## **INCOME AND EXPENDITURE FORM**

Account: Name:

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

£

Income (use only monthly figures) Expenditure (use only monthly	
Net Wages/Salary	Mortgage
Net Wages/Salary	2 <sup>nd</sup> Mortgage/Secured Loan
(partner)	
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	Water
contribution	
Income from Lodgers	Gas
	Electric
Total Income (A)	Other home fuel
In the space below please state	Maintenance
the reason for the arrears or	Child Minder/Nursery Fees
information you think relevant.	Credit Card Payments
information you timik relevant.	Loan Payments
	Car Loan Payments/Hire
	Purchase
	Debt Management Plan
	Pensions/Life Cover
	Court Fines
	Other Financials (please specify)



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## Paratus AMC

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



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