Financial statement

- For a financial order under the Matrimonial Causes Act 1973/Civil Partnership Act 2004
- For financial relief after an overseas divorce etc under Part 3 of the Matrimonial and Family Proceedings Act 1984/Schedule 7 to the Civil Partnership Act 2004

of

{ MERGEFIELD LINKNAME_FORENAME_1 } { MERGEFIELD LINKNAME SURNAME 1 }

{ IF { MERGEFIELD FW_FR_CLIDET_FW_CLI_T YPE } = "Applicant" "{ MERGEFIELD LINKNAME_FORENAME_1 } { MERGEFIELD LINKNAME_SURNAME_1 }" "{ MERGEFIELD FW_FR_OS_FW_OS1_FOR ENAME } { MERGEFIELD FW_FR_OS_FW_OS1_SUR NAME }" }

Who is the

and

Applicant in this matter

To be completed by the relevant party Name of court Case No. { MERGEFIELD { MERGEFIELD FW FR PROF FW COURT name } FW FR PROF FW CASE NO } Name of Applicant { IF { MERGEFIELD FW FR CLIDET FW CLI TYPE } = "Applicant" "{ MERGEFIELD LINKNAME_FORENAME_1 } { MERGEFIELD LINKNAME SURNAME 1 }" "{ MERGEFIELD FW_FR_OS_FW_OS1_FORENAME } { MERGEFIELD FW FR OS FW OS1 SURNAME }" } Name of Respondent { IF { MERGEFIELD FW_FR_CLIDET_FW_CLI_TYPE } = "Respondent" "{ MERGEFIELD LINKNAME_FORENAME_1 } { MERGEFIELD LINKNAME_SURNAME_1 }" "{ MERGEFIELD FW_FR_OS_FW_OS1_FORENAME } { MERGEFIELD FW_FR_OS_FW_OS1_SURNAME }" } (please tick appropriate boxes)

Civil partner Spouse Dated FOFO **FOFO** FOFOFOFO $R \mid R$ R R R | R | R | RMTMT MTMT MTMTMTMT EXEX EXEX EXEXEXEX T } T } $T \mid T$ The parties are

> { IF { MERGEFIELD FW_FR_CLIDET_FW_CLI_TYPE } = "Respondent" "{ MERGEFIELD LINKNAME_FORENAME_1 } { MERGEFIELD LINKNAME_SURNAME_1 }" "{ MERGEFIELD FW_FR_OS_FW_OS1_FORENAME } { MERGEFIELD FW_FR_OS_FW_OS1_SURNAME }" }

Respondent in this matter

relief application

This form should only be completed in applications for a financial order (which can only be applied for as part of a divorce, dissolution, annulment or (judicial) separation in the High Court or county courts in

England and Wales) or for applications for financial relief after an overseas divorce/dissolution etc. If the application is for any other financial remedy in the county court please complete Form E1. If the application is for a financial remedy in the magistrates' court please complete Form E2.

Please fill in this form fully and accurately. Where any box is not applicable, write 'N/A'.

You have a duty to the court to give a full, frank and clear disclosure of all your financial and other relevant circumstances.

A failure to give full and accurate disclosure may result in any order the court makes being set aside.

If you are found to have been deliberately untruthful, criminal proceedings may be brought against you for fraud under the Fraud Act 2006.

The information given in this form must be confirmed by a statement of truth. Proceedings for contempt of court may be brought against a person who makes or causes to be made, a false statement in a document verified by a statement of truth.

You must attach documents to the form where they are specifically sought and you may attach other documents where it is necessary to explain or clarify any of the information that you give.

Essential documents that must accompany this statement are detailed in the form.

If there is not enough room on the form for any particular piece of information, you may continue on an attached sheet of paper.

If you are in doubt about how to complete any part of this form you should seek legal advice.

This statement is filed by

Solicitor's fee account no.	{ FORMTEXT }
-----------------------------	--------------

{ MERGEFIELD CALCULATION_FEE_EARNER_DESCRIPTION }
 { MERGEFIELD PRACTICEINFO_PRACTICE_NAME }
 { MERGEFIELD PRACTICEINFO_HOUSE \f", "}{ MERGEFIELD
 PRACTICEINFO_AREA \f", "}{ MERGEFIELD
 PRACTICEINFO_POSTAL_TOWN \f", "}{ MERGEFIELD
 PRACTICEINFO_COUNTY \f" "}{ MERGEFIELD
 PRACTICEINFO_POSTCODE }

