

Child support review – statement of financial position



This is not the application form for a child support review.

Completing this form is optional. It will help the review officer to consider all the circumstances of your case and determine how any change to the child support assessment would affect each party.



We may give information you provide to any other party who is part of the assessment.

Please fill in as much detail as you can. If you need more space, use extra sheets of paper and attach them to this form.

We may ask you for proof of the details written on this form (such as payslips or invoices).



More information and forms can be found on our website at www.ird.govt.nz/childsupport

If you need help completing this form call us on 0800 221 221.

1 Your details

Your IRD number (8 digit numbers start in the second box. 1 2 3 4 5 6 7 8)

Your name

First name(s)

Surname

Your address

Street address or PO Box

Suburb, town or city Postcode

Phone number(s)

Day Evening Mobile

2 Name and address of employer

Name

Address

Phone number(s)

Day Evening Mobile

If you have more than one employer, show the one you work the most hours for

Your occupation or job

Declaration

- To the best of my knowledge the information given is true and correct.
- I understand that the financial information in this form will be provided to the other person(s) for the purpose of this review if they are the applicant or the other party and they ask for a copy.
- I understand that even if a copy is not requested, the contents of this statement may be referred to in the review officer's decision.

Signature

/ /
Date

There are penalties for deliberately giving false or misleading information.

OFFICE USE ONLY Review case number Applicant Other party Office

3 Income

Please show your income details before tax and other deductions such as superannuation, union fees or insurance are taken out. Only give details about personal income and expenses, not company, partnership or trust details.

| | Your yearly income | Your monthly income | Income of spouse or partner living with you |
|---|--------------------|---------------------|---|
| Salary or wages from regular job(s) | \$. | \$. | \$. |
| Work and Income benefit | \$. | \$. | \$. |
| Type | \$. | \$. | \$. |
| ACC payments | \$. | \$. | \$. |
| Pay for temporary, casual or part-time work | \$. | \$. | \$. |
| Drawings from business | \$. | \$. | \$. |
| Self-employed income | \$. | \$. | \$. |
| Superannuation | \$. | \$. | \$. |
| Working for Families Tax Credits | \$. | \$. | \$. |
| Child support or maintenance | \$. | \$. | \$. |
| Rent or board | \$. | \$. | \$. |
| Interest or dividends | \$. | \$. | \$. |
| Other | \$. | \$. | \$. |
| Total income | \$. | \$. | \$. |

| | Name | Relationship to you (for example, son, mother, partner) | Date of birth (children only) |
|---|------|---|-------------------------------|
| Please give information about every person you financially support or help support. | | | / / |
| | | | / / |
| | | | / / |
| | | | / / |
| | | | / / |
| | | | / / |
| | | | / / |
| | | | / / |
| Include anyone you financially support, or help support, who doesn't live in the same house as you. | | | / / |
| | | | / / |
| | | | / / |
| | | | / / |
| | | | / / |
| | | | / / |
| | | | / / |
| | | | / / |

