

**ST. VINCENT DE PAUL SOCIETY  
ST. THOMAS AQUINAS PARISH CONFERENCE  
Confidential Case Record**

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

Name: \_\_\_\_\_ (Last, First) \_\_\_\_\_ (Referred by)

Address: \_\_\_\_\_ Need/Emergency: \_\_\_\_\_  
Type

Telephone No.: \_\_\_\_\_ Amount(s) Past Due: \$ \_\_\_\_\_  
\$ \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Account No.: \_\_\_\_\_

If for rent: \_\_\_\_\_ Landlord \_\_\_\_\_ Address \_\_\_\_\_ Tel. No. \_\_\_\_\_

Other Members of Household	Relationship	Age

Monthly Financial Obligations		Monthly Net Income – All Sources	
Rent	\$	Employment	\$
PNM	\$	SS Benefits	\$
Water	\$	SS Supplement Income (SSI)	\$
Gas or Propane	\$	TANF (Temporary Assistance For Needy Families)	\$
Phone(s)	\$	Child Support	\$
Cable	\$	Food Stamps	\$
Car payment	\$	Housing (HUD - Sec. 8)	\$
Insurance	\$	Other	\$
Gasoline	\$		\$
Groceries	\$		
Credit Cards	\$		
<b>TOTAL</b>	<b>\$</b>	<b>TOTAL</b>	<b>\$</b>

SVP

Identify disability or other circumstances causing need/emergency \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Certification/Authority to Release. The above information is correct to the best of my knowledge and belief. I hereby give SVDP authority to contact and obtain account information from the vendors for which I am requesting assistance.

\_\_\_\_\_  
Applicant Signature

	Yes	No	
Are you a member of a Church? Catholic?			If "No", invite to visit St. Thomas
Registered in the Parish?			If "No", provide form or invite to call 892-1511
Married in Catholic Church?			
Children Baptized?			
Children attending CCD?			If "No", invite to call 892-1497

**REFERRALS:**

Provided client with a list of agencies:      Yes \_\_\_\_\_      No \_\_\_\_\_

**COMMENTS AND RECOMMENDATIONS BY VINCENTIANS:**

Describe current crisis in detail and provide other pertinent information:


\_\_\_\_\_  
Vincientian Signature

\_\_\_\_\_  
Vincientian Signature

Miles Traveled \_\_\_\_\_

Time Spent \_\_\_\_\_

***Do not write below this line – For office use only***

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<b>Call to PNM</b>	
<b>Call to Water Co.</b>	
<b>Call to Gas or Propane Co.</b>	
<b>Call to Landlord</b>	

***Conference Board Action***

Type of Assistance	Amount of Check
<b>Approved by:</b>	<b>Denied by:</b>
1)	1)
2)	2)