

Court File Number

(Name of court)
at
Court office address

Family Law Rules, O. Reg. 114/99
Form 10: Answer

Applicant(s)

Full legal name & address for service — street & number, municipality, postal code, telephone & fax numbers and e-mail address (if any).

Lawyer's name & address — street & number, municipality, postal code, telephone & fax numbers and e-mail address (if any).

Respondent(s)

Full legal name & address for service — street & number, municipality, postal code, telephone & fax numbers and e-mail address (if any).

Lawyer's name & address — street & number, municipality, postal code, telephone & fax numbers and e-mail address (if any).

Name & address of Children's Lawyer's agent for service (street & number, municipality, postal code, telephone & fax numbers and e-mail address (if any)) and name of person represented.

INSTRUCTIONS: Financial Statement

COMPLETE A FINANCIAL STATEMENT (Form 13) IF:

- you are making or responding to a claim for spousal support; or
you are responding to a claim for child support; or
you are making a claim for child support in an amount different from the table amount specified under the Child Support Guidelines.

You must complete all parts of the form UNLESS you are ONLY responding to a claim for child support in the table amount specified under the Child Support Guidelines AND you agree with the claim. In that case, only complete Parts 1, 2 and 3.

COMPLETE A FINANCIAL STATEMENT (Form 13.1) IF:

- you are making or responding to a claim for property or exclusive possession of the matrimonial home and its contents; or
you are making or responding to a claim for property or exclusive possession of the matrimonial home and its contents together with other claims for relief.

TO THE APPLICANT(S):

If you are making a claim against someone who is not an applicant, insert the person's name and address here.

AND TO: (full legal name) an added respondent,
of (address of added party)

My name is (full legal name)

1. I agree with the following claim(s) made by the applicant: (Refer to the numbers alongside the boxes on page 3 of the application form.)

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2. I do not agree with the following claim(s) made by the applicant: *(Again, refer to the numbers alongside the boxes on page 3 of the application form.)*

3. I am asking that the applicant’s claim (except for the parts with which I agree) be dismissed with costs.

4. I am making a claim of my own.
(Attach a “Claim by Respondent” page and include it as page 3. Otherwise, do not attach it.)

5. The FAMILY HISTORY, as set out in the application is correct.
 is not correct.

(If it is not correct, attach your own FAMILY HISTORY page and underline those parts that are different from the applicant’s version.)

6. The important facts that form the legal basis for my position in paragraph 2 are as follows:
(In numbered paragraphs, set out the facts for your position. Attach an additional sheet and number it if you need more space.)

Put a line through any space left on this page

Date of signature

Respondent’s signature

CLAIM BY RESPONDENT

Fill out a separate claim page for each person against whom you are making your claim(s).

7. THIS CLAIM IS MADE AGAINST

- THE APPLICANT
- AN ADDED PARTY, whose name is: *(full legal name)*
(If your claim is against an added party, make sure that this person's name appears on page 1 of this form.)

8. I ASK THE COURT FOR THE FOLLOWING:

(Claims below include claims for temporary orders.)

Claims under the <i>Divorce Act</i> <i>(Check boxes in this column only if you are asking for a divorce and your case is in the Family Court of the Superior Court of Justice.)</i>	Claims relating to property <i>(Check boxes in this column only if your case is in the Family Court of the Superior Court of Justice.)</i>	Claims relating to child protection
00 <input type="checkbox"/> a divorce 01 <input type="checkbox"/> support for me 02 <input type="checkbox"/> support for child(ren)-table amount 03 <input type="checkbox"/> support for child(ren)-other than table amount 04 <input type="checkbox"/> custody of child(ren) 05 <input type="checkbox"/> access to child(ren)	20 <input type="checkbox"/> equalization of net family properties 21 <input type="checkbox"/> exclusive possession of matrimonial home 22 <input type="checkbox"/> exclusive possession of contents of matrimonial home 23 <input type="checkbox"/> freezing assets 24 <input type="checkbox"/> sale of family property	40 <input type="checkbox"/> access 41 <input type="checkbox"/> lesser protection order 42 <input type="checkbox"/> return of child(ren) to my care 43 <input type="checkbox"/> place child(ren) into care of <i>(name)</i> _____ 44 <input type="checkbox"/> children's aid society wardship for _____ months 45 <input type="checkbox"/> society supervision of my child(ren)
Claims under the <i>Family Law Act</i> or <i>Children's Law Reform Act</i>	Other claims	
10 <input type="checkbox"/> support for me 11 <input type="checkbox"/> support for child(ren)-table amount 12 <input type="checkbox"/> support for child(ren)-other than table amount 13 <input type="checkbox"/> custody of child(ren) 14 <input type="checkbox"/> access to child(ren) 15 <input type="checkbox"/> restraining/non-harassment order 16 <input type="checkbox"/> indexing spousal support 17 <input type="checkbox"/> indexing same-sex partner support 18 <input type="checkbox"/> declaration of parentage 19 <input type="checkbox"/> guardianship over child's property	30 <input type="checkbox"/> costs 31 <input type="checkbox"/> annulment of marriage 32 <input type="checkbox"/> prejudgment interest	
50 <input type="checkbox"/> Other <i>(Specify.)</i>		

Give details of the order that you want the court to make. *(Include any amounts of support (if known) and the name(s) of the child(ren) for whom support, custody or access is claimed.)*

IMPORTANT FACTS SUPPORTING MY CLAIM(S)

(In numbered paragraphs, set out the facts that form the legal basis for your claim(s). Attach an additional page and number it if you need more space.)

Put a line through any space left on this page.

Date of signature

Respondent's signature