



**CONSUMER  
CREDIT  
COUNSELING**

**SERVICE**

A NONPROFIT COMMUNITY SERVICE ORGANIZATION

1309 11th Street, Suite 104 • Arcata, California 95521  
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*Office hours: Mon- Fri. 8:30AM-5:00PM. Late appointments available upon request*  
**Serving California since 1987**

## Money Management

### Please Bring to Your Appointment:

1. *Application - Complete as much as possible before the appointment.*

### Money Management includes:

*Up to 6 one - hour appointments, free of charge.*

The goal of Money Management is to help you develop strong, financial management skills. A Certified Consumer Credit Counselor will provide guidance and education to assist you in clarifying issues that may be affecting your overall financial situation. The counselor will assist you in:

1. Clarifying and setting your goals
2. Organizing your personal financial center
3. Creating a savings and spending plan
4. Tracking and updating your savings and spending plan
5. Balancing and reconciling a bank statement
6. Other pertinent financial issues.

**All information held strictly confidential**  
 Please provide complete information \* use ink and print clearly \* Do not write in shaded areas

Personal Information					
Applicant Last Name	First	Middle		Social Security Number	Birth Date / /
Co-Applicant Last Name	First	Middle		Social Security Number	Birth Date / /
Address	City	State	Zip Code	# Dependents	Ages Marital Status
Mailing Address	City	State	Zip Code	<input type="checkbox"/> Hispanic <input type="checkbox"/> Non-Hispanic	Race
Home Phone	Applicant	Cell	Co-Applicant	Cell	<input type="checkbox"/> Own <input type="checkbox"/> Rent <input type="checkbox"/> Other Education Level
Applicant Employer:			Work Phone		Applicant E-Mail Address
Co-Applicant Employer:			Work Phone		Co-Applicant E-Mail Address

Personal Income					
	Gross Monthly	Take Home Monthly	Gross Office Use	Take Home Office Use	Counselor Notes
<b>Applicant Income</b>					
Self Employed					
Social Security/SSI					
Unemployment					
Child/Spousal Support					
Retirement/Pension					
Rental Income					
Other (Food stamps, TANF)					
<b>Co-Applicant Income</b>					
Self Employed					
Social Security/SSI					
Unemployment					
Child/Spousal Support					
Retirement/Pension					
Rental Income					
Other (Food stamps, TANF)					
<b>Total Monthly Income</b>					

Previous Debt Management Plan?    \_\_\_ Yes    \_\_\_ No    With Whom? \_\_\_\_\_    When? \_\_\_\_\_  
 Do you owe taxes?    \_\_\_ Yes    \_\_\_ No    How Much? \_\_\_\_\_    Years Owing \_\_\_\_\_  
 Ever filed bankruptcy?    \_\_\_ Yes    \_\_\_ No    If yes, year. \_\_\_\_\_    Chapter 7 \_\_\_\_\_    13 \_\_\_\_\_

