|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| ONTARIO | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | |  | | | | | Court File Number | | | | | |
| (Name of court) | | | | | | | | | | | | | | | | | | | |  | | | | | Form 26B: Affidavit | | | | | |
| **at** | |  | | | | | | | | | | | | | | | | | |
|  | | Court office address | | | | | | | | | | | | | | | | | |  | dated | | | | | | |  | | |
|  | | | | | | | | | | | | | | | | | | | | | for Filing Domestic Contract with Court | | | | | | | | | |
| Recipient(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). | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | |  | |  | | | | | | | | | | | | | | | | |
|  | |
| Payor | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 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). | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | |  | |  | | | | | | | | | | | | | | | | |
|  | |
| **My name is** (full legal name) | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | |
| **I live in** (municipality & province) | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | |
| **and I that the following is true:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **1.** | I attach a copy of a | | | | | | | |  | marriage contract | | | | | | |  | | cohabitation agreement | | | | | | | | | | | |
|  | | | | | | | |  | | separation agreement | | | | | | |  | | paternity agreement | | | | | | | | | | | |
|  | for filing with the court so that its support provisions can be enforced or changed as if they were a court order. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **2.** | The includes the following provisions relating to child support: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | a) | | (Name of party) | |  | | | | | | | | to pay | | | (name of party) | | | | | | |  | | | | | | | |
|  | | | child support in the monthly amount of $ | | | | | | | |  | | | | for the following children: | | | | | | | | | | | (names and birthdates of children) | | | | |
|  | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | |  | This amount includes the following special expenses: | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | |  | **Type** | | | | | | | | | | | | | | | | | | | | | | | | | **Amount** | |
|  | | |  |  | | | | | | | | | | | | | | | | | | | | | | | | | $ |  |
|  | | |  |  | | | | | | | | | | | | | | | | | | | | | | | | | $ |  |
|  | | |  |  | | | | | | | | | | | | | | | | | | | | | | | | | $ |  |
|  | | |  |  | | | | | | | | | | | | | | | | | | | | | | | | | $ |  |
|  | b) | | Child support is based on the payor’s gross annual income of $ | | | | | | | | | | | | | | |  | | | | | | . The proportionate share of | | | | | | |
|  |  | | special expenses is based on the recipient’s gross annual income of $ | | | | | | | | | | | | | | | | | | |  | | | | | . | | | |

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Form 26B:** | | | | **Affidavit for Filing Domestic Contract  with Court** | | | | **(page 2)** | | | | Court File Number |
|  | | | |  | | | |
|  | | | | | | | | | | | | |
| **3.** | | The has not been set aside or disregarded by a court nor has it been changed by agreement of the parties. | | | | | | | | | | |
| before me at | | | | | |  | | | |  |  |  | | |
|  | | | | | | municipality | | | |  |  |  | | |
| in | |  | | | | | | | |  |  |  | | |
|  | | province, state, or country | | | | | | | |  |  |  | | |
| on | | | |  | | |  |  | |  |  | Signature  (This form is to be signed in front of a lawyer, justice of the peace, notary public or commissioner for taking affidavits.) | | |
|  | | | | date | | |  | Commissioner for taking affidavits (Type or print name below if signature is illegible.) | |  |  |