Name and address of solicitor

1 General Information

1.1 Full name	{ MERGEFIELD LINKNAME_FORENAME_1 } { MERGEFIELD LINKNAME_SURNAME_1 }						
1.2 Date of birth	Date Month Year { MERGEFIELD FW_FR_CLIDET_FW_CLI1_C	.D Marriage/ { MERGEFIELD					
1.4 Occupatio	{ MERGEFIELD FW_FR_CLID	DET_FW_CLI1_OCC }					
n 1.5 Date of the separation	Date Month Yea	r Tick here if not applicabl	e { FORMCHECKBOX }				
1.6 Date of the	Petition for divorce/ dissolution/nullity/ (judicial) separation	Decree nisi/ conditional order/ (judicial) separation order	Decree absolute/ final order (if applicable)				
	Date Month Year { MERGEFIELD FW_FR_FORME_FW_PETI TIONDATE }	Date Month Year { MERGEFIELD FW_FR_FORME_FW_DATE _DN_PRO }	Date Month Year { MERGEFIELD FW_FR_FORME_FW_DAT				
1.7 If you have subseq uently marrie	Date Month Year { { { FORM FORM FORM TEXT TEXT } } }	1.8 Are you living w new partner? 1.9 Do you intend to	FORMCHECKBOX } No { FORMCHECKBOX }				
d or formed a civil partner ship, or will do so, state the date		with a new partner with next six months?	nin the Yes { FORMCHECKBOX } No { FORMCHECKBOX }				
1.10 Details of any	Full names	Date of birth Date Month Year	With whom does the child live?				
childre n of the family	{ FORMTEXT }	{ FORMT FORMT FORMT EXT} EXT} EXT}	{ FORMTEXT }				
 /	{ FORMTEXT }	FORMT FORMT FORMT EXT }	{ FORMTEXT }				

Full names		Ι	Date of birth	With whom does	
	i uli fiames	Date	Month	Year	the child live?
	{ FORMTEXT }	FORMT EXT }	{ FORMT EXT }	FORMT EXT }	{FORMTEXT}
	{ FORMTEXT }	FORMT EXT }	FORMT EXT }	FORMT EXT }	{FORMTEXT}
	{ FORMTEXT }	FORMT EXT }	FORMT EXT }	FORMT EXT }	{FORMTEXT}
	{ FORMTEXT }	FORMT EXT }	{ FORMT EXT }	FORMT EXT }	{FORMTEXT}
	{ FORMTEXT }	FORMT EXT }	FORMT EXT }	FORMT EXT }	{ FORMTEXT }

	{	{	{	
{ FORMTEXT }	FORMT	FORMT	FORMT	{ FORMTEXT }
	EXT }	EXT }	EXT }	

1.11 Details of the state of health of yoursel f and the childre n if you think this should be taken into accoun

t

Children
{ FORMTEXT }
_

1.12 Details of the present and proposed future educational arrangements for the children.					
Present arrangemer	nts	F	uture arrangements		
{ FORMTEXT }		{FORMTEXT}			
1.13 Details of any child support maintenance calculation or any maintenance order or agreement made in respect of any children of the family. If no calculation, order or agreement has been made, give an estimate of the liability of the non-resident parent in respect of the children of the family under the Child Support Act 1991.					
{ FORMTEXT }					
to be varied and the changes	1.14 If this application is to vary an order attach a copy of the order and give details of the order that is to be varied and the changes sought. You may need to continue on a separate sheet.				
{ FORMTEXT }					
1.15 Give details of any other Courto money, property, children o		ou and your husba	nd/wife, whether in relation		
Case No.	Co	urt	Type of proceedings		
{ FORMTEXT }	{ FORMTEXT }		{ FORMTEXT }		
{ FORMTEXT }	{ FORMTEXT }		{ FORMTEXT }		

٠	1.16 specify the present residence and the occupants of it and on what terms you occupy it							
	{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT }					
	{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT }					
		,	,					

(e.g. tenant, owner-occu	ıpier)	
Address	Occupants	Terms of occupation
{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT }

Part 1 Real Property (land and buildings) and Personal Assets

2.1 Complete this section in respect of the family home (the last family home occupied by you and your spouse/civil partner) if it remains unsold.

Documentation required for attachment to this section:

- a) A copy of any valuation of the property obtained within the last six months. If you cannot provide this document, please give your own realistic estimate of the current market value
- b) A recent mortgage statement confirming the sum outstanding on each mortgage

Property name and address	{ FORMTEXT }	
Land Registry title number	{ FORMTEXT }	
Mortgage company name(s) and address(es) and account numbers	{ FORMTEXT }	
Type of mortgage	{ FORMTEXT }	
Details of who owns the property and the extent of your legal and beneficial interest in it (i.e. state if it is owned by you solely or jointly owned with your spouse/civil partner or with others)	{ FORMTEXT }	
If you consider that the legal ownership as recorded at the Land Registry does not reflect the true position, state why	{ FORMTEXT }	
Current market value of the property	{ FORMTEXT }	
Balance outstanding on any mortgage(s)	{ FORMTEXT }	
If a sale at this stage would result in penalties payable under the mortgage, state amount	{ FORMTEXT }	
Estimate the costs of the sale of the property	{ FORMTEXT }	
Total equity in the property (i.e. market value less outstanding mortgage(s) penalties if any and the costs of a sale)	{ FORMTEXT }	
TOTAL value of yo	our interest in the family home: Total A	£{ FORMTEXT }

2.2 Details of your interest in any other property, land or buildings. Complete one page for each property you have an interest in.

