

### INCOME FORM (IF 1)

Name: \_\_\_\_\_ Case Ref: \_\_\_\_\_ Date of hearing: \_\_\_\_\_

NB All weekly figures for income or expenditure should be expressed also as monthly amounts

	WEEKLY	MONTHLY
Net wages of Defendant 1		
Net wages of Defendant 2		
Child Benefit		
Tax Credits		
Mortgage Interest Payments		
Other Benefits		
1.		
2.		
3.		
Pension		
Contributions from household members		
Maintenance		
<b>Total weekly/monthly income</b>		

## EXPENDITURE FORM (EF 1)

Name: \_\_\_\_\_ Case Ref: \_\_\_\_\_ Date of hearing: \_\_\_\_\_

NB All weekly figures for income or expenditure should be expressed also as monthly amounts

	WEEKLY	MONTHLY
<b>Housing Costs</b>		
Mortgage/Rent		
Secured Loan(s)		
Rates		
Buildings & Contents Insurance		
Life Insurance		
Endowment Policies		
Mortgage protection insurance		
<b>Total</b>		

	WEEKLY	MONTHLY
<b>Household Costs</b>		
Food/Milk		
Property Maintenance (repairs, window cleaners etc)		
Household Items		
Pets – Vet, Food etc		
Prescription Charges		
<b>Total</b>		

	WEEKLY	MONTHLY
<b>Utilities</b>		
Oil/Gas		
Coal		
Electricity		
Landline Phone		
Mobile Phone		
Sky/Cable		
TV Licence		
<b>Total</b>		

	WEEKLY	MONTHLY
<b>Travel</b>		
Car Tax		
Car Insurance		
Maintenance		
Petrol/Diesel		
Buses/Taxis/Train		
<b>Total</b>		

	WEEKLY	MONTHLY
<b>Children</b>		
Nappies		
Childminding		
School Fees		
School Lunches		
Travel to school		
Pocket Money		
Maintenance		
<b>Total</b>		

	WEEKLY	MONTHLY
<b>Other</b>		
Unsecured loan(s)		
Cigarettes		
Alcohol		
Leisure		
Clothes		
Holidays/Christmas etc		
Unforeseen Expenses		
<b>Total</b>		

	Weekly Totals	Monthly Totals
Total Housing Costs		
Total Household Costs		
Total Utilities costs		
Total Travel costs		
Total Children costs		
Other Costs		
<b>Total</b>		