

INCOME & EXPENSES SHEET

*Net=after tax/insurance *Gross=before tax/insurance

(Please enter **all** amounts **either weekly or monthly** not a combination of both)

NAME _____

INCOME	Client-Weekly/Monthly	Partner-Weekly/Monthly
Wages/Salary		
Please specify Net*/Gross*		
JSA/ESA/Income Support		
Incapacity Benefit Inc.		
Child Tax Credits		
Working Tax Credits		
Disability Living Allowance		
Retirement Pension		
Occupational Pension		
Pension Credit		
Child Benefits		
Maintenance/CSA Payment		
Any Other Income/Benefits (specify)		
Total		

Joint Total _____

EXPENSES	Weekly/Monthly	Total Arrears (If Any)
Rent (after Housing Benefit)		
Mortgage		
Endowment Policy		
Second Mortgage/Secured Loan		
Buildings/Contents Insurance		
Life Insurance/Pension		
Council Tax (after Council tax benefits)		
Anglian Water		
Essex & Suffolk		
Gas		
Electricity		
Oil/Coal		
Housekeeping/Food		
Telephone/Mobile		
TV/DVD Rental		
TV Licence		
Travel (inc. Road tax, insurance etc.)		
Other Travelling Expenses (i.e. Public Transport)		
School Meals		
Clothing		
Prescriptions		
Child Minding		
Child Maintenance		
Court Fines		
Other 1		
Other 2		
Other 3		
Total		

Total-Income less Expenses _____

Please Note:- To convert weekly amounts into monthly multiply by 52 & then divide by 12