|   | in a lump sum of $     . |
|  |  |
|   | other:       |

*(Choose one)*

4. The following one statement applies to this application:

|  |  |
| --- | --- |
|   | the Respondent and I are living separate and apart. |
|  |  |
|   | the Respondent and I are still living together but we are experiencing such discord that we cannot reasonably be expected to continue to live together. |
|  |
|  |  |
|  |  |
|   | the Respondent and I are still living together but the Respondent has without sufficient cause refused or neglected to provide me with the necessaries of life. |
|  |
|  |  |
|   | a declaration of irreconcilability has been granted. (attach a copy) |

*(Complete only if applicable)*

5. There is/are       child(ren) living in my home. They are:

*(Complete only if applicable)*

|  |  |  |
| --- | --- | --- |
| 6. |   | There is a Child Support Order or agreement to support the child(ren) listed in paragraph 5. (attach a copy of the Order or agreement) |
|  |  |  |
|  |  |  |
|  |   | There is no Child Support Order or agreement to support the child(ren) listed in paragraph 5. |
|  |  |  |

*(Complete only if applicable)*

7. The Respondent and I have the following agreement(s) regarding my support: (attach a copy of the agreement(s))

*(Complete only if applicable)*

8. Provide details of why that spousal/partner support agreement should or should not be upheld by the Court:

9. Before my relationship with the Respondent, my financial situation, my health and my ability to work were as follows:

10. During the time the Respondent and I lived together, the Respondent and I each contributed towards the household expenses as follows:

*(Provide details of income including contributions towards household expenses from others. Provide financial documents.)*

11. Now that the Respondent and I have separated, my financial situation, my health and my ability to work are as follows:

12. My annual total income for the last three years was (see line 150 of tax return):

|  |  |
| --- | --- |
| 20      | $      |
| 20      | $      |
| 20      | $      |

 I expect my gross annual income this year to be $     .

 Currently, I earn income from      . (attach financial documents)

13. My current monthly household expenses are as outlined in the attached budget. (attach a budget)

14. I am presently unable to fully support myself because:

*(Choose all that apply)*

|  |  |  |
| --- | --- | --- |
| 15. |   | I want financial information from the Respondent. (attach written request for financial information) |
|  |  |  |
|  |   | I believe the Respondent’s annual income should be set at $     . |
|  |  |  |
|  |   | I know the following facts about the Respondent’s employment, training, health and ability to work: (specify)      |
|  |
|  |

*(Complete only if applicable)*

16. To the best of my knowledge, the Respondent has a legal obligation to support the following individuals: (specify)

17. I have the following other information in support of my application: (specify)

|  |  |  |
| --- | --- | --- |
| Sworn/Affirmed before me on [date], 20[year] at [city], Alberta.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Justice of the Peace or Commissioner for Oaths in and for the Province of Alberta | )))))))))) | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Applicant’s Signature |