Documentation required for attachment to this section:

- a) A copy of any valuation of the property obtained within the last six months. If you cannot provide this document, please give your own realistic estimate of the current market value
- b) A recent mortgage statement confirming the sum outstanding on each mortgage

Property name and address	{ FORMTEXT }	
Land Registry title number	{ FORMTEXT }	
Mortgage company name(s) and address(es) and account numbers	{ FORMTEXT }	
Type of mortgage	{ FORMTEXT }	
Details of who owns the property and the extent of your legal and beneficial interest in it (i.e. state if it is owned by you solely or jointly owned with your spouse/civil partner or with others)	{ FORMTEXT }	
If you consider that the legal ownership as recorded at the Land Registry does not reflect the true position, state why	{ FORMTEXT }	
Current market value of the property	{ FORMTEXT }	
Balance outstanding on any mortgage(s)	{ FORMTEXT }	
If a sale at this stage would result in penalties payable under the mortgage, state amount	{ FORMTEXT }	
Estimate the costs of the sale of the property	{ FORMTEXT }	
Total equity in the property (i.e. market value less outstanding mortgage(s) penalties if any and the costs of a sale)	{ FORMTEXT }	
Total value of your interest in this property	{ FORMTEXT }	
TOTAL value of your	interest in ALL other property: Total B	£{ FORMTEXT }

2.3 Details of all personal bank, building society and National Savings Accounts that you hold or have held at any time in the last twelve months and which are or were either in your own name or in which you have or have had any interest. This applies whether any such account is in credit or in debit. For joint accounts give your interest and the name of the other account holder. If the account is overdrawn, show a minus figure.

Documentation required for attachment to this section:

For each account listed, all statements covering the last 12 months.

Name of bank or building society including branch name	Type of account (e.g. Current)	Account number	Name of other account holder (if applicable)	Balance at the date of this statement	Total current value of your interest
{ FORMTEXT }	{ FORMTEXT	{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT	{ FORMTEXT }
{ FORMTEXT }	{ FORMTEXT	{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT	{ FORMTEXT }
{ FORMTEXT }	{ FORMTEXT	{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT	{ FORMTEXT }
{ FORMTEXT }	{ FORMTEXT	{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT	{ FORMTEXT }
{ FORMTEXT }	{ FORMTEXT	{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT	{ FORMTEXT }
{ FORMTEXT }	{ FORMTEXT	{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT	{ FORMTEXT }
TOTAL value of your interest in ALL accounts (C1)					£{ FORMTEXT }

2.4 Details of all investments, including shares, PEPs, ISAs, TESSAs, National Savings Investments (other than already shown above), bonds, stocks, unit trusts, investment trusts, gilts and other quoted securities that you hold or have an interest in. (Do not include dividend income as this will be dealt with separately later on.)

Documentation required for attachment to this section:

Latest statement or dividend counterfoil relating to each investment.

Name	Type of investment	Size of holding	Current value	Name of other account holder (if applicable)	Total current value of your interest
{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT	{ FORMTEXT	{ FORMTEXT	{ FORMTEXT }
{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT	{ FORMTEXT	{ FORMTEXT	{ FORMTEXT }
{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT	{ FORMTEXT	{ FORMTEXT	{ FORMTEXT }
{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT	{ FORMTEXT	{ FORMTEXT	{ FORMTEXT }
{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT	{ FORMTEXT	{ FORMTEXT	{ FORMTEXT }
					£1

TOTAL value of your interest in ALL holdings (C2) FORMTEXT }

2.5 Details of all life insurance policies including endowment policies that you hold or have an interest in, including those that do not have a surrender value. Complete one page for each policy.

Documentation required for attachment to this section.

A surrender valuation of each policy that has a surrender value

Name of company { FORMTEXT } Policy type { FORMTEXT } Policy number { FORMTEXT } If policy is assigned, state in whose favour and { FORMTEXT } amount of charge Name any other owner and the extent of your { FORMTEXT } interest in the policy Date Month Year Maturity date (if applicable) { FORMTEXT } { FORMTEXT } { FORMTEXT } Current surrender value (if applicable) { FORMTEXT } If policy includes life insurance, the amount of the insurance and the name of the person { FORMTEXT } whose life is insured Total current surrender value of your interest in { FORMTEXT } this policy TOTAL value of your interest in ALL other policies: (C3) £{ FORMTEXT }

2.6 Details of all monies that are OWED TO YOU. Do not include sums owed in director's or partnership

2.6 Details of all monies that are OWED TO YOU. Do not include sums owed in director's or partnership accounts which should be included at section 2.11

Brief description of money owed and by whom	Balance outstanding	Total current value of your interest
{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT }
{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT }
{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT }
{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT }
{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT }
{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT }
TOTAL value of your interest in ALL debts owed to you: (C4)		£{ FORMTEXT }

