

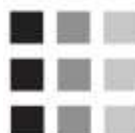
**INCOME AND EXPENDITURE FORM**

Account:

Name:

<b>Daytime No.:</b>		<b>No. of People in home:</b>	
<b>Eve/Home No.:</b>		<b>No. of Adults:</b>	
<b>Mobile No.:</b>		<b>No. of Children:</b>	
		<b>No. of Bedrooms:</b>	
<b>Employer(s) :</b>		<b>Job title(s) :</b>	<b>Work start date(s):</b>
<b><u>Your Payment Offer</u></b>			
£			

<b>Income (use only monthly figures)</b>		<b>Expenditure (use only monthly figures)</b>	
Net Wages/Salary		Mortgage	
Net Wages/Salary (partner)		2 <sup>nd</sup> Mortgage/Secured Loan	
Job Seekers Allowance		Council Tax	
Income Support		Buildings Insurance	
Working Family Tax Credit		Ground Rent/Service Charge	
Child Tax Credit		Phone inc mobiles	
Child Benefit		Internet	
Maintenance		Housekeeping	
Retirement Pension		TV Licence	
Invalidity Sickness Benefit		School/Work Meals	
Other Income		Clothing	
Bonuses		Prescriptions	
Non Dependant's contribution		Water	
Income from Lodgers		Gas	
		Electric	
<b>Total Income (A)</b>		Other home fuel	
<b>In the space below please state the reason for the arrears or information you think relevant.</b>		Maintenance	
		Child Minder/Nursery Fees	
		Credit Card Payments	
		Loan Payments	
		Car Loan Payments/Hire Purchase	
		Debt Management Plan	
		Pensions/Life Cover	
		Court Fines	
	Other Financials <i>(please specify)</i>		



	Travel Fares	
	Car Insurance	
	Car Fuel/Expenses	
	MOT/Road Tax	
	Satellite/Cable TV	
	Social	
	Alcohol/Tobacco	
<b>Do you have a Current Bank Account with</b>	Lottery	
	Other	
<b>Direct Debit Facility? YES/NO</b>		
Is your Bank Account Overdrawn? <b>YES/NO</b>	Savings	
If <b>YES</b> , by how much? <b>£</b>	<b>Total Outgoings (B)</b>	
<b>Financial Analysis</b>		
<b>Total Income (A)</b>		
<b>Less Expenses/Outgoings (B)</b>		
<b>Disposable Income (A-B)</b>		
<b>SIGNED</b>		<b>DATE</b>
<i>I/We believe that the facts stated on this form are true.</i>		

