

# FINANCIAL REVIEW

<b>Client name:</b>	<b>Date completed:</b>
<b>Casebook reference:</b>	<b>Adviser initials:</b>

In order to produce a financial statement for you we will need to have the following documentation.

Documents Required	Required	Provided
<b>IDENTITY VERIFICATION</b> Adviser to list specific document required:		
<b>Bank Statements</b> - for the last 3 months for ALL of your accounts.		
<b>Wage Slips</b> – for the last 3 months.		
<b>Benefit letters</b> – bring the latest benefit letters for <b>ALL</b> the benefits you receive. This includes Income Support/Pension Credit/JSA/ESA/Housing Benefit/Council Tax Support/DLA/PIP/Tax Credits/Child Benefit and any other benefits.		
<b>Council Tax bill</b>		
<b>Housing Association rent statement</b>		
<b>Details of mortgage</b>		
<b>Utility Bills</b> – the latest statements. Gas/Electricity/Water		
<b>Telephone</b> – details of telephone bills.		
<b>Details of ALL of your debts</b> (copies of credit card/bank/loans etc.)		

It is really important that we have a complete picture of your financial situation. This means we need to know about all of your debts and all of your income.

## For Citizens Advice use only

### Verification of **ALL** income and main expenditure e.g. rent/mort/CT/utility bills/court fine

e.g. Housing Benefit e.g. Council Tax	Amount	frequency (w/4w/m/a)	HB calculation letter dated 17/08/2019 Checked gov.uk CT website/CT bill for 2019/20

## CLIENT DETAILS

<b>YOUR DETAILS</b>		
Title:	Forename(s):	Surname:
National Insurance No:	Gender: M/F (delete as appropriate)	
<b>PARTNER'S DETAILS</b>		
Title:	Forename(s):	Surname:
National Insurance No:	Gender: M/F (delete as appropriate)	
Address:		
Address Cont'd:		
Town:		
County:	Postcode:	
Home Telephone:	Work Telephone:	
Mobile:	Date of birth of child:	
Client Date of birth:	Date of birth of child:	
Partner Date of birth:	Date of birth of child:	
No. of children:	Date of birth of child:	

Citizens Advice Esher & District has a complaints handling procedure. Please email [bureau@eshercab.org.uk](mailto:bureau@eshercab.org.uk) to request a copy of the complaints leaflet to be either posted or emailed to you if you do not have one already.

Authorised and regulated by the Financial Conduct Authority  
FRN 617603

## INCOME AND EXPENDITURE SHEETS

### INCOME

	Weekly	Monthly
<b>Earnings &amp; income</b>		
Your take home pay		
Partner's take home pay		
Other earnings (including self-employment after tax and expenses)		
<b>Total earnings</b>		
<b>Other income</b>		
Maintenance/child support		
Student loans & grants		
Other income e.g. lodgers, family members contributions, share dividends, savings interest		
<b>Total Other Income</b>		
<b>Benefits and tax credits (tick which apply)</b>		
Universal Credit		
Jobseekers Allowance (JSA)		
Income Support (IS)		
Working Tax Credit		
Child Tax Credit		
Child Benefit		
Employment & Support Allowance (ESA)		
DLA/PIP/Attendance Allowance		
Carer's Allowance		
Housing Benefit		
Council Tax support		
Other benefits (maternity, sick pay)		
<b>Total Benefits</b>		
<b>Pensions</b>		
State Pension		
Private or Occupational Pension		
Pension Credits		
Other		
<b>Total Pensions</b>		
<b>Assets</b>		
Car - value		
Savings		
Others (e.g. shares)		
<b>Total Assets</b>		
<b>Notes:</b>		

