

Number _____
_____ Registry

IN THE PROVINCIAL COURT OF BRITISH COLUMBIA

BETWEEN:

CLAIMANT

AND:

DEFENDANT

STATEMENT OF FACTS

1. I, _____, am the Defendant in this action and as such have personal knowledge of the facts hereinafter deposed to, save and except where stated to be based on information and belief, and as to such matters I verily believe them to be true.

2. A Garnishing order was issued in this action on the _____ day of _____, 200__ and served on the Garnishee, _____.

3. The Garnishee paid \$ _____ into court.

4. In the lawsuit the Claimant is suing for _____

5. My defence to this lawsuit is _____

6. As a result of the Garnishment _____

7. My income, expenses, assets and debts are set out on the attached Statement of Finances.

8. I therefore request an Order to set aside the Garnishing Order and to have the money paid into Court by the Garnishee paid out to me.

SWORN BEFORE ME at Victoria, in
the Province of British Columbia,
this day of 200 .

Defendant

A Commissioner for taking Affidavits
within British Columbia



STATEMENT OF FINANCES

IN THE PROVINCIAL COURT OF BRITISH COLUMBIA (SMALL CLAIMS COURT)

REGISTRY FILE NUMBER
REGISTRY LOCATION

I, _____,
state:

(STRIKE OUT ANYTHING THAT DOES NOT APPLY TO YOU AND INITIAL.)

- I am married / single / other (specify): _____
- I support and maintain (specify number):
 _____ Children under 18
 _____ other dependants
- Listed below is an accurate "Statement of Finances" of my household.

MONTHLY INCOME		MONTHLY EXPENSES	
Net Salary	\$ _____	Rent	\$ _____
Commissions	\$ _____	Mortgage	\$ _____
Tips and Gratuities	\$ _____	Property Taxes	\$ _____
Unemployment Insurance	\$ _____	Utilities (heat & light)	\$ _____
Pension	\$ _____	Phone	\$ _____
Investments	\$ _____	Cablevision	\$ _____
Rentals	\$ _____	House/Tenant Insurance	\$ _____
Business Income	\$ _____	Life Insurance	\$ _____
Child Tax Benefit	\$ _____	Food	\$ _____
Maintenance (if any)	\$ _____	Restaurant Meals	\$ _____
Workers' Compensation	\$ _____	Sundries & Personal Grooming	\$ _____
Monthly Income of Spouse/Common-Law Spouse living with me	\$ _____	Clothing	\$ _____
Income of Children (if any)	\$ _____	Laundry & Dry Cleaning	\$ _____
Other	\$ _____	Motor Vehicle (lease or loan)	\$ _____
SUB-TOTAL	\$ _____	(license, insurance, fuel & service)	\$ _____
Income Assistance	\$ _____	Transportation (public)	\$ _____
A. INCOME TOTAL	\$ _____	Newspapers & Subscriptions	\$ _____
		Entertainment	\$ _____
		Alcohol & Tobacco	\$ _____
		Gifts	\$ _____
		Church & Charities	\$ _____
		Maintenance Payments	\$ _____
		Child Care & Babysitting	\$ _____
		School Expenses/Children's Activities, Lessons	\$ _____
		Other	\$ _____
		B. EXPENSES TOTAL	\$ _____

MONTHLY DEBTS	VALUE OF ASSETS
Credit Card(s): (please specify)	Real Estate Equity
_____ \$ _____	Market Value \$ _____
_____ \$ _____	Mortgage Balance \$ _____
_____ \$ _____	
Bank or Finance Company: (please specify)	Automobile Equity
_____ \$ _____	Make and Year \$ _____
_____ \$ _____	Market Value \$ _____
_____ \$ _____	Loan Balance \$ _____
Department Store(s): (please specify)	
_____ \$ _____	Bank or Other Account (include RRSP's) \$ _____
_____ \$ _____	Stocks & Bonds \$ _____
_____ \$ _____	Life Insurance \$ _____
Other:	Money owing to you \$ _____
_____ \$ _____	Name of Debtor _____
_____ \$ _____	
_____ \$ _____	Personal Property \$ _____
C DEBT PAYMENT TOTAL \$ _____	Cash \$ _____
	Other \$ _____

If you need more space for any item on this Statement, attach an extra sheet and sign it.

Date: _____

Signed:

Print Name: _____

A. INCOME TOTAL	\$ _____
B. EXPENSES TOTAL	- \$ _____
SUB-TOTAL	= \$ _____
C. DEBT PAYMENT TOTAL	- \$ _____
BALANCE	= \$ _____