APPENDIX OF FORMS FORM 81H

RESPONSE TO MOTION TO CHANGE

		Court File No	
IN THE COURT OF KING'S BENCH OF FAMILY DIVISION JUDICIAL DISTRICT OF			
BETWEEN:			
	Applicant(s)		
and			
	Respondent(s)		
RESI	PONSE TO MOTION TO CHANG (FORM 81H)	BE .	
Applicant Address for service:			
	(street and number)		
(city, town, village) E-mail address (<i>if any</i>): Telephone number:	(province)	(postal code)	(work
Solicitor for applicant Name of solicitor for applicant: Name of solicitor's firm (<i>if applicable</i>): Address for service:	(street and number)		
(city, town, village) E-mail address (<i>if any</i>): Telephone number: Fax number (<i>if any</i>):			

Respondent		
Address for service:	(street and number)	
(city, town, village)	(province, state, country)	(postal code)
E-mail address (<i>if any</i>):		
		/1
Fax number (if any):		
Solicitor for respondent		
Name of solicitor for respondent:		
Name of solicitor's firm (if applicable):		
Address for service:		
	(street and number)	
(city, town, village)	(province)	(postal code)
E-mail address (<i>if any</i>):		
(a) CHILD SUPPORT UNDER	OR THE FOLLOWING KINDS OF SU	
(b) SPOUSAL SUPPORT UNDE	R THE <i>DIVORCE ACT</i> ; AND	
(c) SUPPORT UNDER THE FAR	MILY LAW ACT FOR A DEPENDANT	WHO IS NOT A CHILD.
DECLARATION OF THE PARTY F	RESPONDING TO THE MOTION	
For proceedings under the Family Law ☐ I certify that I am aware of my december 1.	Act uties under section 5 of the Family Law Ac	ct.
For proceedings under the Divorce Act I certify that I am aware of my december 1.	uties under sections 7.1 to 7.5 of the <i>Divor</i>	ce Act.
DATED at	, thisday of	, 20
	Signature of party	responding to the motion

	LICITOR'S CE name is:		:	and I am the solicitor for	or the party respo	nding to the motion.
I ce	ertify that I have o	complied with the require e Family Law Act. the Divorce Act.	ements of		or one paney resp	
DA	TED at		, this	day of	, 20	·
				Sign	nature of Solicitor	
		PART	1 - GENERA	L INFORMATION		
Му	name is (full leg	gal name)				
I li	ve in:					
_	(city, towr	n, village)	(province,	state, country)	(po	stal code)
and	d I make oath (<i>o</i>	r solemnly affirm) tha	t the followin	g is true:		
1.	I am the	□ applicant	□ re	spondent		
2.	I am the	□ support payer				
		□ support recipien	t			
3.	_	ith the information set of		1 to 8 of the Change I	nformation Form	(Form 81G), dated
		th the information set o	ut in sections	I to 8 of the Change I Γ as follows: (Give d	nformation Form	(Form 81G), dated
	you do not agr	ee and attach any docur	ments that sup	port your position.)	erans of the injur	The state of the s
4.	☐ I agree wi	th the claims made by (name of perso	n bringing the motion in sec	to change) tions	of the Motion to
	Change (Form	81F), dated		·		
	□ I disagree	with the claims made h	v (name of ne	rson hringing the moti	ion to change)	
	Change (Form	81F), dated		·		
5		hat the motion to chang				

CLAIM BY PARTY RESPONDING TO THE MOTION (Complete only if you are requesting the court to change the existing order or support agreement.)

(Con	RENTING TIME/DECISION-MA mplete only if you are requesting a c of party(ies))	hange to a parenting order.)
decision-making response	onsibility allocated under a parenting	order with respect to the following child(ren):
Name of Child	Birth Date	Parenting Time/ Decision-making Arrangements
	of party(ies))_er with respect to the following child	have parenting time allocations:
under a parenting order	of party(ies))er with respect to the following child	have parenting time allocate (ren): Parenting Time Arrangements
under a parenting order	er with respect to the following child	(ren):
under a parenting order	er with respect to the following child	(ren):
under a parenting order	er with respect to the following child	(ren):
under a parenting order	er with respect to the following child	(ren):
under a parenting order	er with respect to the following child	(ren):
. I request that (name(s) under a parenting order a parenting order than the control of the cont	er with respect to the following child	(ren):

