

Personal Budget Form



NAME: _____ MORTGAGE ACCOUNT NO: _____

ADDRESS: _____

TELEPHONE NO: _____ MOBILE NO: _____

NUMBER OF PEOPLE IN HOUSEHOLD: _____ AGES OF ADULTS: _____ AGES OF CHILDREN: _____ PETS: _____

NET INCOME	MONTHLY
WAGES/SALARY	_____
WAGES/SALARY - PARTNER	_____
OVERTIME/BONUS	_____
MAINTENANCE	_____
UNEMPLOYED BENEFIT	_____
INCOME SUPPORT	_____
FAMILY CREDIT	_____
RETIREMENT/WORK PENSION	_____
CHILD BENEFIT	_____
NON-DEPENDANTS CONTRIBUTION	_____
SAVINGS	_____
OTHER (Please list opposite)	_____
TOTAL	_____

EXPENSES	MONTHLY	PRIORITY DEBTS	MONTHLY
MORTGAGE	_____	RENT ARREARS	_____
SECOND MORTGAGE	_____	COUNCIL TAX ARREARS	_____
RENT	_____	WATER RATE ARREARS	_____
COUNCIL TAX	_____	ELECTRIC ARREARS	_____
WATER RATES	_____	GAS ARREARS	_____
TELEPHONE	_____	ENDOWMENT POLICY ARREARS	_____
TV LICENCE	_____	COURT FINE	_____
GAS	_____	TELEPHONE ARREARS	_____
ELECTRICITY	_____	<i>Please provide proof of the above</i>	_____
OTHER FUEL	_____	TOTAL	_____
GROUND RENT	_____	NON PRIORITY DEBTS	MONTHLY
BUILDINGS INSURANCE	_____	CREDIT CARDS, ETC	_____
PENSION/LIFE COVER	_____	<i>Please provide balance and payment</i>	_____
HOUSEKEEPING	_____	_____	_____
MAINTENANCE	_____	_____	_____
BUS FARES	_____	_____	_____
SCHOOL MEALS	_____	_____	_____
CHILD MINDER	_____	_____	_____
CAR	_____	_____	_____
TAX/EXPENSES/INSURANCE	_____	_____	_____
CLOTHING	_____	_____	_____
PRESCRIPTIONS	_____	_____	_____
SOCIAL ACTIVITIES	_____	_____	_____
LOTTERY	_____	_____	_____
MOT - AGE OF CAR	_____	_____	_____
SAVINGS	_____	_____	_____
TOBACCO	_____	_____	_____
OTHER (PLEASE LIST)	_____	_____	_____
TOTAL	_____	TOTAL	_____
DISPOSABLE INCOME			

This is a true and accurate record of my/our financial position as at

signed

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signed