

Restructuring Worksheet

Interviewed by: _____ Referred by: _____

Date Interviewed: _____ Date Signing: _____

Last name		All given names		M / F
Are you known by any other names?				
Address		City		When moved there
		Province		Postal Code
Mailing address (if different from above)				
Telephone numbers		Cell:		E-Mail Address:
Residence:		Business:		
Emergency contact (name & number)			Previous address (if at current address less than one year)	
SIN			Date of birth (mm/dd/yy)	
Marital status – (Specify month & year of event)				
Married <input type="checkbox"/>		Widowed <input type="checkbox"/>		Divorced <input type="checkbox"/>
Single <input type="checkbox"/>		Separated <input type="checkbox"/>		Common-law <input type="checkbox"/>

Occupation	Current employer	Since when
Address of employer		If unemployed, since when

Full legal name of spouse	M / F	Spouse's address (if different than above)
Spouse's SIN		Spouse's birth date (yy/mm/dd)
Spouse's employer		Since when
Spouse's occupation		If unemployed, since when
Spouse's business phone:		Spouse's cell phone:

Dependents (all those who rely on you for financial support)				
Full names	Relationship	Date of birth	Address	Income

If over 18, why dependent?

Monthly income and expense statement of the debtor and the family unit

Monthly income - # of people in family _____	Debtor	Spouse	Total
Net employment income (take home).....	_____	_____	_____
Pension/Annuities.....	_____	_____	_____
Child support.....	_____	_____	_____
Spousal support.....	_____	_____	_____
Child tax benefit.....	_____	_____	_____
Employment insurance benefits.....	_____	_____	_____
Social assistance.....	_____	_____	_____
Self-Employment income: Gross _____ Net _____	_____	_____	_____
Other net income (provide details):	_____	_____	_____
Net monthly income.....	(1)	(2)	

Net monthly income of the family unit((1)+(2))..... **(3)**

Monthly non-discretionary expenses: family unit

Child support payments/alimony.....	_____	_____	_____
Child care.....	_____	_____	_____
Prescriptions.....	_____	_____	_____
Fines/penalties imposed by the court.....	_____	_____	_____
Other.....	_____	_____	_____
Totals:	_____	_____	_____

Surplus income

Monthly discretionary expenses: family unit

Housing expenses		Living expenses	
Rent/mortgage.....	_____	Food/grocery.....	_____
Property taxes/condo fees.....	_____	Laundry/dry cleaning/grooming.....	_____
Heating/gas/oil.....	_____	Clothing.....	_____
Telephone.....	_____	Transportation	
Cable.....	_____	Car leases/payments.....	_____
Power/water.....	_____	Repairs/maintenance/gas.....	_____
Other.....	_____	Public transportation.....	_____
Personal Expenses		Insurance expenses	
Smoking.....	_____	Vehicle.....	_____
Entertainment/sports/dining.....	_____	House.....	_____
Gifts/charitable donations.....	_____	Furniture/contents.....	_____
Allowances.....	_____	Life insurance.....	_____
Other.....	_____		
Non-Recoverable medical expenses		Payments	
Dental.....	_____	To the estate (to be completed by the Trustee).....	_____
Other.....	_____	To secured creditors.....	_____

Total monthly discretionary expenses (family unit)..... **(10)**

Assets

	Description/Location (Serial #, License #, Account #)	Estimated Value	Exempt (Y/N)	Secured (Y/N)
Cash on hand/in bank				
Stocks, Bonds, Investments				
RRSP's, RRIF's, GIC's, RESP's				
Pension Plans				
Cash Surrender value of insurance policies				
Household furnishings/personal effects				
Real Estate (in Canada or elsewhere)				
House				
Land / Cottage / Time Share				
Rental/Business Properties				
Motorized Vehicles (Year, Make and Model)				
Cars				
Truck(s)/Van(s)				
Recreational Vehicle(s)				
Mobile Home				
Tools of Trade				
Other assets of value				
Farming assets (Use separate page)				

For which year was your last tax return filed?	Refund received	\$
	Amount owing	\$
	Refund to come	\$

All employers for the last year			
Employer's name	Address	Date started	Date ended

If you have borrowed money or pledged any of these assets as security, show details below		
Creditor's name & address	Asset pledged	Amount of loan

List all debts, including all mortgages, vehicles, leases and family debts.

Complete Names of all creditors	Complete address of all creditors including postal codes	Who's Debt?	Business Debt? Y/N	Account Number	Amount Owning (\$)	Office use only

If you have co-signed a loan or contract for anyone else, show details below				
Lender's name	Address	Amount	Borrower's name	Address