

GENERAL INFORMATION

Date: _____

Member's First Name: _____ Member's Last Name: _____

Spouse's First Name: _____ Spouse's Last Name: _____

Spouse's Contact Information

Home Address (Street): _____

City/Town: _____ Postal Code: _____

Home Telephone Number: _____ Cell Phone Number: _____

Office Address (Street): _____

City/Town: _____ Postal Code: _____

Telephone Number: _____ Fax Number: _____

Email address: _____

INCOME

1. INCOME FROM THE PROVINCE OF PRINCE EDWARD ISLAND

(a) List all income received by your spouse from any ministry, agency, board, or commission of the Province of Prince Edward Island in the past 12 months and expected to be received within the next 12 months.

PAST 12 MONTHS

DESCRIPTION OF INCOME	SOURCE	AMOUNT
<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>

NEXT 12 MONTHS

DESCRIPTION OF INCOME	SOURCE	AMOUNT
<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>

(b) List all benefits received by your spouse as a result of a contract with the Government of Prince Edward Island in the past 12 months and expected to be received within the next 12 months.

PAST 12 MONTHS

SOURCE	SUBJECT OF CONTRACT	AMOUNT
<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>

NEXT 12 MONTHS

SOURCE	SUBJECT OF CONTRACT	AMOUNT
<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>

2. INCOME FROM ALL OTHER SOURCES

List all other income received by your spouse in the past 12 months and expect to be received within the next 12 months.

PAST 12 MONTHS

DESCRIPTION OF INCOME	SOURCE	AMOUNT
_____	_____	_____
_____	_____	_____
_____	_____	_____

NEXT 12 MONTHS

DESCRIPTION OF INCOME	SOURCE	AMOUNT
_____	_____	_____
_____	_____	_____
_____	_____	_____

ASSETS

1. REAL PROPERTY INTERESTS

(a) List all real estate, wherever located, in which your spouse has an interest, including family residences and recreational property, whether or not your spouse is registered as owner. Identify the properties used primarily for residential or recreational purposes by you.

PID	ADDRESS	% INTEREST	EST. TOTAL PROPERTY VALUE	RESIDENTIAL/RECREATIONAL	
_____	_____	_____	_____	<input type="checkbox"/> Residential	<input type="checkbox"/> Recreational
_____	_____	_____	_____	<input type="checkbox"/> Residential	<input type="checkbox"/> Recreational
_____	_____	_____	_____	<input type="checkbox"/> Residential	<input type="checkbox"/> Recreational
_____	_____	_____	_____	<input type="checkbox"/> Residential	<input type="checkbox"/> Recreational

(b) List amounts owing to your spouse under a mortgage.

PID	NAME OF MORTGAGOR	ADDRESS OF MORTGAGOR	AMOUNT OWING
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

(c) State any properties on which your spouse holds an option.

PID	REGISTERED OWNER'S NAME	REGISTERED OWNER'S ADDRESS	VALUE OF OPTION
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

2. BANK AND OTHER DEPOSITS not held within RRSPs, RESPs, or TFSAs

List current balances that your spouse has on deposit with a chartered bank, trust company or other financial institution that is lawfully entitled to accept deposits.

FINANCIAL INSTITUTION NAME	INSTITUTION ADDRESS	TYPE OF ACCOUNT	AMOUNT
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

3. GOVERNMENT SECURITIES not held within RRSPs, RESPs, or TFSAs

List all investments or securities of fixed value issued or guaranteed by any level of government or any agency of such governments and held by your spouse, e.g. Treasury Bills, Government Bonds.

DESCRIPTION OF BOND/SECURITY	VALUE
_____	_____
_____	_____
_____	_____
_____	_____

4. GUARANTEED INVESTMENT CERTIFICATES AND SIMILAR INSTRUMENTS not held within RRSPs, RESPs, or TFSAs

List all guaranteed investment certificates (GICs) and all other financial instruments issued by banks or trust companies and held by your spouse, e.g. bank mortgage funds.

DESCRIPTION OF INSTRUMENT	NAME OF ISSUER	ADDRESS	VALUE
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

5. MUTUAL FUNDS not held within RRSPs or RESPs

(a) List all your spouse's mutual funds, indicating which funds are open-ended and which are closed. Please attach broker's statement indicating which funds are closed.

NAME OF FUND	ADDRESS	# OF UNITS	VALUE OF SHARES	OPEN-ENDED or CLOSED
_____	_____	_____	_____	<input type="checkbox"/> Open-ended <input type="checkbox"/> Closed
_____	_____	_____	_____	<input type="checkbox"/> Open-ended <input type="checkbox"/> Closed
_____	_____	_____	_____	<input type="checkbox"/> Open-ended <input type="checkbox"/> Closed
_____	_____	_____	_____	<input type="checkbox"/> Open-ended <input type="checkbox"/> Closed

(b) List mutual funds held by your spouse which are limited to investment in one industry or one sector of the economy and identify the industry or sector.

NAME OF FUND	INDUSTRY OR SECTOR
_____	_____
_____	_____
_____	_____
_____	_____

6. SHARES AND OTHER INTERESTS IN PUBLIC COMPANIES not held within RRSPs, RESPs, or TFSAs

List all shares and other interests in public companies held by your spouse, e.g. warrants.

NAME OF PUBLIC COMPANY	NUMBER OF SHARES	VALUE
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

7. PRIVATE BUSINESS INTERESTS

List all private business interests including shares or debt interests in sole proprietorships, partnerships, joint ventures, syndicates, cooperatives or similar commercial enterprises held by your spouse. Do not include the private companies listed under Question #2 of General Information in Schedule 1-Member.

