

FORM 65

Monthly Income and Expense Statement of the Bankrupt/Debtor and the Family Unit
and Information (or Amended Information) Concerning the Financial Situation of the Individual Bankrupt
(Section 68 and Subsection 102(3) of the Act; Rule 105(4))

(Title Form 1)

Original Amended

Information concerning the monthly income and expense statement of the bankrupt/debtor and the family unit, financial situation of the bankrupt/debtor and bankrupt's obligation to make payments required under section 68 of the Act to the estate of the bankrupt are as follows:

MONTHLY INCOME	Bankrupt/Debtor	Other members of the family unit	Total
Net employment income	_____		
Net pension/annuities	_____		
Net child support	_____		
Net spousal support	_____		
Net employment insurance benefits	_____		
Net social assistance	_____		
Self-employment income			
Gross _____ Net	_____		
Other net income	_____		
<i>(Such as amounts received as damages for wrongful dismissal, as pay equity settlement, or that relate to workers' compensation)</i>			
<i>(Provide details _____)</i>			
TOTAL MONTHLY INCOME	\$ _____ (1)	\$ _____ (2)	
TOTAL MONTHLY INCOME OF THE FAMILY UNIT ((1) + (2))			▶ \$ _____ (3)
MONTHLY NON-DISCRETIONARY EXPENSES			
Child support payments	_____		
Spousal support payments	_____		
Child care	_____		
Health condition expenses	_____		
Fines/penalties imposed by the Court	_____		
Expenses as a condition of employment	_____		
Debts where stay has been lifted	_____		
Other expenses	_____		
<i>(Provide details _____)</i>			
TOTAL MONTHLY NON-DISCRETIONARY EXPENSES		\$ _____ (4)	\$ _____ (5)
TOTAL MONTHLY NON-DISCRETIONARY EXPENSES OF THE FAMILY UNIT ((4) + (5))			▶ \$ _____ (6)
AVAILABLE MONTHLY INCOME OF THE BANKRUPT/DEBTOR ((1) - (4))	\$ _____ (7)		
AVAILABLE MONTHLY INCOME OF THE FAMILY UNIT ((3) - (6))			▶ \$ _____ (8)
BANKRUPT'S/DEBTOR'S PORTION OF THE AVAILABLE MONTHLY INCOME OF THE FAMILY UNIT ((7) / (8) X 100)			▶ % _____ (9)

* If one or more members of the bankrupt's/debtor's family unit have refuse to divulge this information, please provide details as required by paragraph 6(3) of Directive No. 11R2.

MONTHLY DISCRETIONARY EXPENSES: *(Family unit)*

Housing expenses		Living expenses	
Rent/mortgage/hypothec	_____	Food/grocery	_____
Property taxes/condo fees	_____	Laundry/dry cleaning	_____
Heating/gas/oil	_____	Grooming/toiletries	_____
Telephone	_____	Clothing	_____
Cable	_____	Other	_____
Hydro	_____	Transportation expenses	
Water	_____	Car lease/payments	_____
Furniture	_____	Repair/maintenance/gas	_____
Other	_____	Public transportation	_____
Personal expenses		Other	_____
Smoking	_____	Insurance expenses	
Alcohol	_____	Vehicle	_____
Dining/lunches/restaurants	_____	House	_____
Entertainment/sports	_____	Furniture/contents	_____
Gifts/charitable donations	_____	Life insurance	_____
Allowances	_____	Other	_____
Other	_____	Payments	
Non-recoverable medical expenses		To the estate	_____
Prescriptions	_____	To secured creditor	_____
Dental	_____	<i>(Other than mortgage and vehicle)</i>	_____
Other	_____	Other	_____
TOTAL MONTHLY DISCRETIONARY EXPENSES (FAMILY UNIT)			- \$ _____ (10)
MONTHLY SURPLUS OR (DEFICIT) FAMILY UNIT ((8) - (10))			= \$ _____ (11)

INFORMATION (OR AMENDED INFORMATION) CONCERNING THE FINANCIAL SITUATION OF THE INDIVIDUAL BANKRUPT

Payments to the estate as per agreement

Number of persons in household family unit, including bankrupt: _____
 Total amount bankrupt has agreed to pay monthly _____ (12)
 Amount bankrupt has agreed to pay monthly to repurchase assets
(Provide details) _____ (13)
 Residual amount paid into the estate ((12) - (13)) _____ (14)

Payments required by Directive No. 11R2 (Surplus Income)

Monthly amount required by Directive No. 11R2 (Surplus Income) based on percentage established on line (9) _____ (15)
 Difference between (14) and (15) _____ (16)
 Other applicable comments *(If amount on line (14) is less than amount on line (15), explain why the required payments are not being made: _____)*
 Amendment or material change *(If the information relates to a material change or an amendment, provide details: _____)*

Dated at _____, this _____ day of _____.

Trustee

Bankrupt/Debtor

Notes: In a joint assignment, only one form is required and each debtor's monthly income and non-discretionary expenses have to be explained in detail.

If a copy of this Form is sent electronically by means such as email, the name and contact information of the sender, prescribed in Form 1.1, must be added at the end of the document.