

Date

### Budget Sheet

<b>About you</b>	<b>Invoice number</b>	
Your name		
If your partner is living with you, give his / her name		
Your National Insurance number.		
Your date of birth		
Number of adults in the house		
Number of children in the house under 18		

Who do you work for?		Work address
Work telephone number		
Your pay number		
Tick here if you are self-employed	(/)	Post Code
If your partner lives with you, tell us here where he/she works		Work address
Partner's work telephone number		
Partner's pay number		
Tick here if your partner is self employed	(/)	Post Code

## Tell us here about your Income and Outgoings

Money coming in		Monthly? (✓)	Weekly? (✓)	Money going out		Monthly? (✓)	Weekly? (✓)
Your wage after deductions	£			Mortgage	£		
Partner's wage after deductions	£			Rent	£		
Working Tax Credit	£			Gas or other fuel	£		
Child Tax Credit	£			Electricity	£		
Child Benefit	£			Water rates	£		
Child Maintenance	£			Council Tax	£		
Work Pensions	£			Food/household	£		
State Pensions	£			Telephone	£		
Income Support	£			Mobile	£		
Job Seekers' Allowance	£			Building/Contents insurance	£		
Incapacity Benefit	£						
Sickness Benefit	£			Building repairs/maintenance	£		
Disability Benefit	£						
Board from lodgers/family	£			Bus & rail fares	£		
Total savings	£			Child maintenance	£		
Other income or benefits	£			Childcare	£		
If you have other debts, please give the full amount of each debt, not just the monthly / weekly repayments. Please write any other comments here or attach a separate sheet.				Clothing	£		
				Secured loans e.g. on property	£		
				Unsecured loans	£		
				Court fines	£		
				Health expenses	£		
				Car costs	£		
				TV rental/licence	£		
				TV satellite/cable	£		
				Other spending (please tell us the total and then list what your 'other spending' is on a separate sheet)	£		

What amount can you offer to pay?	£	Monthly? (✓)	Weekly? (✓)
What date will you pay the first payment?			
Please start paying on this date, even if you are still waiting for a reply to this form			

Please return this form when completed to **Leeds City Council, Sundry Income, PO Box 60, Leeds LS2 8JR**. We will look at the information you provide on the form and let you know whether we can accept your offer. We will ring you if we can, or write to you.

<b>Declaration - I confirm that the information I have given on this form is correct.</b>		
Signature	Daytime phone number.	
	Mobile phone number.	
Date	Email address	

*In line with Data Protection law, we may use information you give us to prevent or detect fraud or other crimes. We may also share it with other Council services or public organisations if they need it in order to carry out their legal duties.*