

INFORMATION STATEMENT

FULL NAME _____ AGE _____

ADDRESS _____

OCCUPATION _____ EMPLOYER _____

SPOUSE'S NAME _____ AGE _____

OCCUPATION _____ EMPLOYER _____

DEPENDANTS: (Other than spouse) List by name and age:

INCOME

Usual monthly take home pay (net) \$ _____

Spouse's usual monthly take home pay (net) \$ _____

Family Allowance \$ _____

Support/Maintenance received \$ _____

Other income (please specify) _____ \$ _____

TOTAL NET INCOME \$ _____

EXPENSES

USUAL MONTHLY LIVING EXPENSES FOR MYSELF AND DEPENDENTS ARE:

Food \$ _____ Clothing \$ _____

Rent \$ _____ Medication \$ _____

Utilities \$ _____ Dental \$ _____

Transportation \$ _____ Recreation \$ _____

Insurance \$ _____ Incidentals \$ _____

Alimony or Other _____ \$ _____

Maintenance paid \$ _____ Other _____ \$ _____

TOTAL EXPENSES \$ _____

ADDITIONAL INFORMATION (please indicate whether or not your employment is steady or seasonal and what your future employment prospects are):

ASSETS ACQUIRED SINCE DATE OF BANKRUPTCY
()

CASH: _____	\$ _____
FURNITURE: _____	\$ _____
PERSONAL EFFECTS: _____	\$ _____
AUTOMOBILE: _____	\$ _____
REAL ESTATE: _____	\$ _____
OTHER ASSETS: _____	\$ _____
_____	\$ _____

ADDITIONAL INFORMATION:

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I, _____, of the _____ of
 _____, in the Province of British Columbia,
 make oath and say that the above information statement is, to the best of
 my knowledge and belief, a full, true and complete report as to my
 financial circumstances on the ____ day of _____, 200__.

SWORN BEFORE ME at the _____)
)
 of _____ in)
)
 the Province of British Columbia,)
)
 this ____ day of _____,)
)
 200__.

Signature of Bankrupt

A Commissioner, etc., in and for the
Province of British Columbia.