

Court file number

(Name of Court)

Form 15B: Response to Motion to Change

at Court office address

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).

Assignee (if applicable)

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).

PART 1 – GENERAL INFORMATION

My name is (full legal name)

I live in (municipality and province)

and I that the following is true:

- 1. I am the [] applicant [] respondent
2. I am the [] support payor [] support recipient
3. This order/agreement [] has never been assigned [] has been assigned to [] the Ontario Ministry of Community and Social Services [] Ontario Works in (name of location) [] the municipality of (name) [] other (specify)

The details of the assignment are: (give date of assignment, indicate whether it is still in effect and add any other relevant information known to you.)

- 4. [] Since the order/agreement for child support was made, a Notice of Recalculation was issued by the online Child Support Service dated (please attach).
5. [] I agree with the information set out in paragraphs 1 through 10 of the Change Information Form (Form 15A), dated
[] I agree with the information set out in paragraphs 1 through 10 of the Change Information Form (Form 15A), dated EXCEPT as follows: (give details of the information with which you do not agree and attach any documents that support your position.)

- 6. I agree with the claims made by *(name of person bringing motion to change)* _____
in paragraphs _____ of the Motion to Change (Form 15), dated _____
- I disagree with the claims made by *(name of person bringing motion to change)* _____
in paragraphs _____ of the Motion to Change (Form 15), dated _____

- 7. I am asking that the motion to change (except for the parts with which I agree) be dismissed with costs.

CLAIM BY RESPONDING PARTY

(Complete only if you are asking the court to change the existing order or support agreement.)

- 8. I am asking the court to make a change of my own, the details of which are set out below.

CUSTODY/ACCESS

(Complete only if you are asking for a change in a custody or access order.)

- 9. I ask that *(name of party)* _____
have custody of the following child(ren): *(name(s) and birthdate(s) of child(ren))* _____

- 10. I ask that *(name of party)* _____
have access of the following child(ren): *(name(s) and birthdate(s) of child(ren))* _____

as follows: *(give details of access)* _____

OR

- 11. I ask that *(name(s) of party(ies) and/or person(s))* _____
and _____
have joint custody of the following child(ren): *(name(s) and birthdate(s) of child(ren))* _____

- 12. I ask for the following residential/access arrangements for the child(ren): *(include name(s) and birthdate(s) of child(ren))*

- 13. The order I am asking the court to make is in the best interests of the child(ren) for the following reasons: *(give details)*

CHILD SUPPORT

(Complete this section only if you are asking for a change in child support.)

- 14. I am asking to change the child support in the order/agreement because:

- the order/agreement was made before the applicable Child Support Guidelines came into effect.
- the following change in circumstances has taken place: *(give details of change in circumstances.)*

Court file number

the parties agree to the termination of the support order/agreement, dated _____
for the following child(ren): *(name(s) and birthdate(s) of child(ren))* _____

as of *(date)* _____.

Other: *(give details)* _____

15. I ask that the child support be changed as follows:

The order/agreement for child support, dated _____, be terminated for the following child(ren): *(name(s) and birthdate(s) of child(ren))* _____

effective *(date)* _____.

Based on the payor's annual income of \$ _____, *(name of party)* _____ pay child support to *(name of party)* _____ in the amount of \$ _____ per month for the following child(ren): *(name(s) and birthdate(s) of child(ren))* _____

with payments to start on *(date)* _____.

- This amount is the table amount listed in the Child Support Guidelines.
- This amount is more than the table amount listed in the Child Support Guidelines.
- This amount is less than the table amount listed in the Child Support Guidelines. *(If this box is checked, you must complete paragraph 16.)*

Starting on *(date)* _____, *(name of party)* _____ pay to *(name of party)* _____ \$ _____

for the following special or extraordinary expenses:

Child's name	Type of expense	Total Amount of Expense	Payor's Share	Terms of Payment <i>(frequency of payment, date due, etc.)</i>
		\$	\$	
		\$	\$	
		\$	\$	
		\$	\$	
		\$	\$	

Other: *(give details)* _____

16. I am asking that child support be changed to an amount that is less than the table amount listed in the Child Support Guidelines. The reason(s) for my request is/are that:

- The parties agree to a different amount.
 - I have attached a separate sheet to this form that explains why this is an appropriate amount of child support.
 - The recipient is getting social assistance payments from a public agency whose consent to this arrangement is needed. I am attaching the agency's consent to this form.

