

Court File Number
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\_\_\_\_\_ (Name of court)

at \_\_\_\_\_  
Court office address

**Form 10A: Reply by**

- applicant  
 added respondent

**Applicant(s)**

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

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

**Respondent(s)**

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

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

**Children's Lawyer**

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

**INSTRUCTIONS: Financial Statement**

COMPLETE A FINANCIAL STATEMENT (Form 13) IF:

- you are responding to a claim for spousal support; or
- you are responding to a claim for child support.

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

**TO ALL PARTIES:**

1. My name is *(full legal name)* \_\_\_\_\_
2. I agree with the following claim(s) made by the respondent in his/her answer: *(Refer to the numbers alongside the boxes on page 3 of the answer form.)*
3. I do not agree with the following claim(s) made by the respondent: *(Again, refer to the numbers alongside the boxes on page 3 of the answer form.)*
4.  I am asking that the respondent's claim (except for the parts with which I agree) be dismissed with costs.

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5. The important facts supporting my position in paragraph 3 are as follows:  
*(In numbered paragraphs, set out the reasons for your position. Attach an additional sheet and number it if you need more space.)*

1.

*Put a line through any space left on this page.*

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Date of signature

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Signature