

# CITY OF SACRAMENTO

## APPLICATION FOR FINANCIAL EVALUATION

APPLICANT	BIRTHDATE	SOC SEC #	DRIVER LIC #
RESIDENCE ADDRESS:			HOME PH #
MAILING ADDRESS:			CELL PH #
OTHER NAMES USED:			
EMPLOYER & ADDRESS:		POSITION	WORK PH #
SPOUSE / SIGNIFICANT OTHER	BIRTHDATE	SOC SEC #	DRIVER LIC #
SPOUSE / SIGNIFICANT OTHER'S EMPLOYER & ADDRESS:		POSITION	WORK PH #
DEPENDANT CHILDREN LIVING WITH <b>YOU</b> (NAMES / AGES)			
NAME / ADDRESS OF FRIEND / RELATIVE / REFERENCE - <b>NOT</b> LIVING WITH YOU			PH #

BANK REFERENCE / BRANCH	<input type="checkbox"/> CHECKING <input type="checkbox"/> SAVINGS
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HOUSEHOLD EXPENSES (MONTHLY)	INCOME SOURCE	APPLICANT'S	SPOUSE / OTHER'S
RENT/MORTGAGE <span style="float: right;">\$ _____</span>	GROSS PAY <span style="float: right;">\$ _____</span>		<span style="float: right;">\$ _____</span>
<b>UTILITIES</b>	TAKE HOME PAY <span style="float: right;">\$ _____</span>		<span style="float: right;">\$ _____</span>
ELECTRIC <span style="float: right;">\$ _____</span>	UNEMPLOY <input type="checkbox"/>		
GAS <span style="float: right;">\$ _____</span>	SOC SEC <input type="checkbox"/>		
WATER/SEWER <span style="float: right;">\$ _____</span>	SSI <input type="checkbox"/>		
TELEPHONE/INTERNET <span style="float: right;">\$ _____</span>	DISABILITY <input type="checkbox"/>		
CELL <span style="float: right;">\$ _____</span>	VETERANS <input type="checkbox"/>		
UTILITY TOTAL <span style="float: right;">\$ _____</span>	WELFARE/GA <input type="checkbox"/>	\$ _____	\$ _____
FOOD (CASH PAYMENT) <span style="float: right;">\$ _____</span>	FOOD STAMPS <span style="float: right;">\$ _____</span>		<span style="float: right;">\$ _____</span>
AUTO FUEL/TRANSPORTATION <span style="float: right;">\$ _____</span>	PAID HOW? <span style="float: right;">WKLY / MTHLY</span>		<span style="float: right;">WKLY / MTHLY</span>
AUTO INSURANCE <span style="float: right;">\$ _____</span>			

CREDITORS <small>(LIST ALL MONTHLY PAYMENTS - LIST ADDITIONAL ON REVERSE)</small>	TYPE OF ACCT / REASON FOR ACCOUNT	CURRENT BALANCE	MONTHLY PAYMENT

I DO HEREBY SWEAR, UNDER PENALTY OF PERJURY, THAT THE INFORMATION I HAVE PROVIDED FOR THIS APPLICATION FOR FINANCIAL EVALUATION IS TRUE AND CORRECT. (WARNING: Perjury is a felony punishable by confinement in state prison. P.C Sections 17(a), 118,126, 127, and 872.)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date