Court file number

- The parties have shared custody to the child(ren) (*the payor has a child at least 40% of the time*).
 - I have attached a separate sheet to this form that compares the table amounts from the Child Support Guidelines for each of the parties, shows the increased cost of the shared custody arrangement, the financial circumstances of each party and of each child for whom support is claimed.
 - The parties are agreeing to this arrangement and I have attached a separate sheet to this form that explains why this is an appropriate amount of child support.
- Custody of the children is split between the parties. I have attached a separate sheet to this form that calculates the difference between the amount that each party would otherwise pay to the other under the Child Support Guidelines.
- A child is 18 or more years old and I attach to this form a separate sheet that calculates the amount of support for this child.
 - A child contributes to his/her own support and I attach to this form a separate sheet showing the amount of the child's own income and/or assets.
- The payor's annual income is over \$150,000 and I have attached to this form a separate sheet that calculates the amount of support that I want to be put in an order.
- Under the order/agreement, (*name(s) of child(ren)*) _____ is/are the subject of special provisions that I have detailed on a separate sheet that I have attached to this form.
- The payor stands in the place of a parent to (*name(s) of child(ren)*) _____ and I attach to this form a separate sheet that gives the details of another parent's duty to pay support for this/these child(ren), as well as the details of the calculation of the amount of support requested.
- The amount listed in the Child Support Guidelines would cause undue hardship to me or to the child(ren) for whom support is claimed. I attach to this form a separate sheet that compares the standards of living of the parties and calculates the amount of support that should be paid.

17. I ask that the outstanding child support owed be paid as follows:

- The child support owed to (*name of recipient*) _____ be fixed at \$ _____ as of (*date*) _____ and (*name of payor*) _____ pay to (*name of recipient*) _____ \$ _____ per month, with payments to begin on (*date*) _____ until the full amount owing is paid.
- The child support owed to (*name of agency or other person*) _____ be fixed at \$ _____ as of (*date*) _____ and (*name of payor*) _____ pay to (*name of agency or other person*) _____ \$ _____ per month, with payments to begin on (*date*) _____ until the full amount owing is paid.

SPOUSAL SUPPORT

(Complete only if you are asking for a change in spousal support.)

18. I am asking to change the spousal support in the order/agreement because:

- The following change in circumstances has taken place: (*give details of change in circumstances.*)

Court file number

Spousal support should no longer be paid as of (date) _____ for the following reasons: (give details) _____

The parties consent to the termination of the spousal support order/agreement, dated _____, as of (date) _____.

Other (specify) _____

19. I ask that the spousal support be changed as follows:

The order/agreement for spousal support, dated _____, be terminated effective (date) _____.

(Name of party) _____ pay spousal support to (name of party) _____ in the amount of \$ _____ per month, effective on (date) _____.

Other: (give details of the order you want the court to make) _____

20. I ask that the outstanding spousal support owed be paid as follows:

The spousal support owed to (name of recipient) _____ be fixed at \$ _____ as of (date) _____.

(Name of payor) _____ pay to (name of recipient) _____ \$ _____ per month, with payments to begin on (date) _____ until the full amount owing is paid.

The spousal support owed to (name of agency or other person) _____ be fixed at \$ _____ as of (date) _____.

(Name of payor) _____ pay to (name of agency or other person) _____ \$ _____ per month, with payments to begin on (date) _____ until the full amount owing is paid.

OTHER
(Complete if applicable)

21. I ask that the term of the order of Justice (name of judge) _____, dated _____, for (give details) _____

be changed as follows: (give details of the order you want the court to make) _____

Court file number

22. I ask that the court make the order set out in paragraph 21 for the following reasons:

Horizontal lines for text entry.

