

FORM 79

Statement of Affairs (Non-Business Bankruptcy/Proposal)
 (Subsections 49(2) and 158(d) of the Act / Subsections 50(2) and 62(1) and Paragraph 66.13(2)(d) of the Act)

(Title Form 1)

Original Amended

| ASSETS | | | | | | |
|---|--|-----------------------|-----------------|----|-----------------------|--|
| Type of assets | Description (<i>provide details</i>) | Estimate dollar value | Exempt property | | Secured amount/ liens | Estimated net realizable dollar value* |
| | | | Yes | No | | |
| 1. Cash on hand | | | | | | |
| 2. Furniture | | | | | | |
| 3. Personal effects | | | | | | |
| 4. Cash-surrender value of life insurance policies, RRSPs, etc. | | | | | | |
| 5. Securities | | | | | | |
| 6. Real property or immovables | House | | | | | |
| | Cottage | | | | | |
| | Land | | | | | |
| 7. Motor vehicle | Automobile | | | | | |
| | Motorcycle | | | | | |
| | Snowmobile | | | | | |
| | Other | | | | | |
| 8. Recreational equipment | | | | | | |
| 9. Estimated tax refund | | | | | | |
| 10. Other assets | | | | | | |
| TOTAL | | | | | | |

Date

Bankrupt/Debtor

*For a summary administration, indicate value net of the direct realization costs referred to in Rule 128(1) of the *Bankruptcy and Insolvency Act*.

FORM 79 -- *Continued*

| LIABILITIES | | | | | | |
|--------------------|--------------------------------|-------------|--|---------|-----------|-----------|
| | | | Liabilities type code (LTC) 1 Real property or immovable mortgage or hypothec 2 Bank loans (except real property mortgage) 3 Finance company loans 4 Credit cards - bank/trust company issuers 5 Credit cards - other issuers 6 Taxes - federal/provincial/municipal 7 Student loans 8 Loans from individuals 9 Other | | | |
| Creditor | Address, including postal code | Account No. | Amount of debt | | | Enter LTC |
| | | | Unsecured | Secured | Preferred | |
| 1 | | | | | | |
| 2 | | | | | | |
| 3 | | | | | | |
| 4 | | | | | | |
| 5 | | | | | | |
| 6 | | | | | | |
| 7 | | | | | | |
| 8 | | | | | | |
| 9 | | | | | | |
| 10 | | | | | | |
| 11 | | | | | | |
| 12 | | | | | | |
| 13 | | | | | | |
| 14 | | | | | | |
| 15 | | | | | | |
| 16 | | | | | | |
| 17 | | | | | | |
| 18 | | | | | | |
| 19 | | | | | | |
| 20 | | | | | | |
| | TOTAL | Unsecured | | | | |
| | TOTAL | Secured | | | | |
| | TOTAL | Preferred | | | | |

_____ Date

_____ Bankrupt/Debtor

FORM 79 -- Continued

| A. INFORMATION RELATING TO THE AFFAIRS OF THE BANKRUPT/DEBTOR | | | |
|---|---|---|--|
| 1. Family name: | Given names: | Date of birth: ____ / ____ / ____ YYYY / MM / DD | |
| | Gender: F <input type="checkbox"/> M <input type="checkbox"/> | | |
| 2. Also known as: | | | |
| 3. Complete address, including postal code: | | | |
| 4. Marital status: <i>(specify month and year of event if it occurred in the last five years)</i> | ____ ____ Married | ____ ____ | Single |
| | Widowed | ____ ____ | Separated |
| | ____ ____ Divorced | ____ ____ partner | Common-law |
| 5. Full name of spouse or common-law partner: | | | |
| 6. Name of present employer: | | Occupation (bankrupt/debtor): | |
| 7A. Number of persons in household family unit, including bankrupt/debtor: | | | |
| 7B. Number of persons 17 years of age or younger: | | | |
| 8. Have you operated a business within the last five years? | Yes | No | (If yes) Name, type and period of operation: |
| B. WITHIN 12 MONTHS PRIOR TO THE DATE OF THE INITIAL BANKRUPTCY EVENT, HAVE YOU, EITHER IN CANADA OR ELSEWHERE: | | | |
| 9A. Sold or disposed of any of your property? | Yes | No | |
| 9B. Made payments in excess of the regular payments to creditors? | Yes | No | |
| 9C. Had any property seized by a creditor? | Yes | No | |
| C. WITHIN FIVE YEARS PRIOR TO THE DATE OF THE INITIAL BANKRUPTCY EVENT, HAVE YOU, EITHER IN CANADA OR ELSEWHERE: | | | |
| 10A. Sold or disposed of any property? | Yes | No | |
| 10B. Made any gifts to relatives or others in excess of \$500? | Yes | No | |

_____ Date

_____ Bankrupt/Debtor

FORM 79 -- *Concluded*

| |
|---|
| D. BUDGET INFORMATION: <i>Attach Form 65 to this form</i> |
| 11A. Have you ever made a proposal under the <i>Bankruptcy and Insolvency Act</i> ? Yes ___ No ___ |
| 11B. Have you been bankrupt before in Canada? Yes ___ No ___ |
| (If yes, provide the following details for all insolvency proceedings: (a) filing date and location of the proceedings; (b) name of trustee or administrator; (c) if applicable, was the proposal successful; (d) date on which Certificate of Full Performance or Discharge was obtained.) _____ _____ |
| 12. Do you expect to receive any sums of money that are not related to your normal income, or any other property within the next 12 months? Yes ___ No ___ |
| 13. If you answered Yes to any of questions 8, 9 or 11, provide details: _____ _____ |
| 14. Give reasons for your financial difficulties: _____ _____ _____ |

I, _____, of the _____ of _____ in the Province of _____, do swear (or solemnly declare) that this statement is, to the best of my knowledge, a full, true and complete statement of my affairs on the _____ day of _____ and fully discloses all property and transactions of every description that is or was in my possession or that may devolve on me in accordance with the *Bankruptcy and Insolvency Act*.

SWORN (or SOLEMNLY DECLARED)

before me at _____ (city, town or village),
in the Province of _____,
on this _____ day of _____.

Commissioner of Oaths
for the Province of _____

Bankrupt/Debtor

NOTE: If a copy of this Form is sent electronically by means such as email, the name and contact information of the sender, prescribed in Form 1.1, must be added at the end of the document.