# MONTHLY LIVING EXPENSES

		AMOUNT	OFFICE USE ONLY	
<b>SHELTER</b>				
Rent/Mortgage	Balance \$	\$	\$	
2nd Mortgage/Equity	Balance \$	\$	\$	
Insurance/Property Tax		\$	\$	
Maintenance/Storage		\$	\$	
<b>UTILITIES</b>				
Gas/Electric/Propane/Wood		\$	\$	
Telephone/Cell Phone		\$	\$	
Cable/Satellite/Direct TV		\$	\$	
Internet		\$	\$	
Water/Sewer		\$	\$	
Garbage/Dump		\$	\$	
<b>FOOD</b>				
Groceries		\$	\$	
Work/School Lunches		\$	\$	
Meals Out		\$	\$	
Household Supplies		\$	\$	
<b>TRANSPORTATION</b>				
Auto Payment	Balance \$	\$	\$	
Auto Payment	Balance \$	\$	\$	
Insurance/Registration		\$	\$	
Gasoline/Bus		\$	\$	
Repairs		\$	\$	
<b>MEDICAL</b>				
Health Insurance (not payroll deducted)		\$	\$	
Doctor		\$	\$	
Dental/Orthodontist		\$	\$	
Counseling/Chiropractic/Massage		\$	\$	
Prescriptions		\$	\$	
Eye Exams/Glasses/Contacts		\$	\$	
Life Insurance		\$	\$	
<b>CHILDCARE</b>				
Daycare/Sitting		\$	\$	
Child Support/Alimony		\$	\$	
Allowances		\$	\$	
<b>OUTSTANDING LOANS</b>				
Student Loans		\$	\$	
Personal Loans		\$	\$	
Taxes		\$	\$	
<b>CLOTHING</b>				
Personal/Family		\$	\$	
Laundry/Dry Cleaning		\$	\$	
Diapers/Other		\$	\$	
<b>ENTERTAINMENT</b>				
Videos/Movies/Magazines		\$	\$	
Sports/Hobbies/Gym		\$	\$	
Alcohol/Tobacco		\$	\$	
<b>OTHER</b>				
Tuition/Books/Lessons		\$	\$	
Donations/Professional Dues		\$	\$	
Personal Care (Hair, Nails)		\$	\$	
Pets		\$	\$	
Other (specify)		\$	\$	
<b>EMERGENCY SAVINGS</b>		\$	\$	
<b>TOTAL LIVING EXPENSES</b>				



**CONSUMER CREDIT COUNSELING SERVICE OF THE NORTH COAST**

**Money Management**  
**PRIVACY NOTICE**

**PRIVACY POLICY:** Our agency is committed to assuring the privacy of individuals and/or families who have contacted us for assistance. We realize that the concerns you bring to us are highly personal in nature. We assure you that all oral and written information shared will be managed within legal and ethical considerations. Your “personal financial information” such as your total debt information, income, living expenses, and personal information concerning your financial circumstances will be provided to creditors and possibly others with your specific authorization.

In all other situations, your information may be released to appropriate individuals or agencies **ONLY UPON YOUR WRITTEN REQUEST** or when our staff has been served with a valid subpoena.

**The following PRIVACY PRACTICES detail circumstances under which we will release your information to a third party:**

1. We do not disclose any nonpublic personal information about our clients or former clients to anyone, except as permitted by law.
2. We may compile data and aggregate information that you give to us ,but this information may not be disclosed in a manner that would personally identify you in any way.
3. We may disclose some or all of the information that we collect, as described below, to creditors, or third parties that you have authorized who need this information in order for us to assist you after a counseling session.
4. We may disclose all of the information that we collect, as described below, to creditors and related financial institutions that need this information in order to put you on a Debt Management Plan (DMP).
5. We restrict access to nonpublic personal information about you to those employees who need to know that information to provide services to you. We maintain physical, electronic and procedural safeguards that comply with federal regulations to guard your nonpublic personal information.
6. We collect nonpublic personal information about you from the following sources:
  - Information we received from you on our applications or other forms you provide;
  - Information about your transactions with us, your creditors, or others; and
  - Information we receive from a credit reporting agency.
7. We may disclose the following kinds of nonpublic personal information about you:
  - Information we receive from you on applications or other form, such as your name, address, social security number, assets, and income;
  - Information about your transactions with us, your creditors, or others, such as your account balance, payment history, parties to transactions, and credit card usage; and
  - Information we receive from a credit reporting agency, such as your credit history.

**RELEASE:** I hereby authorize Consumer Credit Counseling Service of the North Coast to release all non-public information it obtains about me to (1) my creditors and (2) any third parties necessary to resolve the matter(s) discussed during my counseling session. I further **RELEASE** and authorize all of my creditors to provide non-public information about me to Consumer Credit Counseling Service of the North Coast.

_____ Signature	_____ Print Name	_____ Date
_____ Signature	_____ Print Name	_____ Date