MAGISTRATES' COURT GENERAL CIVIL PROCEDURE RULES 2020

Rule 61.02(1)(b),61.04(b)

FORM 61B

**STATEMENT OF AFFAIRS BY AN INDIVIDUAL**

**(Judgment Debt Recovery Act 1984)**

IN THE MAGISTRATES' COURT Court Number

OF VICTORIA AT

|  |  |
| --- | --- |
|       | Judgment Creditor |

and

|  |  |
| --- | --- |
|       | Judgment Debtor |

Of: *(address)*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Date of Document: |       |  |  |  |
| Filed on Behalf of: |       |  | Code: |       |
| Australian Lawyer Name: |       |  | Telephone: |       |
| Address: |       |  | Reference: |       |

To the registrar

|  |  |
| --- | --- |
| **1.** | **AMOUNT AND SOURCE OF WEEKLY INCOME** |
|  | (a) | **Employed persons** |  |
|  |  |  Occupation |       |
|  |  |  Name of Employer |       |
|  |  |  Address of Employer |       |
|  |
|  |  |  Gross Wage | $ |       |
|  |  |  Current overtime (if any) | $ |       |
|  |  |  Car and other allowances and commissions | $ |       |
|  |
|  | (b) | **Self-employed persons** |  |  |
|  |  | Average earnings from self-employment or partnership for last 12 months | $ |       |
|  |  |  |  |  |
|  | (c) | **Unemployed persons or persons not working** |  |  |
|  |  | If unemployed state: |  |  |
|  |  |  Length of last employment |       |  |  |  |
|  |  |  Date when last employment ceased |      /      /      |  |  |  |
|  |  |  Gross weekly amount earned | $ |       |
|  |  | Pension or benefit received | $ |       |
|  |  | Workcover received | $ |       |
|  |  |  |  |  |
|  | (d) | **Other monies** |  |  |
|  |  | Maintenance received | $ |       |
|  |  | Superannuation received | $ |       |
|  |  | Board or rent received | $ |       |
|  |  | Average weekly income from investments in banks, building societies, shares, etc | $ |       |
|  |  | Other *(e.g. Family allowance – give details)* | $ |       |
|  |  |       |  |  |
|  |  |  |  |  |
|  | **TOTAL GROSS WEEKLY INCOME** | **$** |       |

|  |  |  |  |
| --- | --- | --- | --- |
| **2.** | **WEEKLY EXPENSES** |  |  |
|  |  | Income tax | $ |       |
|  |  | Superannuation | $ |       |
|  |  | Health Insurance | $ |       |
|  |  | Union fees | $ |       |
|  |  | Housing *(mortgage, board, rent)* | $ |       |
|  |  | Municipal Rates | $ |       |
|  |  | Water and sewerage rates | $ |       |
|  |  | Land tax | $ |       |
|  |  | Child care costs *(kindergarten, day care, etc)* | $ |       |
|  |  | Maintenance actually paid | $ |       |
|  |  | Instalment payments *(state purpose)* | $ |       |
|  |  |  |       |  |  |  |
|  |  |  |  |  |
|  |  | Electricity | $ |       |
|  |  | Gas | $ |       |
|  |  | Telephone | $ |       |
|  |  | Food | $ |       |
|  |  | Other general household expenses | $ |       |
|  |  | Car expenses *(registration, insurance, maintenance, fuel)* | $ |       |
|  |  | Fares | $ |       |
|  |  | Insurance Policies | $ |       |
|  |  | School fees and other schooling costs | $ |       |
|  |  | Clothing and shoes | $ |       |
|  |  | Medical and chemist expenses | $ |       |
|  |  | Entertainment | $ |       |
|  |  | Payments on court orders and fines | $ |       |
|  |  | Other expenses *(give details)* | $ |       |
|  |  |  |       |  |  |  |
|  |  |  |  |
|  | **TOTAL WEEKLY EXPENSES** | **$** |       |
|  |  |  |  |
|  |  |  |  |
| **3.** | **Are there any persons who contribute to paying your expenses? If so, who are they and how much do they contribute?** |  |  |
|  |       |  |  |

|  |  |  |
| --- | --- | --- |
| **4.** | **PROPERTY AND ASSETS** |  |
|  |  | Market value of house *(place of residence)* owned | $ |       |
|  |  | Amount owing on mortgage | $ |       |
|  |  | Net value of interest on house | $ |       |
|  |  | Market value of any other house or land owned | $ |       |
|  |  | Amount owing on mortgage | $ |       |
|  |  | Net value or interest in other house or land owned | $ |       |
|  |  | Market value of motor vehicle(s) |  |  |
|  |  |  | (a) Year |       |  | Make/Model |       |  | $ |       |
|  |  |  | (b) Year |       |  | Make/Model |       |  | $ |       |
|  |  | Amounts owing, under finance, on motor vehicles | (a) | $ |       |
|  |  |  | (b) | $ |       |
|  |  | Net value of interest(s) on motor vehicles | $ |       |
|  |  | Cash in banks, buildings societies, etc. | $ |       |
|  |  | Cash presently in your possession | $ |       |
|  |  | Value of other investments including shares, debentures, bonds | $ |       |
|  |  | Money owed to you *(state reason)* |  |  |
|  |  |  |       |  | $ |       |
|  |  |  |       |  | $ |       |
|  |  |  |       |  | $ |       |
|  |  |  |  |  |
|  |  | Value of interest in partnership or business *(including stock, goodwill, equipment, debtors)* | $ |       |
|  |  | State approximate re-sale value of furniture and personal goods | $ |       |
|  |  | Amount owing on these furniture and personal goods: | $ |       |
|  |  | Net value of interest | $ |       |
|  |  | Other assets *(give details)* | $ |       |
|  |  |  |       |  |  |  |
|  |  |  |  |  |
|  | **TOTAL NET VALUE** | **$** |       |
|  |  |  |  |  |
|  |  | Life insurance policies *(specify insurer, policy number, surrender value(s))* |  |  |
|  |  |  |       |  | $ |       |
|  |  |  |       |  | $ |       |
|  |  |  |       |  | $ |       |
|  |  |  |  |  |
|  | **TOTAL PROPERTY AND ASSETS** | **$** |       |
|  |  |  |  |  |
|  | **Are any assets jointly owned?** *(Give details)* |
|  |       |
|  |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **5.** | **DEBTS AND LIABILITIES *(Give details)****(hire purchase, leases, credit cards, credit contracts, personal loans, store accounts, guarantees being paid off, etc).* |  |  |  |
|  | Total amount due |  | $ |       |
|  | To: |       |  |  |  |
|  |  |  |  |  |
|  | Total amount due |  | $ |       |
|  | To: |       |  |  |  |
|  |  |  |  |  |
|  | Total amount due |  | $ |       |
|  | To: |       |  |  |  |
|  |  |  |  |  |
|  | **TOTAL OTHER DEBTS** |  | **$** |       |
|  |  |  |  |  |
|  |  |  |  |  |
| **6.** | **Have any of the above debts been jointly incurred with any other person?***(Give details)* |  |  |  |
|  |       |
|  |  |  |  |
|  |  |  |  |
| **7.** | **Give details of any other circumstances which affect your financial position***(e.g. number and age of dependants, marital status, health etc.* |
|  |       |

Dated:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*[Signature]*

**WARNING**

**AN INSTALMENT ORDER THAT IS MADE AS A RESULT OF A FALSE STATEMENT
MAY BE VARIED OR CANCELLED**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_