Form D

REQUEST FOR SUPPORT ORDER (IF RESPONDENT DOES NOT PROVIDE FINANCIAL INFORMATION)

Note to the Claimant/Applicant: Please provide as much information as possible. If additional information is required by the court, it may result in a delay.

	Form Section	Instructions for Completion General: This Form will allow the Court to make an order in the absence of the Respondent. It should be included with all applications to establish or modify a support order. Ignore the references to other Forms. Submit this form with accompanying receipts or other information, along with the required UIFSA documents.
1. 🗌	If the Respondent does not provide sufficient financial information, or fails to appear at the hearing, I ask the court to impute the Respondent's income at \$ per year based on the information provided below.	This box should always be checked. It requests the Court to impute income to the Respondent if he or she fails to appear. If you know the amount of the Respondent's income, include it here. If not, leave that blank, but check the box.
2.	Based on the Respondent's imputed income, I ask for an order for (check all that apply):	This box should always be checked.
A	Child support in accordance with the child support guidelines table amount (Form C). The total requested for all children in this category is: \$per month	This box should always be checked. To determine the amount, go to the Child Support Table Look-Up. Choose the province or territory to which you are sending the application. Enter the income from Section 1 above and choose the amount for the number of children seeking support.
В. 🗌	Monthly special or extraordinary expenses as outlined on Form F. Based on my financial information submitted on Form I and the Respondent's income (or imputed income) contained on this form, the Respondent's portion of the total requested for all children in this category is: \$	If the CP is requesting additional MONTHLY expenses for: Day care Child care Medical expenses Include the monthly amount being sought here. Be sure to attach receipts or an explanation of how the amounts are calculated.
C. 🗌	Child support in an amount different than the child support guidelines table amount (Forms C and E). The total requested for all children in this category is: \$	Leave Section C blank Fill in the total amount from Section A and Section B.

D	Recurring annual special or extraordinary expenses as outlined on Form F. Based on my financial information submitted on Form I and the Respondent's income (or imputed income) contained on this form, the Respondent's portion of the total requested for all children in this category is: \$	Check this box if the CP is requesting additional ANNUAL expenses for: Day care Child care Medical expenses
	NOTE: DO NOT MEIGAE THE EXPENSES IISTEA IT SECTIONS D'ANA E.	Include the annual amount being sought here. Be sure to attach receipts or an explanation of how the amounts are calculated.
E	One-time special or extraordinary expenses as outlined on Form F. Based on my financial information submitted on Form I and the Respondent's income (or imputed income) contained on this form, the Respondent's portion of the total requested for all children in this category is: \$ NOTE: Do not include the expenses listed above in sections B and D.	Check this box if the CP is requesting additional ONE-TIME extraordinary expenses. Include the amount being sought here. Be sure to attach receipts or an explanation of how the amount is calculated.
F. 🗌	Support for myself (Forms H and I attached) in the amount of: \$ per month NOTE: This amount should be entered as the total amount of support for yourself claimed on Form A.1 or Form A.3. This amount may or may not be the total amount that you will enter on Form A.2 or Form A.4	Check this box if the CP is requesting spousal support in addition to child support. The amount being requested should be included.
The	e most recent information I have about the Respondent's income is ached. The information includes: Employment (include occupation, name and address of employer, other information) Self-employment (type of work, business address, any other information known) Employment Insurance (list dates on El) Social or Income Assistance (list dates on IA, if know) Disability Insurance (list dates, reason, any other information known) Statements of Earnings (pay stubs) Income Tax Returns Notices of Assessment Other (specify): Additional page(s) attached Provide details for all source(s) of income:	This section includes information about the NCP's income, if known to the applicant. Check the appropriate box and attach any supporting information, such as income tax returns or pay stubs. If the applicant does not have any information about the NCP's current income, leave Section 3 blank and complete Section 4.
	Additional page(s) attached	

income		•	Complete Section 4 if the applicant does not have information about the current income but does have information about previous
	In the past the Respondent has work complete B):	employment, the type of work the NCP engaged in, and the NCP's assets.	
	Type of work or occupation	Dates of work (if known) (dd-mm-yyyy):	
		Additional page(s) attached	
C. □	Attached is information from (source It shows that a person employed as a Respondent may have had)	work/occupation that the in we an annual income of out may assist the court nt if sufficient financial urt by the Respondent.	
		Additional page(s) attached	
	Attached are other documents that r imputing income to the Respondent information is provided to the court	if insufficient financial	
Thes	e documents include:		
		Additional page(s) attached	

 I have no information about the Respondent's sources of income, or past or present work or occupations; however, the following may assist the court in imputing income to the Respondent if sufficient financial information is not provided to the court: Attached information from (source) 	Complete Section 5 if the applicant has no information about the income or situation of the NCP. Check Box C and provide any additional information that could assist the Court to make an order for support. Canada provides the following guidance: "Box 1: Go to the public library or use the Internet
This information shows that the average annual income in the Respondent's jurisdiction is \$ B Attached statistical information from (source)	to find information about the average annual income for a person living in the area where the Respondent lives. Print the information you find." "Box 2 Statistics Canada has information showing the average family income for communities across Canada. The court may use the average family income for where the Respondent lives to impute his/her income."
This information shows the average family income in the Respondent's jurisdiction. C. Attached other documents that may assist the court in imputing income to the Respondent if insufficient financial information is provided to the court by the Respondent.	
These documents include:	
Additional page(s) attached	
This document is attached to and forms part of the evidence in my support/support variation application.	The document should be signed by the Custodial Parent, if possible. If the Custodial Parent is in receipt of TANF benefits, the form may be signed by the caseworker.
(Signature of Claimant/Applicant)	