2.7 Details of all cash sums held in excess of £500. You must state where it is held and the currency it is held in.

Where held	Amount	Currency	Total current value of your interest
{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT }
{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT }
{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT }
{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT }
{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT }
{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT }
TOTAL value of your interest in ALL cash sums: (C5)			£{ FORMTEXT }

2.8 Details of personal belongings individually worth more than £500

INCLUDE

- Cars (gross value)Collections, pictures and jewellery
- Furniture and house contents

Brief description of item	Total current value of your interest
{ FORMTEXT }	{ FORMTEXT }
{ FORMTEXT }	{ FORMTEXT }
{ FORMTEXT }	{ FORMTEXT }
{ FORMTEXT }	{ FORMTEXT }
{ FORMTEXT }	{ FORMTEXT }
{ FORMTEXT }	{ FORMTEXT }
TOTAL value of your interest in ALL personal belongings: (C6)	£{ FORMTEXT }
Add together all the figures in boxes C1 to C6 to give the TOTAL current value of your interest in personal assets: TOTAL C	£{ FORMTEXT }

2 Financial Details Part 2. Capital: Liabilities and Capital Gains Tax

2.9 Details of any liabilities you have.

EXCLUDE liabilities already shown such as:

- Mortgages
- · Any overdrawn bank, building society or National Savings accounts

INCLUDE:

- Money owed on credit cards and store cards
- Bank loans
- Hire purchase agreements

List all credit and store cards held including those with a nil or positive balance. Where the liability is not solely your own, give the name(s) of the other account holder(s) and the amount of your share of the liability.

Liability	Name(s) of other account holder(s) (if applicable)	Total liability	Total current value of your interest in the liability
{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT }
{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT }
{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT }
{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT }
{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT }
{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT }
TOTAL value of your interest in ALL liabilities: (D1)			£{ FORMTEXT }

2.10 If any Capital Gains Tax would be payable on the disposal now of any of your real property or personal assets, give your estimate of the tax liability.

Asset	Total Capital Gains Tax liability
{ FORMTEXT }	{ FORMTEXT }
{ FORMTEXT }	{ FORMTEXT }
{ FORMTEXT }	{ FORMTEXT }
{ FORMTEXT }	{ FORMTEXT }
{ FORMTEXT }	{ FORMTEXT }
{ FORMTEXT }	{ FORMTEXT }
TOTAL value of ALL your potential Capital Gains Tax liabilities: (D2)	£{ FORMTEXT }
Add together D1 and D2 to give the TOTAL value of your liabilities: TOTAL D	£{ FORMTEXT }

2 Financial Details Part 3 Capital: Business assets and directorships

2.11 Details of all your business interests. Complete one page for each business you have an interest in.

Documentation required for attachment to this section:

- a) Copies of the business accounts for the last two financial years
- b) Any documentation, if available at this stage, upon which you have based your estimate of the current value of your interest in this business, for example a letter from an accountant or a formal valuation. It is not essential to obtain a formal valuation at this stage

{ FORMTEXT }
{ FORMTEXT }
{ FORMCHECKBOX } Sole trader { FORMCHECKBOX } Partner in a partnership with others { FORMCHECKBOX } Shareholder in a limited company
{ FORMTEXT }
{ FORMTEXT }
{FORMTEXT}
{FORMTEXT}
{ FORMTEXT }
{ FORMTEXT }
{ FORMTEXT }

TOTAL value of ALL your interests in business assets: TOTAL E | £{ FORMTEXT }

.12 List any directorships you hold or have held in the last 12 months (other than those already disclosed in Section 2.11). { FORMTEXT }

Part 4 Capital: Pensions and Pension Protection Fund (PPF) Compensation

2.13 Give details of all your pension rights and all PPF compensation entitlements, including prospective entitlements. Complete a separate page for each pension or PPF compensation entitlement.

EXCLUDE:

Basic State Pension

INCLUDE (complete a separate page for each one):

- Additional State Pension (SERPS and State Second Pension (S2P))
- Free Standing Additional Voluntary Contribution Schemes (FSAVC) separate from the scheme of your employer
- Membership of ALL pension plans or schemes
- PPF compensation entitlement for each scheme you were a member of which has transferred to PPF

Documentation required for attachment to this section:

- a) A recent statement showing the cash equivalent (CE) provided by the trustees or managers of each pension arrangement; for the additional state pension, a valuation of these rights or for PPF a valuation of PPF compensation entitlement
- b) If any valuation is not available, give the estimated date when it will be available and attach a copy of your letter to the pension company, administrators, or PPF Board from whom the information was sought and/or state the date on which an application for a valuation of an Additional State Pension was submitted to the Department of Work and Pensions