## EXPENDITURE

	Weekly	Monthly		Weekly	Monthly
<b>Home &amp; Contents</b>			<b>Professional Costs</b>		
Rent			Professional courses		
Ground rent & service charges			Union fees		
Mortgage payments			Professional fees		
Mortgage endowment/insurance			Other professional costs		
Secured loans			<b>Total Professional Costs</b>		
Council Tax			<b>Other essential costs</b>		
Appliance & furniture rental/HP			Court fines		
TV Licence			Other		
Other fixed costs			<b>Total Other Essential Costs</b>		
<b>Total Home &amp; Contents</b>			<b>Communications &amp; Leisure</b>		
<b>Utilities</b>			Home phone, Internet, TV/films		
Gas ( or combined fuel bills)			Mobile phone		
Electricity			Hobbies,leisure,sport,eating out		
Other costs (coal, oil, etc)			Gifts (Birthday, Xmas, festivals)		
<b>Total Utilities Costs</b>			Pocket money		
<b>Water</b>			Newspapers,magazines,Postage		
Water supply			Other costs		
<b>Care &amp; Health Costs</b>			<b>Total Comms &amp; Leisure costs</b>		
Childcare costs			<b>Food &amp; Housekeeping</b>		
Adult care costs			Groceries,pet food,cleaning		
Child maintenance			Baby items, including nappies		
Prescriptions & medicines			School meals and meals at work		
Dentistry & opticians			Laundry & dry cleaning		
Other care & health costs			Alcohol		
<b>Total Care &amp; Health Costs</b>			Smoking products		
<b>Travel &amp; Transport</b>			Vet bills & pet insurance		
Public transport(for school,work)			House repairs & maintenance		
HP payments for car			Other costs		
Car Insurance			<b>Total Food &amp; Housekeeping</b>		
Road Tax			<b>Personal Costs</b>		
Servicing/MOT/Repairs			Clothing & footwear		
Breakdown cover			Hairdressing		
Fuel, parking, toll charges			Toiletries		
Other costs (including taxis)			Other personal costs		
<b>Total Travel</b>			<b>Total Personal Costs</b>		
<b>School costs</b>			<b>Regular Savings</b>		
School uniforms			(£20 maximum)		
After school clubs, school trips					
Other school costs			<b>Debt Management Fees</b>		
<b>Total School Costs</b>					
<b>Pensions &amp; Insurance</b>			<b>Notes:</b>		
Personal Pension payments					
Life Insurance					
Mortgage payment protection					
Buildings & contents insurance					
<b>Total Pensions &amp; Insurance</b>					

## CREDITORS

Name:	Date:	OFFICE USE	
Address:			
Address Cont'd:			
Town:	County:		
Postcode:	Telephone:		
Account No:	Amount: £		
*Debt Category:	Outstanding		
Name:	Date:		OFFICE USE
Address:			
Address Cont'd:			
Town:	County:		
Postcode:	Telephone:		
Account No:	Amount: £		
*Debt Category:	Outstanding		
Name:	Date:	OFFICE USE	
Address:			
Address Cont'd:			
Town:	County:		
Postcode:	Telephone:		
Account No:	Amount £		
*Debt Category:	Outstanding		
Name:	Date:		OFFICE USE
Address:			
Address Cont'd:			
Town:	County:		
Postcode:	Telephone:		
Account No:	Amount £		
*Debt Category:	Outstanding		
Name:	Date:	OFFICE USE	
Address:			
Address Cont'd:			
Town:	County:		
Postcode:	Telephone:		
Account No:	Amount £		
*Debt Category:	Outstanding		

\* COMPLETE AS SHOWN IN THE TABLE BELOW

<b>Debt Categories</b>					
Bank loan/overdraft	Benefit overpayment	Business	Cable TV	Catalogue	
Community charge	Council tax		Credit card	Electricity	Fines
Gas bill	Hire purchase		Maintenance	Mortgage	Other
Personal loan	Rent		Satellite TV	Secured loan	Social fund
Store credit	Tax		Telephone	Water rates	

## CREDITORS

Name:	Date:	OFFICE USE
Address:		
Address Cont'd:		
Town:	County:	
Postcode:	Telephone:	
Account No:	Amount: £	
*Debt Category:	Outstanding	
Name:		OFFICE USE
Address:		
Address Cont'd:		
Town:	County:	
Postcode:	Telephone:	
Account No:	Amount: £	
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Name:		OFFICE USE
Address:		
Address Cont'd:		
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Store credit	Tax	Telephone	Secured loan
		Water rates	Fines
			Other
			Social fund