



Personal Income & Expenditure

Number of individuals in household: Adults _____ Children _____

I certify that all information provided on this Income & Expenditure is an accurate reflection of my personal situation.

Signed _____ Date _____

Signed _____ Date _____

| Step 1 Income | €Income / monthly |
|--|-----------------------|
| Wages or salary (after net deductions) | |
| Partner's wages or salary (net) | |
| Tips or commission | |
| Other earnings net | |
| Maintenance/Child support | |
| Own/partners pension | |
| Social welfare | |
| Boarders / Lodgers | |
| Other income | |
| Other income | |
| Total Income | € _____ (Box 1) |



| Step 2 COSTS - Housing | € Outgoings / monthly |
|----------------------------------|------------------------------|
| Mortgage payment | |
| Rent | |
| Top up / other secured loans | |
| Local Property Tax | |
| Service or water charges | |
| Building / home & contents cover | |
| Life protection cover | |
| Gas | |
| Electricity | |
| Other fuel costs | |
| Waste charges | |
| Insurance | |
| Other | |
| Other | |
| Total Housing Costs | € _____ (Box 2) |



| Step 3 COSTS - Priority Payments | € Outgoings / monthly |
|--|------------------------------|
| Telephone (including mobiles) | |
| Maintenance Payments | |
| Court Fines | |
| Pension Payments | |
| Hire Purchase | |
| TV License | |
| Broadband / cable | |
| Instalment Orders | |
| Other | |
| Other | |
| Total Priority Pmts | € _____ (Box 3) |



| Step 4 COSTS - Regular | € Expenses / monthly |
|------------------------------------|-----------------------------|
| Food & Drink / Housekeeping | |
| Newspapers and magazines | |
| Travel & Fares | |
| Car Tax | |
| Petrol or Diesel | |
| Car Insurance | |
| Car Repair and maintenance | |
| Childcare (including pocket money) | |
| School meals | |
| Pet expense (vet, pet food) | |
| Cigarettes | |
| Clothes & Shoes | |
| Household items | |
| Health costs (Insurance) | |
| Back to school costs | |
| Other | |
| Total Regular Costs | € _____ (Box 4) |



| Step 5 Other Expenses | € Other expenses / monthly |
|---|-----------------------------------|
| Charities | |
| Entertainment / Eating Out | |
| Savings / Emergency fund | |
| Health club, courses, professional fees | |
| Gifts (birthdays, Christmas) | |
| Priority debts/ liabilities | |
| Rent arrears | |
| Mortgage arrears | |
| Electricity arrears | |
| Fuel / heating arrears | |
| Other | |
| Other | |
| Total Other Costs | € _____ (Box 5) |



| | |
|--|--------------|
| Step 6 SUMMARY | |
| Total income (Box1) | |
| | |
| Housing costs (Box 2) | |
| Priority (Box 3) | |
| Everyday expenditure (Box 4) | |
| Other Expenditure (Box 5) | |
| | |
| Total Outgoings (Add Boxes 2, 3, 4, 5) | € (Box 6) |
| Monthly Net Disposable Income (Subtract box 6 from Box 1) | |