Expenses

| | Your monthly share | Spouse or partner's share |
|---|--|--|
| How much do you pay each month for the following? | | |
| Rent, board or mortgage | \$ <input type="text" value="."/> <input type="text" value="."/> | \$ <input type="text" value="."/> <input type="text" value="."/> |
| House maintenance | \$ <input type="text" value="."/> <input type="text" value="."/> | \$ <input type="text" value="."/> <input type="text" value="."/> |
| House and contents insurance | \$ <input type="text" value="."/> <input type="text" value="."/> | \$ <input type="text" value="."/> <input type="text" value="."/> |
| Rates | \$ <input type="text" value="."/> <input type="text" value="."/> | \$ <input type="text" value="."/> <input type="text" value="."/> |
| Power and gas | \$ <input type="text" value="."/> <input type="text" value="."/> | \$ <input type="text" value="."/> <input type="text" value="."/> |
| Telephone, including mobile | \$ <input type="text" value="."/> <input type="text" value="."/> | \$ <input type="text" value="."/> <input type="text" value="."/> |
| Food and groceries | \$ <input type="text" value="."/> <input type="text" value="."/> | \$ <input type="text" value="."/> <input type="text" value="."/> |
| Cigarettes and alcohol | \$ <input type="text" value="."/> <input type="text" value="."/> | \$ <input type="text" value="."/> <input type="text" value="."/> |
| Entertainment | \$ <input type="text" value="."/> <input type="text" value="."/> | \$ <input type="text" value="."/> <input type="text" value="."/> |
| Rental of household items | \$ <input type="text" value="."/> <input type="text" value="."/> | \$ <input type="text" value="."/> <input type="text" value="."/> |
| TV rental, including Sky | \$ <input type="text" value="."/> <input type="text" value="."/> | \$ <input type="text" value="."/> <input type="text" value="."/> |
| Hire purchase (payments only – show details of what you owe on the next page) | \$ <input type="text" value="."/> <input type="text" value="."/> | \$ <input type="text" value="."/> <input type="text" value="."/> |
| Bus, train, taxi fares and petrol | \$ <input type="text" value="."/> <input type="text" value="."/> | \$ <input type="text" value="."/> <input type="text" value="."/> |
| Vehicle registration and insurance | \$ <input type="text" value="."/> <input type="text" value="."/> | \$ <input type="text" value="."/> <input type="text" value="."/> |
| Vehicle maintenance | \$ <input type="text" value="."/> <input type="text" value="."/> | \$ <input type="text" value="."/> <input type="text" value="."/> |
| Clothing and footwear | \$ <input type="text" value="."/> <input type="text" value="."/> | \$ <input type="text" value="."/> <input type="text" value="."/> |
| Childcare | \$ <input type="text" value="."/> <input type="text" value="."/> | \$ <input type="text" value="."/> <input type="text" value="."/> |
| School expenses | \$ <input type="text" value="."/> <input type="text" value="."/> | \$ <input type="text" value="."/> <input type="text" value="."/> |
| Child support or maintenance payments | \$ <input type="text" value="."/> <input type="text" value="."/> | \$ <input type="text" value="."/> <input type="text" value="."/> |
| Access to children (travel and accommodation) | \$ <input type="text" value="."/> <input type="text" value="."/> | \$ <input type="text" value="."/> <input type="text" value="."/> |
| Animal expenses (food, vet, registration) | \$ <input type="text" value="."/> <input type="text" value="."/> | \$ <input type="text" value="."/> <input type="text" value="."/> |
| Work and Income repayments | \$ <input type="text" value="."/> <input type="text" value="."/> | \$ <input type="text" value="."/> <input type="text" value="."/> |
| Medical (not claimed on insurance)—doctor, dentist, pharmacy, optician | \$ <input type="text" value="."/> <input type="text" value="."/> | \$ <input type="text" value="."/> <input type="text" value="."/> |
| Insurance (medical, life, other) | \$ <input type="text" value="."/> <input type="text" value="."/> | \$ <input type="text" value="."/> <input type="text" value="."/> |
| Superannuation contributions | \$ <input type="text" value="."/> <input type="text" value="."/> | \$ <input type="text" value="."/> <input type="text" value="."/> |
| Store cards, such as Farmers, or The Warehouse (payments only – show details of what you owe on the next page) | \$ <input type="text" value="."/> <input type="text" value="."/> | \$ <input type="text" value="."/> <input type="text" value="."/> |
| Credit card repayments (payments only – show details of what you owe on the next page) | \$ <input type="text" value="."/> <input type="text" value="."/> | \$ <input type="text" value="."/> <input type="text" value="."/> |
| Bank or loan repayments (payments only – show details of what you owe on the next page) | \$ <input type="text" value="."/> <input type="text" value="."/> | \$ <input type="text" value="."/> <input type="text" value="."/> |
| Donations | \$ <input type="text" value="."/> <input type="text" value="."/> | \$ <input type="text" value="."/> <input type="text" value="."/> |
| Tax | \$ <input type="text" value="."/> <input type="text" value="."/> | \$ <input type="text" value="."/> <input type="text" value="."/> |
| Total monthly expenses | \$ <input type="text" value="."/> <input type="text" value="."/> | \$ <input type="text" value="."/> <input type="text" value="."/> |

| | | | | |
|------------------------|----------------|----------------------|-------------------|----------------------|
| <i>OFFICE USE ONLY</i> | Total income | <input type="text"/> | Total assets | <input type="text"/> |
| | Total expenses | <input type="text"/> | Total liabilities | <input type="text"/> |
| | Balance | <input type="text"/> | Balance | <input type="text"/> |