Name and address of pension arrangement or PPF Board	{ FORMTEXT }		
Your National Insurance Number	{ FORMTEXT }		
Number of pension arrangement or reference number or PPF compensation reference number	{ FORMTEXT }		
Type of scheme e.g. occupational or personal, final salary, money purchase, additional state pension, PPF or other (if other, please give details)	{ FORMTEXT }		
Date the CE, PPF compensation or additional state pension was calculated	Date { FORMTEXT }	Month { FORMTEXT }	Year { FORMTEXT }
Is the pension in payment or drawdown? (Please answer Yes or No)	Yes { FORMCHECKBOX } No { FORMCHECKBOX }		
State the CE quotation, the additional state pension valuation or PPF valuation of those rights	{ FORMTEXT }		
If the arrangement is an occupational pension arrangement that is paying reduced CEs, please quote what the CE would have been if not reduced. If this is not possible, please indicate if the CE quoted is a reduced CE	{FORMTEXT}		
Is the PPF compensation capped? (Please answer Yes or No)	Yes { FORMCHEC	KBOX } No { FOR	MCHECKBOX }

TOTAL value of ALL your pension assets: TOTAL F

£{ FORMTEXT }

Part 5 Capital: Other assets

2.14 Give details of any other assets not listed in Parts 1 to 4 above.

INCLUDE (the following list is not exhaustive):

- Any personal or business assets not yet disclosed
- Unrealisable assets
- Share option schemes, stating the estimated net sale proceeds of the shares if the options were capable of exercise now, and whether Capital Gains Tax or income tax would be payable
- Business expansion schemes
- Futures
- Commodities
- Trust interests (including interests under a discretionary trust), stating your estimate of the value of the interest and when it is likely to become realisable. If you say it will never be realisable, or has no value, give your reasons
- Any asset that is likely to be received in the foreseeable future
- Any asset held on your behalf by a third party
- · Any asset not disclosed elsewhere on this form even if held outside England and Wales

You are reminded of your obligation to disclose all your financial assets and interests of ANY nature.

Type of asset	Value	Total NET value of your interest
{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT }
{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT }
{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT }
{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT }
{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT }
{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT }
{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT }
{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT }
{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT }
{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT }
{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT }
{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT }
{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT }
TOTAL value of ALL your o	CL EODMIEAL)	

TOTAL value of ALL your other assets: TOTAL G | £{ FORMTEXT }

Part 6 Income: Earned income from employment

£{ FORMTEXT }

2.15 Details of earned income from employment. Complete one page for each employment.

Documentation required for attachment to this section:

- a) P60 for the last financial year (you should have received this from your employer shortly after the last 5th April)
- b) Your last three payslips
- c) Your last Form P11D if you have been issued with one

Name and address of your employer	{ FORMTEXT }	
Job title and brief details of the type of work you do	{ FORMTEXT }	
Hours worked per week in this employment	{ FORMTEXT }	
How long have you been with this employer?	{ FORMTEXT }	
Explain the basis of your income i.e. state whether it is based on an annual salary or an hourly rate of pay and whether it includes commissions or bonuses	{ FORMTEXT }	
Gross income for the last financial year as shown on your P60	{ FORMTEXT }	
Net income for the last financial year i.e. gross income less income tax and national insurance	{ FORMTEXT }	
Average net income for the last three months i.e. total income less income tax and national insurance divided by three	{ FORMTEXT }	
Briefly explain any other entries on the attached payslips other than basic income, income tax and national insurance	{ FORMTEXT }	
If the payslips attached for the last three months are not an accurate reflection of your normal income briefly explain why	{ FORMTEXT }	
Details and value of any bonuses or other occasional payments that you receive from this employment not otherwise already shown, including the basis upon which they are paid	{ FORMTEXT }	
Details and value of any benefits in kind, perks or other remuneration received from this employer in the last year (e.g. provision of a car, payment of travel, accommodation, meal expenses, etc.)	{ FORMTEXT }	
Your estimate of your net income from this employment for the next 12 months. If this differs significantly from your current income explain why in box 4.1.2	{ FORMTEXT }	
Estimated TOTAL of ALL	net earned income from	C(EODMIEVI)

employment for the next 12 months: TOTAL H

Part 7 Income: Income from self-employment or partnership

£{ FORMTEXT }

2.16 You will have already given details of your business and provided the last two years accounts at section 2.11. Complete this section giving details of your income from your business. Complete one page for each business.

