4-Sight Counseling, Inc.

937 Broadway Suite 305 ***573-334-7995***
Cape Girardeau, MO 63701 ***573-335-8610 - Fax***

Financial Statement

Customer Name (1)			Customer Name (2)		
Address:					
Work Phone (1)		Cell Phone		Home Phone	
Work Phone (2)		Cell Phone		Home Phone	
Email Address (1)			Email Address (2)		
Names and ages of people living with 1:					
Had Counseling Before? Where - When - Outcome					
Does anyone receive government assistance (food stamps, SSI, disability, etc?)					
Is there any other income other than wages?					
How much do you receive:		When:	Weekly	Monthly	Bi-Weekly
Are you self employed? Bring in tax returns - profit loss statements for 6 months					
Do you own any other properties or have any interest in any assets other than the address above?					
Vehicles - boats - motorcycles - etc.					
Description		Owe		Value	

Liabilities - Bills

Credit Cards (number of cards and amounts due total)	
Insurance not deducted from salary	
Auto Insurance	
Alimony	
Child Support	
Child Care	
Other loans (list separately)	
Telephone - Cell Phones	
Utilities - gas, electric, water, trash	
Gas/Parking	
Donations	
Cleaning Supplies	
Newspapers/magazines	
Entertainment	
Cable - computer - internet	
Medical Bills	
Student Loans	
Food	
Eating Out	
Home Security	
Appliance Rent	
Other/Misc.	
Clothes - Dry cleaning	
Auto Maintenance	
Mortgage - rent payment	
Total	

Total Monthly Income:	Total Monthly Expenses:

We the undersigned believe this information to be true and accurate to the best of our knowledge.

Name Date	Name Date