

Form 2: Financial Summary

(Supported Decision-Making and Representation Act, S.N.B. 2022, c.60, ss.19(2)(d), 36(2)(d))

Application information

Court of King’s Bench of New Brunswick, Family Division

Judicial district: _____

Court file no.: _____

Name of applicant: _____

Name of supported/represented person: _____

A. Property

Bank accounts

Provide information about the supported/represented person’s bank accounts (e.g., savings account, chequing account).

Name of institution and type of account	Name of co-holder of account (if applicable)	Estimated value

Investment accounts

Provide information about the supported/represented person’s investment accounts (e.g., registered retirement savings plan, registered retirement income fund, tax-free savings account, registered disability savings plan, brokerage account, guaranteed investment certificates, term deposits, savings bonds, mutual funds).

Name of institution and type of account	Name of co-holder of account (if applicable)	Name of beneficiary (if applicable)	Estimated value

Other financial assets

Provide information about the supported/represented person's other financial assets (e.g., cash, account at residential facility, shares in private companies or partnerships, security certificates, shareholder loans, private loans, interest in a trust or estate).

Description	Estimated value

Real property

Provide information about the supported/represented person's real property.

Location of property	Co-owner (if applicable)	Estimated value

Personal property

Provide information about the supported/represented person's personal property (e.g., vehicles, boats, valuables, equipment, tools, business assets).

Description	Co-owner (if applicable)	Estimated value

B. Debts

Provide information about the supported/represented person's debts (e.g., mortgage loans, car loans, lines of credit, personal loans, credit card balances, judgments, taxes).

Description	Name of creditor	Estimated amount

C. Income

Provide information about the supported/represented person's income (e.g., pension, annuities, investment income, Old Age Security, Canada Pension Plan, income support, disability benefits, employment income).

Source of income	Frequency of payments	Estimated amount

Estimated total monthly income: \$ _____

D. Expenses

Provide information about the supported/represented person's monthly expenses (e.g., mortgage, utilities, property maintenance, property tax, rent, nursing home fees, income tax, insurance, food, medical expenses, transportation, recreation).

Description	Estimated amount

Estimated total monthly expenses: \$ _____

E. Anticipated changes

Provide information about any anticipated changes to the information provided in sections A to D, including any increase or decrease of income or expenses and any changes to the person's property or debts.

Signature of applicant: _____ Date: _____