Documentation required for attachment to this section:

- a) A copy of your last tax assessment or, if that is not available, a letter from your accountant confirming your tax liability
- b) If net income from the last financial year and estimated net income for the next 12 months is significantly different, a copy of management accounts for the period since your last account

Name of the business	{ FORMTEXT }	
Date to which your last accounts were completed	{ FORMTEXT }	
Your share of gross business profit from the last completed accounts	{ FORMTEXT }	
Income tax and national insurance payable on your share of gross business profit above	{ FORMTEXT }	
Net income for that year (using the two figures directly above, gross business profit less income tax and national insurance payable)	{ FORMTEXT }	
Details and value of any benefits in kind, perks or other remuneration received from this business in the last year e.g. provision of a car, payment of travel, accommodation, meal expenses, etc.	{ FORMTEXT }	
Amount of any regular monthly or other drawings that you take from this business	{ FORMTEXT }	
If the estimated figure directly below is different from the net income as at the end date of the last completed accounts, briefly explain the reason(s)	{FORMTEXT}	
Your estimate of your net annual income for the next 12 months	{ FORMTEXT }	
Estimated TO	OTAL of ALL net income from	04 = 0 = 0 4 = = 0 / = 0

self-employment or partnership for the next 12 months: TOTAL I

2 Financial Details Part 8 Income: Income from investments e.g. dividends, interest or rental income

2.17 Details of income received in the last financial year (the year ended last 5th April), and your estimate of your income for the current financial year. Indicate whether the income was paid gross or net of income tax. You are not required to calculate any tax payable that may arise.

Nature of income and the asset from which it derived	Paid gross or net	Income received in the last financial year	Estimated income for the next 12 months
{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT }
{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT }
{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT }
{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT }
{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT }
{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT }
{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT }
{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT }
{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT }
{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT }
{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT }
{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT }
{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT }
Estimated TOTAL investment income for the next 12 months: TOTAL J			£{ FORMTEXT }

Part 9 Income: Income from state benefits (including state pension and child benefit)

2.18 Details of all state benefits that you are currently receiving.

Name of benefit	Amount paid	Frequency of payment	Estimated income for the next 12 months
{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT }
{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT }
{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT }
{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT }
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{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT }
{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT }
Estimated TOTAL banefit income for the next 12 months: TOTAL K			C(EODMIEVI)

Part 10 Income: Any other income

2.19 Details of any other income not disclosed above.

INCLUDE:

Any source including a Pension (excluding State Pension), and Pension Protection Fund (PPF) compensation

- from which income has been received during the last 12 months (even if it has now ceased)
- from which income is likely to be received during the next 12 months

You are reminded of your obligation to give full disclosure of your financial circumstances

Paid gross or net	Income received in the last financial year	Estimated income for the next 12 months
{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT }
{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT }
{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT }
{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT }
{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT }
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{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT }
{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT }
{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT }
{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT }
{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT }
	{FORMTEXT}	Faid gross or net the last financial year {FORMTEXT} {FORMTEXT} {FORMTEXT}

Estimated TOTAL other income for the next 12 months: TOTAL L | £{ FORMTEXT }

2 Financial Details Summaries

2.20 Summary of your capital (Parts 1 to 5).

Description	Reference of the section on this statement	Value
Current value of your interest in the family home	А	{ FORMTEXT }
Current value of your interest in all other property	В	{ FORMTEXT }
Current value of your interest in personal assets	С	{ FORMTEXT }
Current value of your liabilities	D	{ FORMTEXT }
Current value of your interest in business assets	E	{ FORMTEXT }
Current value of your pension assets	F	{ FORMTEXT }
Current value of all your other assets		{ FORMTEXT }
Total value of your assets (Totals A+B+C+E+F+G)		£{ FORMTEXT }
D		{ FORMTEXT }
Value of your assets LESS the value of your liabilities (Totals A	£{ FORMTEXT }	

2.21 Summary of your estimated income for the next 12 months (Parts 6 to 10)

Description	Reference of the section on this statement	Value
Estimated net total of income from employment	Н	{ FORMTEXT }
Estimated net total of income from self-employment or partnership	I	{ FORMTEXT }
Estimated net total of investment income	J	{ FORMTEXT }
Estimated state benefit receipts	К	{ FORMTEXT }
Estimated net total of all other income		{ FORMTEXT }
Estimated TOTAL income for the next 12 months (Totals H to L):		£{ FORMTEXT }

3 Financial Requirements Part 1 Income needs

3.1 Income needs for yourself and for any children living with you or provided for by you. ALL figures should be annual, monthly or weekly (state which). You *must not* use a combination of these periods. State your current income needs and, if these are likely to change in the near future, explain the anticipated change and give an estimate of the future cost.

The income needs below are: (delete those not applicable)	Weekly	Monthly	Annual
I anticipate my income needs are going t { FORMTEXT }	o change because:		

3.1.1 Income needs for yourself.

INCLUDE:

- All income needs for yourself
- Income needs for any children living with you or provided for by you only if these form part of your total income needs (e.g. housing, fuel, car expenses, holidays, etc)

Item	Current cost	Estimated future cost
{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT }
{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT }
{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT }
{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT }
{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT }
{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT }
SUB-TOTAL your income needs:		£{ FORMTEXT }

3.1.2 Income needs for children living with you or provided for by you.

INCLUDE:

• Only those income needs that are different to those of your household shown above

Item	Current cost	Estimated future cost
{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT }
{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT }
{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT }
{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT }
{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT }
{ FORMTEXT }	{ FORMTEXT }	{ FORMTEXT }
SUB-TOTAL children's income needs:		£{ FORMTEXT }

TOTAL of ALL income needs: \£{ FORMTEXT }

3 Financial Requirements Part 2. Capital needs

- 3.2 Set out below the reasonable future capital needs for yourself and for any children living with you or provided for by you.
- 3.2.1 Capital needs for yourself.