NAME OF BUSINESS	DESCRIPTION OF BUSINESS	DESCRIPTION OF INTEREST	VALUE OF INTEREST
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

8. REGISTERED RETIREMENT SAVINGS PLANS, REGISTERED EDUCATION SAVINGS PLANS, and TAX FREE SAVINGS ACCOUNTS

List all RRSPs, RESPs, and TFSAs owned by your spouse. Please attach a statement(s) from your fund manager(s) or trustee(s) indicating which plans are self-administered and which are not self-administered.

SELF-ADMINISTERED:

ASSETS	NAME OF TRUSTEE	ADDRESS OF TRUSTEE	VALUE	RRSP, RESP, or TFSA?
_____	_____	_____	_____	<input type="checkbox"/> RRSP <input type="checkbox"/> RESP <input type="checkbox"/> TFSA
_____	_____	_____	_____	<input type="checkbox"/> RRSP <input type="checkbox"/> RESP <input type="checkbox"/> TFSA
_____	_____	_____	_____	<input type="checkbox"/> RRSP <input type="checkbox"/> RESP <input type="checkbox"/> TFSA
_____	_____	_____	_____	<input type="checkbox"/> RRSP <input type="checkbox"/> RESP <input type="checkbox"/> TFSA
_____	_____	_____	_____	<input type="checkbox"/> RRSP <input type="checkbox"/> RESP <input type="checkbox"/> TFSA

NOT SELF-ADMINISTERED:

ASSETS	NAME OF TRUSTEE	ADDRESS OF TRUSTEE	VALUE	RRSP, RESP, or TFSA?
_____	_____	_____	_____	<input type="checkbox"/> RRSP <input type="checkbox"/> RESP <input type="checkbox"/> TFSA
_____	_____	_____	_____	<input type="checkbox"/> RRSP <input type="checkbox"/> RESP <input type="checkbox"/> TFSA
_____	_____	_____	_____	<input type="checkbox"/> RRSP <input type="checkbox"/> RESP <input type="checkbox"/> TFSA
_____	_____	_____	_____	<input type="checkbox"/> RRSP <input type="checkbox"/> RESP <input type="checkbox"/> TFSA
_____	_____	_____	_____	<input type="checkbox"/> RRSP <input type="checkbox"/> RESP <input type="checkbox"/> TFSA

9. PENSION RIGHTS: *List all pension rights belonging to your spouse.*

NAME OF ORGANIZATION OBLIGATED TO PAY PENSION	ADDRESS OF ORGANIZATION OBLIGATED TO PAY PENSION
_____	_____
_____	_____
_____	_____
_____	_____

10. LIFE INSURANCE POLICIES: *List all life insurance policies in your spouse's name.*

INSURER	FACE VALUE OF POLICY	BENEFICIARY
_____	_____	_____
_____	_____	_____
_____	_____	_____

11. ANNUITIES: *List all annuities received by your spouse.*

DESCRIPTION	NAME OF TRUSTEE	ADDRESS OF TRUSTEE	AMOUNT
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

12. HOUSEHOLD AND PERSONAL PROPERTY

List all motor vehicles and personal property of a household, educational, recreational, social or aesthetic nature owned by your spouse.

DESCRIPTION OF PROPERTY

VALUE

13. OTHER ASSETS: *List all other assets owned by your spouse and not previously stated, e.g. Registered Home Ownership Savings Plan, Scholarship Funds.*

DESCRIPTION OF ASSET

VALUE

LIABILITIES

1. MORTGAGES: *List all amounts owing by your spouse under a mortgage.*

PID	ADDRESS OF PROPERTY	NAME OF MORTGAGEE	ADDRESS OF MORTGAGEE	AMOUNT OWING
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

2. UNPAID REALTY TAXES: *List all unpaid realty taxes owing by your spouse.*

PID	ADDRESS OF PROPERTY	PERIOD FOR WHICH TAX UNPAID	AMOUNT OWING
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

3. LOANS: *List all loans other than mortgages in respect of which your spouse owes money.*

CREDITOR	ADDRESS	AMOUNT OWING
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

4. GUARANTEES: *List all guarantees for which your spouse is responsible.*

CREDITOR	ADDRESS	PRINCIPAL DEBTOR	ADDRESS	AMOUNT GUARANTEED
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

5. CREDIT CARDS: *List all credit cards held by your spouse other than those for which the balance is paid in full monthly.*

CREDIT CARD	ADDRESS OF ISSUER	AMOUNT OUTSTANDING
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

6. UNPAID INCOME TAX: *List all unpaid income taxes owing by your spouse and the status of each account.*

YEAR	AMOUNT	STATUS OF AMOUNT
_____	_____	_____
_____	_____	_____
_____	_____	_____

7. SUPPORT OBLIGATIONS: *List all support obligations for which your spouse is responsible.*

PERSON FOR WHOM SUPPORT IS PAID	ADDRESS	AMOUNT OF OBLIGATION
_____	_____	_____
_____	_____	_____
_____	_____	_____

8. OTHER LIABILITIES: *List all of your spouse's other liabilities not previously stated.*

DESCRIPTION OF LIABILITY	NAME OF LIABILITY OWNER	ADDRESS OF LIABILITY OWNER	AMOUNT
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

9. LIABILITIES NOT TO BE DISCLOSED TO THE PUBLIC: *State the reason why any liability listed herein should remain confidential and not be publicly disclosed.*