

STATEMENT OF HOUSHOLD INCOME & EXPENDITURE

NAME: _____

MEMBER NUMBER: _____

WEEKLY/MONTHLY:

Please ensure that the **total household Income and Expenditure** is detailed below:

(A) – Own Income

(B) – Spouse/Partner/Other, if applicable

Income:	*Wages/Salary (include Self Employed Income)	*Part Time Work (Average)	*Social Welfare Payments	*Pensions	*Child Benefit	Other Income**
(A)	€	€	€	€	€	€
(B)	€	€	€	€	€	€
TOTAL	€	€	€	€	€	€

*See Overleaf for Proof of Income required.

Expenditure	€	Childcare Costs	€
Rent / Mortgage		Savings	
Home Insurance		Clothing / Footwear	
Repairs & Maintenance		Medical Costs	
Electricity/Gas Usage		Living/Social expenses	
Heat / Fuel Costs		Other Expenditure**	
Waste Charges			
Water Charges			
Property Tax			
Food / Housekeeping Costs			
TV / Entertainment		TOTAL EXPENDITURE €	
Telephone / Mobile Phone			
Life Insurance / Pension		Total Income	
Car Insurance/Tax		Less Expenditure	
Transport Costs			
Educational Costs		Available Income	

Priority Payments ***	Payments €	Arrears €
Rent / Mortgage Arrears		
Electricity Arrears		
Fuel / Heating Arrears		
Loans Secured on Family Home		
Other Secured Loans		
Instalment Orders / Court Fines		
Family Maintenance		
Other Priority Payments**		
TOTAL PRIORITY PAYMENTS		

**Other Income

**Other Expenditure

***Other Priority Payments

***Proof of all household income required :**

e.g. 3 most recent payslips

Including any part-time work

Social Welfare benefits

Child Benefit

Child Maintenance

Rental Income

Self-employed - *Up to date set of Accounts*

Bank Statements required :

3 months up-to date Current A/c Bank Statements

Mortgage Statements

Credit Card Statements

Statements of any other loans

Statements of Savings Accounts.