23. I ask the court to make the following additional order:

Horizontal lines for text entry.

24. I ask the court to make the order set out in paragraph 23 for the following reasons:

Horizontal lines for text entry.

Signature block with fields for date, location, and name of Commissioner for taking affidavits.

PART 2 – INFORMATION FROM SUPPORT PAYOR

DO NOT COMPLETE THIS PART IF THE PARTIES ARE ONLY CONSENTING TO TERMINATE A SUPPORT OBLIGATION OR IF THE MOTION TO CHANGE DOES NOT INCLUDE A CLAIM TO CHANGE CHILD SUPPORT.

My name is (full legal name) _____

I live in (municipality and province) _____

and I swear/affirm that the following is true:

25. I am the support payor in this case.

26. I attach the following financial information about myself:

(a) a copy of every personal income tax return that I filed with Canada Revenue Agency for the 3 most recent taxation years;

(b) a copy of every notice of assessment or re-assessment from Canada Revenue Agency of those returns; and

(c) (applies only if you are an employee) proof of this year's earnings from my employer as required by clause 21(1) (c) of the Child Support Guidelines.

(applies only if you are self-employed, or you are a partner in a partnership or you control a corporation or are a beneficiary under a trust) the documents listed in clauses 21 (1)(d), (e), (f) or (g) of the Child Support Guidelines.

27. My total income

will be \$ _____ for this year;

was \$ _____ for last year; and

was \$ _____ for the year before that.

28. On the basis of my annual income, the table amount from the Child Support Guidelines for (number of children)

_____ child(ren) is \$ _____ per month.

29. My financial statement is attached is not attached

before me at _____
municipality
in _____
province, state or country
on _____
date

Commissioner for taking affidavits
(Type or print name below if signature is illegible.)

Signature
(This form is to be signed in front of a lawyer,
justice of the peace, notary public or
commissioner for taking affidavits.)

PART 3 – INFORMATION FROM SUPPORT RECIPIENT

DO NOT COMPLETE THIS PART IF THE PARTIES ARE ONLY CONSENTING TO TERMINATE A SUPPORT OBLIGATION OR IF THE MOTION TO CHANGE DOES NOT INCLUDE A CLAIM TO CHANGE CHILD SUPPORT

My name is (full legal name) _____

I live in (municipality and province) _____

and I swear/affirm that the following is true:

30. I am the support recipient in this case.

Fill in paragraphs 30 and 31 only if:

- the change for which you are asking is for an amount that is different from the Child Support Guidelines;
• change for which you are asking relates to a child
• over the age of 18 years,
• for whom the payor stands in the place of a parent, or
• with respect to whom the payor has access or physical custody not less than 40% of the time over the course of the year;
• each party has custody of one or more children;
• the payor's annual income as determined under the guidelines is more than \$150,000;
• either party claims that an order according to the guidelines would result in undue hardship; or
• there is a claim for special or extraordinary expenses.

31. I attach the following financial information about myself:

- (a) a copy of every personal income tax return that I filed with Canada Revenue Agency for the 3 most recent taxation years;
(b) a copy of every notice of assessment or re-assessment from Canada Revenue Agency of those returns; and
(c) [] (applies only if you are an employee) proof of this year's earnings from my employer as required by clause 21(1) (c) of the Child Support Guidelines.
[] (applies only if you are self-employed, or you are a partner in a partnership or you control a corporation or are a beneficiary under a trust) the documents listed in clauses 21 (1)(d), (e), (f) or (g) of the Child Support Guidelines.

32. My total income

- [] will be \$ _____ for this year;
[] was \$ _____ for last year; and
[] was \$ _____ for the year before that.

33. My financial statement [] is attached [] is not attached

before me at _____
municipality
in _____
province, state or country
on _____
date
Commissioner for taking affidavits
(Type or print name below if signature is illegible.)

Signature
(This form is to be signed in front of a lawyer, justice of the peace, notary public or commissioner for taking affidavits.)