5

Assets and liabilities

What you own and what you owe

| | Ownership | | Value | Amount owing |
|---|--------------------------|--------------------------|-------------------------|-------------------------|
| | self | joint | | |
| House | | | | |
| <input type="text"/> | <input type="checkbox"/> | <input type="checkbox"/> | \$ <input type="text"/> | \$ <input type="text"/> |
| Term of loan <input type="text"/> Date started <input type="text"/> / <input type="text"/> / <input type="text"/> | | | | |
| Other real estate (give details, for example, flats, land) | | | | |
| <input type="text"/> | <input type="checkbox"/> | <input type="checkbox"/> | \$ <input type="text"/> | \$ <input type="text"/> |
| Term of loan <input type="text"/> Date started <input type="text"/> / <input type="text"/> / <input type="text"/> | | | | |
| <input type="text"/> | <input type="checkbox"/> | <input type="checkbox"/> | \$ <input type="text"/> | \$ <input type="text"/> |
| Term of loan <input type="text"/> Date started <input type="text"/> / <input type="text"/> / <input type="text"/> | | | | |
| Motor vehicles | | | | |
| Make and year <input type="text"/> | <input type="checkbox"/> | <input type="checkbox"/> | \$ <input type="text"/> | \$ <input type="text"/> |
| Term of loan <input type="text"/> Date started <input type="text"/> / <input type="text"/> / <input type="text"/> | | | | |
| Make and year <input type="text"/> | <input type="checkbox"/> | <input type="checkbox"/> | \$ <input type="text"/> | \$ <input type="text"/> |
| Term of loan <input type="text"/> Date started <input type="text"/> / <input type="text"/> / <input type="text"/> | | | | |
| Furniture and household items | | | | |
| <input type="text"/> | <input type="checkbox"/> | <input type="checkbox"/> | \$ <input type="text"/> | \$ <input type="text"/> |
| <input type="text"/> | <input type="checkbox"/> | <input type="checkbox"/> | \$ <input type="text"/> | \$ <input type="text"/> |
| Personal items (for example, jewellery) | | | | |
| <input type="text"/> | <input type="checkbox"/> | <input type="checkbox"/> | \$ <input type="text"/> | \$ <input type="text"/> |
| <input type="text"/> | <input type="checkbox"/> | <input type="checkbox"/> | \$ <input type="text"/> | \$ <input type="text"/> |
| Other loans or purchase agreements | | | | |
| Purpose <input type="text"/> | <input type="checkbox"/> | <input type="checkbox"/> | \$ <input type="text"/> | \$ <input type="text"/> |
| Term of loan <input type="text"/> Date started <input type="text"/> / <input type="text"/> / <input type="text"/> | | | | |
| Purpose <input type="text"/> | <input type="checkbox"/> | <input type="checkbox"/> | \$ <input type="text"/> | \$ <input type="text"/> |
| Term of loan <input type="text"/> Date started <input type="text"/> / <input type="text"/> / <input type="text"/> | | | | |
| Credit cards or store accounts | | | | |
| <input type="text"/> | <input type="checkbox"/> | <input type="checkbox"/> | \$ <input type="text"/> | \$ <input type="text"/> |
| <input type="text"/> | <input type="checkbox"/> | <input type="checkbox"/> | \$ <input type="text"/> | \$ <input type="text"/> |
| <input type="text"/> | <input type="checkbox"/> | <input type="checkbox"/> | \$ <input type="text"/> | \$ <input type="text"/> |
| <input type="text"/> | <input type="checkbox"/> | <input type="checkbox"/> | \$ <input type="text"/> | \$ <input type="text"/> |
| Other—include any money owed to you (give details) | | | | |
| <input type="text"/> | <input type="checkbox"/> | <input type="checkbox"/> | \$ <input type="text"/> | \$ <input type="text"/> |
| <input type="text"/> | <input type="checkbox"/> | <input type="checkbox"/> | \$ <input type="text"/> | \$ <input type="text"/> |
| <input type="text"/> | <input type="checkbox"/> | <input type="checkbox"/> | \$ <input type="text"/> | \$ <input type="text"/> |
| Savings and investment accounts | | | | |
| <input type="text"/> | <input type="checkbox"/> | <input type="checkbox"/> | \$ <input type="text"/> | \$ <input type="text"/> |
| <input type="text"/> | <input type="checkbox"/> | <input type="checkbox"/> | \$ <input type="text"/> | \$ <input type="text"/> |
| <input type="text"/> | <input type="checkbox"/> | <input type="checkbox"/> | \$ <input type="text"/> | \$ <input type="text"/> |
| Shares, debentures, bonds, life insurance | | | | |
| <input type="text"/> | <input type="checkbox"/> | <input type="checkbox"/> | \$ <input type="text"/> | \$ <input type="text"/> |
| <input type="text"/> | <input type="checkbox"/> | <input type="checkbox"/> | \$ <input type="text"/> | \$ <input type="text"/> |
| <input type="text"/> | <input type="checkbox"/> | <input type="checkbox"/> | \$ <input type="text"/> | \$ <input type="text"/> |
| Total | | | \$ <input type="text"/> | \$ <input type="text"/> |

Have you signed and dated the declaration on the front page?

