

FORM 65

Monthly Income and Expense Statement of the Bankrupt 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 and Rule 105(4))

(Title Form 1)

The information concerning the monthly income and expense statement of the bankrupt and the family unit, the financial situation of the bankrupt and the 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 | 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 | _____ | | |
| (Provide details _____) | | | |
| 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 | _____ | | |
| (Provide details _____) | | | |
| 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 ((1) - (4)) | \$ _____ (7) | | |
| AVAILABLE MONTHLY INCOME OF THE FAMILY UNIT ((3) - (6)) | | | ➤ \$ _____ (8) |
| BANKRUPT'S PORTION OF THE AVAILABLE MONTHLY FAMILY UNIT INCOME ((7) / (8) X 100)) | | | ➤ % _____ (9) |

**If one or more members of the family unit have refused to divulge this information, please provide details as required by section 10 of Directive 11R.

FORM 65 -- *Concluded*

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 the Directive on Surplus Income

Monthly amount required by the Directive on Surplus Income based on percentage established on line (9) (15)
 Difference between amounts at lines (14) and (15) (16)
 Other applicable comments: *(If amount at line (14) is less than amount at 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

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.