

**SCHEDULE "A"**

(04/07)

**IN THE PROVINCIAL COURT OF NEWFOUNDLAND AND LABRADOR**

**COURT CENTRE:** \_\_\_\_\_

**Court File No.** \_\_\_\_\_

**Claim for Special/Extraordinary Expenses**

**Name:** \_\_\_\_\_ **(Applicant/Respondent)**

**Date:** \_\_\_\_\_

Under section 7 of the *Child Support Guidelines Regulations*, NLR 40/98, I am claiming an additional amount to assist with the following expenses: **(Check all appropriate items and attach supporting documentation where available.)**

1.  Child care expenses incurred as a result of the custodial parent's employment, illness, disability or education or training for employment.

Monthly: \_\_\_\_\_ Yearly: \_\_\_\_\_

2.  The portion of medical and dental insurance premiums attributable to the child.

Monthly: \_\_\_\_\_ Yearly: \_\_\_\_\_

3.  Health related expenses that exceed insurance reimbursement by at least \$100.00 annually per illness or event, including orthodontic treatment; professional counselling provided by a psychologist, social worker, psychiatrist or other person; physiotherapy; occupational therapy; speech therapy; prescription drugs; hearing aids; orthotic and other similar devices, and, glasses and contact lenses, please specify: \_\_\_\_\_

Monthly: \_\_\_\_\_ Yearly: \_\_\_\_\_

4.  Extraordinary expenses for primary or secondary school education or for educational programs that meet the child's particular needs.

Monthly: \_\_\_\_\_ Yearly: \_\_\_\_\_

5.  Expenses for post secondary education.

Monthly: \_\_\_\_\_ Yearly: \_\_\_\_\_

6.  Extraordinary expenses for extracurricular activities.

Monthly: \_\_\_\_\_ Yearly: \_\_\_\_\_

I am claiming \$ \_\_\_\_\_, taking into account subsidies, benefits or income tax deductions or credits relating to the expense.

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