

**BC FAMILY MAINTENANCE AGENCY
Consent to Adjust Support**

Case ID:

Recipient's Name:

Payor's Name:

Adjustment Clause

Our support order or agreement dated _____ (order date) allows for us to adjust: (select all that apply)

- child support special expenses spousal support

Adjusted Amount

We confirm that we have reviewed our financial information and if applicable consulted the Child Support Guidelines, and agree that commencing _____ (start date): (select all that apply)

- Child support for _____ (number of children) child/ren is set at \$ _____ per _____ (frequency).
- Payor's proportional share of special expenses is _____ %.
- Recipient's proportional share of special expenses is _____ %.
- Spousal support is set at \$ _____ per _____ (frequency).

Annual Incomes

The adjusted amount is based on:

Recipient's

Annual Income: \$ _____
Year: _____

Payor's

Annual Income: \$ _____
Year: _____

Consent

We understand that:

- BCFMA will collect the adjusted amount of support as stated above.
- If either party disagrees at a later date with the adjusted amount, BCFMA may revert back to the original amount of support taking into account any previous step-downs and adjustments, unless both parties can agree to adjust to a different amount of support.
- We have the right to seek legal advice before agreeing to a new amount of support.

Recipient's Consent		Payor's Consent	
Signature	Date	Signature	Date