INCLUDE:

- All capital needs for yourself
- Capital needs for any children living with you or provided for by you only if these form part of your total capital needs (e.g. housing, car, etc.)

Item	Cost
{ FORMTEXT }	{ FORMTEXT
{ FORMTEXT }	{ FORMTEXT }
SUB-	TOTAL your capital needs: £{ FORMTEXT }

3.2.2 Capital needs for children living with you or provided for by you.

INCLUDE:

• Only those capital needs that are different to those of your household shown above

Item	Cost
{ FORMTEXT }	{ FORMTEXT
{ FORMTEXT }	{FORMTEXT
SUB-TOTAL your children's capital needs:	£{ FORMTEXT
TOTAL of ALL capital needs:	£{ FORMTEXT }

4 Other Information

4.1 Details of any significant changes in your assets or income.

At both sections 4.1.1 and 4.1.2, INCLUDE:

- ALL assets held both within and outside England and Wales
- The disposal of any asset

4.1.1 Significant changes in assets or income during the LAST 12 months.
{FORMTEXT}
4.1.2 Significant changes in assets or income likely to occur during the NEXT 12 months.
{ FORMTEXT }
4.2 Brief details of the standard of living enjoyed by you and your spouse/civil partner during the marriage/civil partnership.
{FORMTEXT}

4.3 Are there any particular contributions to the family property and assets or outgoings, or to family life, or the welfare of the family that have been made by you, your partner or anyone else that you think should be taken into account? If there are any such items, briefly describe the contribution and state the amount, when it was made and by whom.
INCLUDE: • Contributions already made • Contributions that will be made in the foreseeable future
{FORMTEXT}
4.4 Bad behaviour or conduct by the other party will only be taken into account in very exceptional circumstances when deciding how assets should be shared after divorce/dissolution. If you feel it should be taken into account in your case, identify the nature of the behaviour or conduct below.
{ FORMTEXT }
4.5 Give details of any other circumstances that you consider could significantly affect the extent of the financial provision to be made by or for you or any child of the family.
INCLUDE (the following list is not exhaustive): • Earning capacity • Disability • Inheritance prospects
 Redundancy Retirement Any agreement made between you and your spouse/civil partner before or after your marriage/civil partnership stating whether or not you rely upon the agreement giving your reasons Any plans to marry, form a civil partnership or live with a new partner Any contingent liabilities
{ FORMTEXT }

4.6 If you have subsequently married or formed a civil partnership (or intend to) or are living with another person (or intend to), give brief details, so far as they are known to you, of his or her income, assets and liabilities.

Annual Income		Assets and Liabilities	
Nature of income	Value (if known, state whether gross or net)	ltem	Value (if known)
{FORMTEXT}	{FORMTEXT}	{FORMTEXT}	{FORMTEXT}
Total income:	£{ FORMTEXT }	Total assets/liabilities:	£{ FORMTEXT }

5 Order Sought

5.1 If you are able at this stage, specify what kind of orders you are asking the court to make.Even if you cannot be specific at this stage, if you are able to do so, indicate:a) If the family home is still owned, whether you are asking for it to be transferred to yourself or your spouse/civil partner or whether you are saying it should be sold
{ FORMTEXT }
b) Whether you consider this is a case for continuing spousal maintenance/maintenance for your civil partner or whether you see the case as being appropriate for a 'clean break' (A 'clean break' means a settlement or order which provides amongst other things, that neither you nor your spouse/civil partner will have any further claim against the income or capital of the other party. A 'clean break' does not terminate the responsibility of a parent to a child.)
{ FORMTEXT }
c) Whether you are seeking a i) pension sharing order ii) pension attachment order iii) pension compensation sharing order iv) pension compensation attachment order
{ FORMTEXT }
d) If you are seeking a transfer or settlement of any property or assets, identify the property or assets in question
{ FORMTEXT }
5.2 If you are seeking a variation of an ante-nuptial or post-nuptial settlement or a relevant settlement made during, or in anticipation of, a civil partnership, identify the settlement, by whom it was made, its trustees and beneficiaries and state why you allege it is a settlement which the court can vary.
{FORMTEXT}
5.3 If you are seeking an avoidance of disposition order, or if you have already applied for such an order, identify the property to which the disposition relates and the person or body in whose favour the disposition is alleged to have been made.
{ FORMTEXT }

Statement of Truth

*delete as appropriate

*[I believe] [the Applicant/Respondent believes] that the facts stated in this statement are true

*I am duly authorised by the Applicant/Respondent to sign this statement

and confirm that the information given above is a full, frank, clear and accurate disclosure of my financial and other relevant circumstances.

