

BC FAMILY MAINTENANCE AGENCY
LIST OF SUPPORT PAYMENTS RECEIVED

Case ID: _____

Last Name (currently used)

First Name

Middle Name

Last Name (currently used)

First Name

Middle Name

To calculate any support arrears owing to you, please complete this form and list any payments that you have received since your order or agreement came into effect.

Please do not include payments toward special or extraordinary expenses on this form. We will send you a separate form to complete if your order or agreement has expenses that BCFMA can collect.

1) Please select the option that applies: (select one)

- ☐ A. I have not received any support payments. **If selected, go to the next page**
- ☐ B. I have received all my support payments in full. **If selected, go to the next page**
- ☐ C. I have received my support payments in full up to and including _____ (DD-MON-YEAR), then
- ☐ Payments stopped. **If selected, go to the next page**
- ☐ I received some payments after that. **If selected, go to the table below** and list the payments you received after the date all payments were paid in full
- ☐ D. I have received some of my support payments owing under the order or agreement. **If selected, go to the table below** and list all payments since the order or agreement came into effect

Only complete this table if directed to based on the option you selected above. Please refer to our guide if you have any questions. Payment dates should be written as DD-MON-YEAR, for example 01-Sep-2021.

[illegible]

We may provide a copy of this form to the payor

2) Please answer:

Have you ever agreed to accept something else instead of support since your order or agreement came into effect? (e.g. groceries, car repairs, gifts, or holidays for the children)

☐ YES ☐ NO

If Yes, provide details, including date and monetary value accepted:

3) Read and sign the declaration:

- a) I am the recipient entitled to receive support payments under an order or agreement
- b) I confirm that to the best of my knowledge this form and its attachments reflects all the support payments I received from the payor
- c) I understand a copy of this form and its attachments may be provided to the payor if there is a dispute about amounts paid

SIGNATURE

By checking the box below you confirm that you are the recipient named on this form and the information provided on the form is true.

☐ I declare I am the recipient and the information provided is true.

Name:

Date:

FOR BCFMA OFFICE USE ONLY**Additional payments or amendments by BCFMA**

DATE RECEIVED	AMOUNT RECEIVED	COMMENTS	CHANGE MADE BY	DATE

GUIDE TO THE LIST OF SUPPORT PAYMENTS RECEIVED FORM

Which payments do I include?

- Support payments received from the date your order or agreement came into effect
- Payments for arrears that have been set by the court and are listed in your order, sometimes called fixed arrears

What if there is not enough room to list all the payments I have received?

- Please continue listing payments on a separate paper and attach it to your signed form

What if I received my support payments in another currency?

- Enter your payments in Canadian dollars. If you are unable to do so, please indicate the currency beside each payment (e.g. \$475 US)

I am reopening my case. Does BCFMA have past payment records?

- It depends on how long ago your case was closed. Please contact us and we may be able to provide you a statement

Do I need to enter exact dates?

- We prefer exact dates, but month and year are acceptable
- If you received support payments in full for a whole year, you can list the total amount received in that year rather than listing each payment

What if I do not have payment records?

- If you do not have payment records, please contact us to discuss your options

Does the payor get a copy of this form?

- We may provide a copy of this form to the payor, so please refrain from writing any comments

What if my payment information changes after I send this form?

- If either you or the payor provide further information, we will review and record any changes in the Additional payments or amendments by BCFMA section on page 2 of the form