

**SECTION IV:**

**YOUR FINANCIAL SNAPSHOT**

**Monthly Income**

SOURCE	AMOUNT
Employment/unemployment Income	
Social Assistance (Food stamps, Welfare, etc.)	
Other (Alimony, Child Support, etc.)	
<b>TOTAL:</b>	

**Monthly Expenses (Please be as specific as possible)**

Type	Owed to	Monthly Amount	Remaining Balance
Rent/Mortgage			
Auto			
Utilities: Gas			
Electric			
Water			
Phone			
Credit Cards			
Insurance(s)			
Other Expenses-list all			
	<b>TOTALS:</b>		

**Assets**

TYPE	VALUE
Bank Accounts	
Trust Accounts/Stocks/Bonds	
Property	
Life Insurance (Cash Value)	
Automobile(s)	
Personal Property	
other	
other	

The information I have given is accurate to the best of my knowledge. I give DVBC permission to make inquiries as needed in order to determine if they are able to assist me.

Name: \_\_\_\_\_ Date: \_\_\_\_\_