

# Financial Statement for a variation of an order for a financial remedy

Name of court	Case No.
Name of Applicant	
Name of Respondent	

(please tick the appropriate boxes)

This is the Financial Statement of the

- Applicant
- Respondent
- Child

in this application

This form should only be completed if you are applying for a variation of an order for a financial remedy. If you are applying for a financial order or financial relief after an overseas divorce or dissolution etc. in the family court or High Court you should complete Form E.

If you are applying for a financial remedy other than a financial order or financial relief after an overseas divorce or dissolution etc. in the family court or High Court you should complete Form E1.

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 the documents listed in the Schedule to the form where applicable and you may attach other documents where it is necessary to explain or clarify any of the information that you give.

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

Name and address of solicitor

Solicitor's fee account no.

**1. Personal details**

First names										
Surname										
Marital status										
Date of birth	<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Address										
Postcode										

**2. Dependents (People you support financially)**

Children living with you	Names	Date of birth									
		<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
		<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
		<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
		<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
		<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
		<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Children not living with you	Names	Date of birth									
		<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
		<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
		<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
		<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
		<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
		<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
		<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	Amount of any maintenance being paid	£									

Other dependents (give details – including whether you have these responsibilities on a permanent basis)	Names	Details

### 3. Employment

- I am  employed as a  
 self employed as a  
 unemployed  
 a pensioner


My employer is:

Name  
Address

	Postcode	<input style="width: 20px; height: 15px;" type="text"/> <input style="width: 20px; height: 15px;" type="text"/> <input style="width: 20px; height: 15px;" type="text"/> <input style="width: 20px; height: 15px;" type="text"/>	<input style="width: 20px; height: 15px;" type="text"/> <input style="width: 20px; height: 15px;" type="text"/> <input style="width: 20px; height: 15px;" type="text"/> <input style="width: 20px; height: 15px;" type="text"/>

Employment other than main job

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Self employment annual turnover

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- I am not in arrears with my national insurance contributions, income tax and VAT  
 I am in arrears and I owe £

Give details of contracts and other work in hand

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Give details of any sums due in respect of work done

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### 4. Bank accounts and savings

- I have no bank building society or savings accounts  
 I have  bank or building society accounts:

Name of accounts	Average balance over last six months

I have  savings accounts:

Name of account(s)	Amount in account (£)

**5. Property**

I live in  my own property

lodgings

jointly owned property

council property/  
housing association

privately rented property

other, please state

Value of (jointly) owned property

£

*When filling in sections 6, 7 and 9, please give amounts on a weekly or monthly basis. Do not mix weekly and monthly figures.*

**6. Income**

Amount are per

week (£)

month (£)

My usual take home pay (including overtime, commission and bonus pay)

Income from employment

Income from Self employment

Income Support

Child benefit(s)

Other state benefit(s)

My pension(s)

Others living in my home give me

Other income  
(please give details)

Total £

## 7. Expenses

Do not include any payments made by other members of the household out of their own income

I have regular expenses as follows:

(do not include payments on any arrears)

Amount are per

**week (£)**

**month (£)**

	Mortgage	
	Rent	
	Council Tax	
	Gas	
	Electricity	
	Water charges	
	TV rental/licence	
	HP repayments	
	Mail order	
	Housekeeping, food, school meals	
	Travelling expenses	
	Children's clothing and pocket money	
	Maintenance Payments	
	Car Expenses	
	Insurance – House	
Insurance – other (please give details)		
Others (but do not include credit dept payments or court orders)		
<b>Total payments</b>		£

## 8. Court Orders

Please include fines, compensation etc.

Court	Case number	Amount outstanding	Payment per month
<b>Total</b>			£

**9. Money you owe on essential bills**

Please state the amount of any arrears owing and the amount of any payments you make towards these arrears.

Amount are per  
 week (£)  month (£)

	Total amount outstanding	Amount of payment
Rent		
Mortgage		
Council Tax		
Water Rates		
Fuel Debts (Gas Electricity Other)		
Maintenance arrears		
Total priority debts		
<b>Total</b>	£	£

**10. Other commitments**

Give details of any payments on credit cards, other loans, storecards, loans from family etc.

Type of payment	Total amount outstanding	Amount of payment
<b>Total</b>	£	£

**11. Child(ren)'s resources**

	Income	Property	Other
Totals	£	£	£

## 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

Address for service

  

Postcode

Name of Applicant's/  
Respondent's  
solicitor's firm

Signed

Dated

 /  / 

\*(Applicant/Respondent) (Litigation friend)

\*(Applicant's/Respondent's solicitor)

Position or office held  
(if signing on behalf of  
firm or company)

**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.**

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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.

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## Schedule of Documents to accompany Form E2

The following list shows the documents you must attach to your Form E2 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 E2.

Form E2 paragraph	Document	Please tick		
		Attached	Not applicable	To follow
4	<b>Personal bank, building society and National Savings accounts:</b> copies of statements for the last 6 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.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6	<b>Employment income:</b> your P60 for the last financial year in respect of each employment that you have.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6	<b>Employment income:</b> your last three payslips in respect of each employment that you have.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6	<b>Employment income:</b> your last form P11D if you have been issued with one.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6	<b>Self-employment or partnership income:</b> a copy of your last tax assessment or if that is not available, a letter from your accountant confirming your tax liability.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>State relevant Form E2 paragraph</b>	Description of other documents attached:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>