Na	nme of Child	Birth Date	Shared Parenting Time / Decision-making Arrangements
10.	I request the following living / child(ren))	parenting time arrangements for	or the child(ren): (name(s) and birth date(s) of
11.	The order I am requesting the co (Give details.)	ourt to make is in the best inter-	ests of the child(ren) for the following reasons:
Oth	ner Court Proceedings		
	If you are applying for a parenting a dependant who is not a child, you		der for child support, spousal support or support
	any criminal or child protectionany restraining or protection ord		or the other party to the proceeding, or f you.
	e judge will use this information to er orders or proceedings.	help ensure that any orders ma	de in this court proceeding do not conflict with
(Giv		number, the kind of order the cour	parties to this proceeding or any of the children: t was asked to make and what order, if any, the court
		UNDER THE DIVORCE ACT rtion only if you are requesting	
13.	I am asking to change the child	support in the agreement/order	because:
	☐ The agreement/order was r	nade before the applicable Chil	d Support Guidelines came into effect.
	☐ The following change in ci	rcumstances has taken place. (Give details of change in circumstances)

	ies agree to the termind (ren): (name(s) and but			d, for the
as of (date)		·		
☐ Other: (Give details.)			
14. I request that t	the child support be cha	nged as follows:		
☐ The agree child(ren): (no	ement/order for child same(s) and birth date(s)	upport, dated of child(ren))	, be t	erminated for the following
effective on (a	late)	·		
\square Based on to (name of p child(ren): (name)	the payer's annual inco arty)_ame(s) and birth date(s)	me of \$, (name in the of child(ren))	e of party) party amount of \$ p	pay child support per month for the following
with payments	s to begin on (date)			
☐ Thi	s amount is the table an	nount listed in the Chile	d Support Guidelines.	
	s amount is different the ox is checked, you must		ed in the Child Suppo	rt Guidelines.
☐ Starting of	on (date)	, (name of p	party)	pay to
(name of party following spec	y) cial or extraordinary ext	penses:	the amount of \$	pay to for the
2 1	7			
Child's Name	Type of Expense	Total Amount of Expense	Payer's Share	Terms of Payment (frequency of payment, date due, etc.)
		\$	\$	
		\$	\$	
		\$	\$	
		\$	\$	
		\$	\$	

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Other: (Give details.)

15.		n requesting that child support be changed to an amount that is different than the table amount listed in the ld Support Guidelines. The reason(s) for my request is/are that:
	□ is ar	The parties agree to a different amount. I have attached a separate sheet to this form that explains why this appropriate amount of child support.
	□ 40%	The parties have shared parenting time with respect to the child(ren). (The payer has a child not less than to 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 and shows the increased cost of the shared parenting time arrangements, as well as the financial circumstances of each party and of each child for whom support is claimed.
		☐ The parties agree to this arrangement and I have attached a separate sheet to this form that explains why this is an appropriate amount of child support.
		Each party has a majority of the parenting time with respect to one or more of the children. (<i>Each party a child more than 60% of the time</i> .) I have attached a separate sheet to this form that calculates the difference ween the amount that each party would otherwise pay to the other under the Child Support Guidelines.
	of si	A child is 19 or more years old and I have attached to this form a separate sheet that calculates the amount upport for this child.
		☐ A child contributes to his/her own support and I have attached to this form a separate sheet that shows the amount of the child's own income and/or assets.
	□ the a	The payer's annual income is over \$150,000 and I have attached to this form a separate sheet that calculates amount of support that I want to be included in an order.
	□ spec	Under the agreement/order, (name(s) of child(ren)) is/are the subject of child provisions that I have detailed on a separate sheet that I have attached to this form.
		The payer stands in the place of a parent to (name(s) of child(ren)) and I have ched to this form a separate sheet that gives the details of another parent's duty to pay support for this/these d(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) whom support is claimed. I have attached to this form a separate sheet that compares the standards of living ne parties and calculates the amount of support that should be paid.
16.	I rec	quest that the outstanding child support owed be paid as follows:
	□ of (<i>a</i>	The child support owed to (name of recipient) be fixed at \$ as date)
		(Name of payer) pay to (name of recipient) the amount of \$ per month, with payments to begin on (date)
		the amount of \$ per month, with payments to begin on (date)

SPOUSAL SUPPORT UNDER THE DIVORCE ACT (Complete only if you are asking for a change in spousal support.)

17.	I am requesting a change to the spousal support in the agreement/order because:
	☐ The following change in circumstances has taken place: (Give details of change in circumstances.)
	☐ Spousal support should no longer be paid as of (date) for the following reasons: (Give details.)
	☐ The parties consent to the termination of the agreement/order, dated, as of (date)
	□ Other: (Specify.)
18.	I request that the spousal support be changed as follows:
	☐ The agreement/order, dated, be terminated effective on (date)
	\[\text{Name of party} \] the amount of \(\sum_{\text{per month}} \) per month, effective on \(\lambda \) date \) .
	☐ Other: (Give details of the order you are requesting the court to make.)
19.	I request 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 payer) pay to (name of recipient) the amount of \$ per month, with payments to begin on (date) until the full amount owing is paid.
	SUPPORT UNDER THE FAMILY LAW ACT FOR A DEPENDANT WHO IS NOT A CHILD (Complete only if you are asking for a change in support.)
20.	I am requesting a change to the support for a dependant in the agreement/order because:
	☐ The following change in circumstances has taken place: (Give details of change in circumstances.)
	☐ The support should no longer be paid as of (date) for the following reasons: (Give details.)
	☐ The parties consent to the termination of the agreement/order, dated, as of (date)

