



CONSUMER
CREDIT & BUDGET
COUNSELING

Budget and Debt Analysis Worksheets

Attached are Budget and Debt Analysis worksheets for you to complete. Use these forms to receive a NO COST, NO OBLIGATION and COMPLETELY CONFIDENTIAL analysis of you budget and debt situations. We will NOT contact your creditors without your authorization.

You can mail these forms to:

Consumer Credit and Budget Counseling
299 South Shore Road – US Route 9 South
Post Office Box 866
Marmora NJ 08223-0866

Or fax them to: (888) 738-8234

If you fax the forms please include this cover sheet to indicate how you would like your program returned to you:

Mail to: _____

FAX to: _____

Call me 1st: _____

email to: _____



Budget Worksheet For You To Complete

Instructions: Please fill out the information as completely as possible and mail to Consumer Credit and Budget Counseling, Inc. at Post Office Box 866, Marmora NJ 08223-0866. For faster service you can fax this form toll-free to (888) 738-8234 or fill out the information online at www.cc-bc.com. If you have any questions please call our office at (888) 738-8233.

ALL INFORMATION WILL REMAIN CONFIDENTIAL - WE WILL NOT CONTACT YOUR CREDITORS WITHOUT YOUR AUTHORIZATION

Personal Information

Applicant's Name	_____	Social Security Number	_____	(Not required at this time)
Partner's Name	_____	Social Security Number	_____	(Not required at this time)
Address	_____	Home Phone Number	_____	
	_____	Applicant's Work Number	_____	(Not required)
	_____	Partner's Work Number	_____	(Not required)

Employment / Income Information

Net Monthly Income

Applicant	_____	_____	Total Income
Partner	_____	_____	
Other Income	_____	_____	

Monthly Expenses

Net Worth Statement

Housing		Transportation	
Mortgage/Rent	_____	Auto Payment(s)	_____
2nd Mortgage	_____	Auto Insurance	_____
Electric	_____	Gas	_____
Gas/Oil	_____	Tolls/Parking	_____
Water/Sewer	_____	Public Transportation	_____
Telephone	_____	Maintenance / Repairs	_____
Food		Clothing	
Groceries	_____	Family Clothes / Shoes	_____
At Work/School	_____	Laundry/Cleaners	_____
Dining Out	_____	Medical	
Child Care		Dr. / Dentist / Health Ins.	_____
Day Care/Sitters	_____	Prescriptions	_____
Child Allowance	_____	Other	
Support/ Alimony	_____	Hair Care/ Beauty	_____
Education		Gifts	_____
Tuition	_____	Vacations	_____
Lessons	_____	Life Insurance	_____
Student Loans	_____	Church/Temple	_____
Entertainment		Pet Care	_____
Cable TV	_____	Tobacco/Alcohol	_____
Movies	_____	Other expenses	_____
Sports	_____	Total Expenses	_____

Assets	
Balance of Bank Account(s)	_____
Stocks and Bonds	_____
Life Insurance Cash Value	_____
Value of Real Estate Owned	_____
Vested Retirement Funds	_____
Value of Automobile(s) Owned	_____
Other Assets	_____
Liabilities	
Mortgage Balance	_____
Auto Loan Balance	_____
Credit Cards	_____
Personal Loans	_____
Judgments/Collections	_____
Net Worth (Assets-Liabilities)	_____

Reason For Seeking Assistance

<input type="checkbox"/>	Poor Money Management
<input type="checkbox"/>	Reduced Income
<input type="checkbox"/>	Medical
<input type="checkbox"/>	Death of Family Member
<input type="checkbox"/>	Divorce or Separation
<input type="checkbox"/>	Other (Please Identify) _____



Creditor Information For You To Complete

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Original Creditors Name		Current Balance	\$
Collection Agency (if applicable)		Current Min Payment	\$
Creditors Phone Number		Interest Rate (APR)	%
Account Number (optional)		Months Delinquent	
Type of Debt (please check one)	<input type="radio"/> Credit Card <input type="radio"/> Personal Loan <input type="radio"/> Collection Agency <input type="radio"/> Lawyer <input type="radio"/> Installment Loan <input type="radio"/> Other _____		