Print full name	{ FORMTEXT }
Address for service	{ FORMTEXT }
	Postcode: \[\begin{array}{c cccc} \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
Name of Applicant's/ Respondent's solicitor's firm	{ MERGEFIELD PRACTICEINFO_PRACTICE_NAME }
Signed *(Applicant/Re	Dated
	despondent's solicitor)
Position or office held (if signing on behalf of firm or company)	{ FORMTEXT }

Proceedings for contempt of court may be brought against a person who makes or causes to be made, a false statement in a document verified by a statement of truth.

Address all communications to the Court Manager of the Court and quote the case number. If you do not quote this number, your correspondence may be returned.				
	s number, your con	espondence ma	y be returned.	

Schedule of Documents to accompany Form E

The following list shows the documents you must attach to your Form E if applicable. You may attach other documents where it is necessary to explain or clarify any of the information that you give in the Form E.

Form E		Please tick			
paragraph	Document	Attached	Not applicable	To follow	
1.14	Application to vary an order: if applicable, attach a copy of the relevant order.	{ FORMC HECKB OX }	FORMCH ECKBOX }	FORMC HECKB OX }	
2.1	Matrimonial home valuation: a copy of any valuation relating to the matrimonial home that has been obtained in the last six months.	{ FORMC HECKB OX }	{ FORMCH ECKBOX }	{ FORMC HECKB OX }	
2.1	Matrimonial home mortgage(s): a recent mortgage statement in respect of each mortgage on the matrimonial home confirming the amount outstanding.	{ FORMC HECKB OX }	FORMCH ECKBOX }	FORMC HECKB OX }	
2.2	Any other property: a copy of any valuation relating to each other property disclosed that has been obtained in the last six months.	FORMC HECKB OX }	FORMCH ECKBOX }	FORMC HECKB OX }	
2.2	Any other property: a recent mortgage statement in respect of each mortgage on each other property disclosed confirming the amount outstanding.	FORMC HECKB OX }	FORMCH ECKBOX }	FORMC HECKB OX }	
2.3	Personal bank, building society and National Savings accounts: copies of statements for the last 12 months for each account that has been held in the last twelve months, either in your own name or in which you have or have had any interest.	{ FORMC HECKB OX }	{ FORMCH ECKBOX }	{ FORMC HECKB OX }	
2.4	Other investments: the latest statement or dividend counterfoil relating to each investment as disclosed in paragraph 2.4.	{ FORMC HECKB OX }	{ FORMCH ECKBOX }	{ FORMC HECKB OX }	
2.5	Life insurance (including endowment) policies: a surrender valuation for each policy that has a surrender value as disclosed under paragraph 2.5.	{ FORMC HECKB OX }	{ FORMCH ECKBOX }	{ FORMC HECKB OX }	
2.11	Business interests: a copy of the business accounts for the last two financial years for each business interest disclosed.	{ FORMC HECKB OX }	{ FORMCH ECKBOX }	{ FORMC HECKB OX }	
2.11	Business interests: any documentation that is available to confirm the estimate of the current value of the business, for example, a letter from an accountant or formal valuation if that has been obtained.	{ FORMC HECKB OX }	{ FORMCH ECKBOX }	{ FORMC HECKB OX }	
2.13	Pension and PPF compensation: a recent statement showing the cash equivalent (CE) provided by the trustees or managers of each pension arrangement or valuation of each PPF entitlement provided by the PPF Board that you have disclosed (or, in the case of the additional state pension, a valuation of these rights). If not yet available, attach a copy of the letter sent to the pension company, administrators or the PPF Board requesting the information.	{ FORMC HECKB OX }	{ FORMCH ECKBOX }	{ FORMC HECKB OX }	
2.15	Employment income: your P60 for the last financial year in respect of each employment that you have.	{ FORMC HECKB OX }	{ FORMCH ECKBOX }	{ FORMC HECKB OX }	
2.15	Employment income: your last three payslips in respect of each employment that you have.	{ FORMC HECKB	{ FORMCH ECKBOX	{ FORMC HECKB	

		OX }	}	OX }
2.15	Employment income: your last form P11D if you have been issued with one.	FORMC HECKB OX }	{ FORMCH ECKBOX }	FORMC HECKB OX }
2.16	Self-employment or partnership income: a copy of your last tax assessment or if that is not available, a letter from your accountant confirming your tax liability.	FORMC HECKB OX }	{ FORMCH ECKBOX }	{ FORMC HECKB OX }
2.16	Self-employment or partnership income: if net income from the last financial year and the estimated income for the next twelve months is significantly different, a copy of the management accounts for the period since your last accounts.	FORMC HECKB OX }	{ FORMCH ECKBOX }	FORMC HECKB OX }
State relevant Form E paragraph	Description of other documents attached: { FORMTEXT }	{ FORMC HECKB OX }	{ FORMCH ECKBOX }	FORMC HECKB OX }