	□ Other: (Specify.)
21.	I request that the support for a dependant be changed as follows:
	☐ The agreement/order, dated, be terminated effective on (date)
	□ (Name of party) pay to (name of party) party) the amount of \$ per month, effective of (date)
	□ Other: (Give details of the order you are requesting the court to make.)
22.	I request that the outstanding support owed to a dependant be paid as follows:
	☐ The support owed to (name of recipient) be fixed at \$ as of (date
	□ (Name of payer) pay to (name of recipien
	the amount of \$ per month, with payments to begin on (date until the full amount owing is paid.
	OTHER (Complete if applicable.)
23.	I ask that the term of the order of, judge of The Court of King's Bench of New Brunswick, dated, for (Give details.)
	changed as follows: (Give details of the order you are requesting the court to make.)
24.	I request the court to make the order set out in section 23 for the following reasons:
25.	I request the court to make the following additional order:
26.	I request the court to make the order set out in section 25 for the following reasons:
	ORN TO) SOLEMNLY)
	IRMED)
befo	re me)
at _	

of)	
		day)	
		, 20		
A No		ioner of Oaths / ublic (if outside wick)) Signature of Applicant or Res	spondent
	DO N	NOT COMPLETE THIS P. A SUPPORT OBLIGATION	- INFORMATION FROM SUPPORT PA ART IF THE PARTIES ARE ONLY CON ON OR IF THE MOTION TO CHANGE CLAIM TO CHANGE CHILD SUPPORT	SENTING TO TERMINATE DOES NOT INCLUDE
My	namo	e is (full legal name)		
I liv	e in:			
and	I ma	(city, town, village) ke oath (or solemnly affirm	(province, state, country) m) that the following is true:	(postal code)
27.	I am	the support payer in this pr	roceeding.	
28.	I ha	ve attached the following fin	nancial information about myself:	
	(a)	a copy of every personal i recent taxation years;	ncome tax return that I filed with the Cana	da Revenue Agency for the 3 most
	(b)	a copy of every notice of as and	ssessment and re-assessment from the Canad	a Revenue Agency of those returns
	(c)	☐ (applies only if you a clause 21(1)(c) of the Chil	re an employee) proof of this year's earning d Support Guidelines.	s from my employer as required by
			re self-employed, or you are a partner in a punder a trust) the documents listed in one of the Guidelines.	

29.	My total income			
	□ will be \$	for this year;		
	□ was \$ f	for last year; and		
	□ was \$	for the year before tha	t.	
30.		income, the table amou \$ per month.	ınt fro	om the Child Support Guidelines for (number of children
31.	My financial statement	☐ is attached.		is not attached.
or SAFF before at in the of this	ORN TO SOLEMNLY TRMED) re me e Province, State or Country day , 20	y)))))))))))))))))))		
A No	mmissioner of Oaths / tary Public (if outside Brunswick))	Sig	gnature of Applicant or Respondent

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	e is (full legal name)		
I liv	ve in:			
and	l I ma	(city, town, village) ke oath (or solemnly affirm	(province, state, country) a) that the following is true:	(postal code)
		the support recipient in this ctions 33 and 34 only if:	case.	
	- the	change that you are request	ting is for an amount that is different from th	e Child Support Guidelines;
	- the	change that you are request	ting relates to a child:	
		- over the age of 19 years,		
		- for whom the payer stand.	s in the place of a parent, or	
		- with respect to whom the p	payer exercises not less than 40% of parentin	g time over the course of the year;
		nere there are two or more co	hildren, each party exercises the majority o	f parenting time with one or more
	- the	e payer's annual income as a	etermined under the guidelines is more than	\$150,000;
	- eit	her party claims that an orde	er according to the guidelines would result in	n undue hardship; or
	- the	ere is a claim for special or e	xtraordinary expenses.	
33.	I ha	ve attached the following fin	ancial information about myself:	
	(a)	a copy of every personal ir recent taxation years;	ncome tax return that I filed with the Canad	a Revenue Agency for the 3 most
	(b)	a copy of every notice of ass	sessment and re-assessment from the Canada	Revenue Agency of those returns;
	(c)	☐ (applies only if you are clause 21(1)(c) of the Child	e an employee) proof of this year's earnings Support Guidelines.	from my employer as required by
			e self-employed, or you are a partner in a pauder a trust) the documents listed in one of the Guidelines.	

34.	My total income					
		□ will be \$ for this year;				
		l was \$ for last year; and				
		was \$ for the year before t			t.	
35.	My	financial statement		is attached.		is not attached.
SWORN TO (or SOLEMNLY AFFIRMED) before me at in the Province, State or Country of this day of, 20						
A Commissioner of Oaths / A Notary Public (if outside New Brunswick)					Sig	gnature of Applicant or Respondent

2010-135; 2018-35; 2021-17; 2022-86