



INCOME AND EXPENDITURE STATEMENT

Personal Details			
Name:		Student ID	
Address:			
Family Composition:			
<input type="checkbox"/> Single	<input type="checkbox"/> Independent	<input type="checkbox"/> Home with Parents	
<input type="checkbox"/> Couple	<input type="checkbox"/> Dependant Spouse	<input type="checkbox"/> Dependant Children No.: _____	
<input type="checkbox"/> Sole Parent		<input type="checkbox"/> Dependant Children No.: _____	

Income	
Source of Income	Amount per fortnight \$
Centrelink: (list payments)	
Salary or Wages	
Child Support Received	
Scholarships	
Investment Income	
Board/Rent received	
Other	
Total all Income	

Savings	
Type (cash, savings a/c, investments etc)	
	\$
	\$
	\$
	\$
Total all Savings	\$

Debts		
Include all outstanding debts: mortgage, personal loans, credit cards, Rental Contracts, Centrelink or tax debt, debts to family and friends, unpaid utility accounts, other overdue bills		
Creditor:	Total Debt Owning:	Fortnightly Repayment \$
Mortgage		
Credit Card		
Rental Contract		
Personal Loan		
Total Debt Owning	\$	
Total Fortnightly Payments		\$

Expenditure					
1. Housing & Utilities	Amount per Qtr	Amount per fortnight	6. Children	Amount per Qtr	Amount per fortnight
Rent/Board	\$	\$	School Fees	\$	\$
Council Rates	\$	\$	Books, Materials, excursions	\$	\$
Emergency Services Levy	\$	\$	Uniforms	\$	\$
Water Rates	\$	\$	School Lunches	\$	\$
House/Contents Insurance	\$	\$	Activities e.g. sport fees	\$	\$
Electricity	\$	\$	Child Care fees	\$	\$
Gas	\$	\$	Pocket Money	\$	\$
Telephone - Home	\$	\$	Child Support Paid	\$	\$
- Mobile	\$	\$			
Internet	\$	\$		Total 6	\$
Home Maintenance & Repairs	\$	\$	7. Medical		
	Total 1	\$	Doctor Fees/Medicare Gap	\$	\$
2. Household			Dentist	\$	\$
Groceries	\$	\$	Optometrist, Chiro, Physio etc	\$	\$
Lunches	\$	\$	Chemist	\$	\$
Household items – purchase/repair	\$	\$	Private Health Insurance	\$	\$
Pets – food & registration	\$	\$	Life/Funeral Insurance	\$	\$
- Veterinarian	\$	\$			
	Total 2	\$	Ambulance Cover	\$	\$
3. Personal Care				Total 7	\$
Clothing/Shoes/Accessories	\$	\$	8. Recreation/Entertainment		
Hair Care	\$	\$	Takeaway food, dining out	\$	\$
Laundry/Dry Cleaning	\$	\$	Cigarettes/Tobacco	\$	\$
Other	\$	\$	Alcohol	\$	\$
	Total 3	\$	Newspapers/Magazines	\$	\$
4. Transport			Gambling e.g. X-lotto, pokies	\$	\$
Petrol	\$	\$	DVD Hire, pay TV	\$	\$
Car Registration	\$	\$	Sports/Gym fees	\$	\$
Car Insurance	\$	\$	Cinema, theatre, concerts	\$	\$
Car Service and Repairs	\$	\$	Holidays	\$	\$
Driver's License	\$	\$	Other outings	\$	\$
RAA membership	\$	\$	Gifts (birthday/Christmas)	\$	\$
Car Parking	\$	\$	Other	\$	\$
Public Transport	\$	\$		Total 8	\$
Taxi	\$	\$	9. Savings		
	Total 4	\$	Regular Savings	\$	\$
5. Self & Partner Education			Voluntary Superannuation	\$	\$
Fees	\$	\$		Total 9	
Books/stationery/photocopying	\$	\$	10. Debt Payments		
Uniforms, other	\$	\$	Mortgage Payment (page 1)		\$
	Total 5	\$	Total fortnightly debt payment (page 1)		\$
				Total 10	\$
Total Expenses 1 to 5 (a)		\$	Total Expenses 6 to 10 (b)		\$

Net Position			
	Total Income	\$	Per fortnight
/less	Total Expenses (a)	\$	Per fortnight
/less	Total Expenses (b)	\$	Per fortnight
=	Surplus/Deficit	\$	Per fortnight

Declaration			
I declare that the information in this statement is complete and accurate			
Signature:		Date:	