



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)	