



## Income and Expenditure Form

Please return to Accounts Receivable at the above address along with a copy of your last three months bank statements

Reference:

Phone Number: \_\_\_\_\_

Number of People in your household: \_\_\_\_\_

Number of adults (Over 18): \_\_\_\_\_

Number of children and their ages: \_\_\_\_\_

The money you have coming in each week after tax	Please indicate (W) Weekly or (M) Monthly	The money you spend each week and what you spend it on	Please indicate (W) Weekly or (M) Monthly
Your wages/salary at: .....	W / M	Mortgage / Rent you have to pay	W / M
		Payments towards rent arrears	W / M
Your partners wages/salary at: .....	W / M	Buildings & contents insurance	W / M
		Life Assurance & Pension Payments	W / M
Contributions from other household members	W / M	Council Tax	W / M
Housing Benefit	W / M	Payments towards Council Tax arrears	W / M
Income Support (IS) or Carers Allowance (CA)	W / M	Water	W / M
Jobseekers Allowance (JSA)	W / M	Ground Rent or Service Charge	W / M
Employment Support Allowance (ESA)	W / M	Gas	W / M
ESA Support Group / work-related activity group	W / M	Electric	W / M
Universal Credit (UC)	W / M	TV Licence (please explain if not the standard charge of £2.82pw / £12.25pm)	W / M
Working Tax Credit (WTC)	W / M	Mobile Phone	W / M
Child Tax Credit (CTC)	W / M	Home Phone & Internet	W / M
Child Benefit (CB)	W / M	SKY or other TV provider	W / M
Disability Living Allowance (DLA)	W / M	Travelling Expenses	W / M
Personal Independence Payment (PIP)	W / M	Car Loan	W / M
Your State Pension	W / M	Car Insurance	W / M
Your partners State Pension	W / M	Car Tax	W / M
Other pensions (please give details)	W / M	Petrol	W / M
		Car Repairs & MOT	W / M
Investments/Savings	W / M	Food	W / M
Maintenance Payments (Please give details)	W / M	Meals at Work or School	W / M
Discretionary Housing Payment (DHP)	W / M	Laundry & Dry Cleaning	W / M
Student loans / grants	W / M	Child Maintenance	W / M
Any other income (Please give details)	W / M	Cigarettes	W / M
		Clothing	W / M
Total you have coming in a week (income)	£ W / M	Child Care Costs	W / M
Amount you spend a week (outgoings)	£ W / M	Pets	W / M
The money you have left	£ W / M	Medical & Dental Costs	W / M
<b>Your offer of repayment</b>	£ W / M	Entertainment (please explain)	W / M
I confirm the figures provided are true and correctly stated		Others (please give details)	W / M
<b>Your Signature:</b> .....			W / M
<b>Date:</b> .....			W / M
<b>Other Debts, Arrears and Loans</b> Who you owe the money to	<b>Total amount you owe</b>	<b>Date you will have repaid it</b>	<b>Amount you pay (Weekly or Monthly)</b>
			£ W / M
			£ W / M
			£ W / M
			£ W / M