Original Creditors Name		Current Balance	\$
Collection Agency (if applicable)		Current Min Payment	\$
Creditors Phone Number		Interest Rate (APR)	%
Account Number (optional)		Months Delinquent	
Type of Debt (please check one)	<input type="radio"/> Credit Card <input type="radio"/> Personal Loan <input type="radio"/> Collection Agency <input type="radio"/> Lawyer <input type="radio"/> Installment Loan <input type="radio"/> Other _____		

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Collection Agency (if applicable)		Current Min Payment	\$
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Account Number (optional)		Months Delinquent	
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CONSUMER CREDIT & BUDGET COUNSELING

Client Bill of Rights:

We pledge that our clients have the right:

- To prompt counseling services for managing money, based upon their financial situation
- To treatment with dignity and respect
- To be actively involved in a comprehensive assessment of their financial situation, including an appropriate action plan
- To express dissatisfaction through a [Complaint Resolution Process](#)
- To discontinue their relationship with CC&BC at any time
- To ask questions and have their concerns addressed

Complaint Resolution Process:

We are committed to providing you with high quality professional services. However, if you are not satisfied with the services provided, or if you wish to file a complaint, we ask that you follow these guidelines:

Step 1. Try to resolve the issue with the staff member involved, giving him or her specific information about your complaint.

Step 2. If "Step 1." is not possible, or the issue is not resolved to your satisfaction, write or call the Senior Counselor (at 299 South Shore Road, Marmora, New Jersey 08230, 1-888-738-8233)

Step 3. CC&BC may request a meeting with you (phone or face-to-face) or seek more information from the staff person. In any event, CC&BC will respond within 15 days.

Step 4. If your issue is still unresolved, you may appeal in writing directly to the President or Executive Director, at the address above. After additional fact finding, you will receive a concluding decision within 15 days.

Privacy Policy

Consumer Credit and Budget Counseling respects your privacy. We recognize the importance of protecting the privacy of personal identifying information that may be submitted to us for analysis and review. It is the policy of Consumer Credit and

Budget Counseling to ensure that all client information will be held in the strictest of confidence.

You may be asked for information in order to complete the requested calculation, analysis, or evaluation. Any and all information collected by us, either through our web site, via mail, fax or EMail, from the telephone, as a result of face-to-face counseling, or from any other source, will be kept strictly confidential. Such information will not be sold, reused, rented, loaned or otherwise disclosed. Such information will only be shared with the client's creditors enrolled in the Debt Management Program after that client has provided a signed authorization. And, such information will be used solely for the purpose of negotiating a debt repayment program, and to monitor the clients progress throughout the program.

Personal information collected is stored in secure operating environments that are not accessible to the public. Such is the case of credit card and bank account numbers and any other identifying information. Our operating system is leased from a software provider; however, they do not have access to the client database.

Any information you give us will be treated with the utmost care, and will not be used in any ways that you have not consented to in writing. Consumer Credit and Budget Counseling is committed to data security.

This notice is provided to you pursuant to the Gramm-Leach-Bliley Act (disclosure of nonpublic personal information by financial services provider), which requires a financial institution to notify its customers of its privacy practices and procedures on an annual basis. As we do not disclose personal information except for legitimate business and legal reasons, as specifically authorized in the signed Authorization and Agreement, no opt out of information sharing is required.

Contact Information

Consumer Credit and Budget Counseling
299 South Shore Road – US Route 9 South
Post Office Box 866, Marmora NJ 08230

Phone: 609-390-9652 – 888-738-8233
Fax: 609-390-9653 – 888-738-8234
Email help@cc-bc.com
Web Site: www.cc-bc.com

A Non-Profit, Multi-State Licensed, Bonded, Consumer Education and Financial Counseling Agency

299 SOUTH SHORE ROAD, US ROUTE 9 SOUTH
POST OFFICE BOX # 866
MARMORA, NEW JERSEY 08223-0866

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