

FINANCIAL STATEMENT FORM

Pre-Action Protocol for Debt Claims

Use this form to show your income and outgoings
if you want to propose a payment plan.

Before You Complete This Form:

1. Gather your recent payslips, benefit letters, and bank statements
2. Collect your utility bills, rent agreement, and loan statements
3. Complete all sections honestly and accurately
4. Return this form with the Reply Form within 30 days

Free Advice: If you need help, contact Citizens Advice (0800 144 8848), StepChange (0800 138 1111), or National Debtline (0808 808 4000).

FINANCIAL STATEMENT FORM

Complete all sections below

YOUR DETAILS

Your full name:	_____
Your address:	_____
Your postcode:	_____
Your date of birth:	_____
Number of dependants:	_____

SECTION 1: YOUR MONTHLY INCOME

List all your income sources and how much you receive per month (after tax and deductions)

Income Source	Amount per Month (£)
Wages / Salary (after tax and National Insurance)	_____
Self-employment income (average monthly)	_____
Universal Credit	_____
Child Benefit / Child Tax Credit	_____
Housing Benefit / Local Housing Allowance (LHA)	_____
Pension (State or private)	_____
Disability Living Allowance / PIP	_____
Carer's Allowance	_____
Partner's income (if joint finances)	_____
Other income (specify): _____	_____
TOTAL MONTHLY INCOME:	£ _____

SECTION 2: YOUR MONTHLY OUTGOINGS

List all your essential living costs and how much you spend per month

Housing Costs

Rent (current property)	£ _____
Mortgage	£ _____
Council Tax	£ _____
Gas	£ _____
Electricity	£ _____
Water	£ _____
Buildings / Contents Insurance	£ _____

Household Costs

Food and groceries	£ _____
Toiletries and household products	£ _____
Telephone / Mobile phone	£ _____
Internet / TV licence	£ _____
Clothing and footwear	£ _____

Travel and Transport

Car insurance / Road tax / MOT	£ _____
Petrol / Diesel	£ _____
Public transport (bus, train)	£ _____
Car repairs / servicing	£ _____

Childcare and Education

Childcare costs	£ _____
School meals / uniforms	£ _____
Child maintenance payments	£ _____

Health Costs

Prescription charges	£ _____
Dental / optical costs	£ _____
Other medical costs	£ _____

Other Regular Payments

Credit card minimum payments	£ _____
Loan repayments	£ _____
Other debts (specify): _____	£ _____
Other essential costs (specify): _____	£ _____

TOTAL MONTHLY OUTGOINGS:	£ _____
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SECTION 3: YOUR AVAILABLE INCOME

Total monthly income (from Section 1)	£ _____
Total monthly outgoings (from Section 2)	£ _____
Available income (income minus outgoings):	£ _____

If your available income is negative (i.e., your outgoings are higher than your income), you should seek free debt advice urgently.

SECTION 4: YOUR ASSETS

List any assets you own (e.g., property, savings, vehicles)

Asset	Estimated Value (£)
Property (home): Own Mortgage Less mortgage outstanding: £ _____	£ _____
Savings (bank / building society)	£ _____
Vehicle(s)	£ _____
Other assets (specify): _____	£ _____

SECTION 5: YOUR PAYMENT OFFER

Based on the financial information above, **what can you afford to pay towards this debt?**

I can afford to pay:	£ _____ per _____
Starting from (date):	_____
I will also continue to pay my current rent in full:	Yes No

Note: Any payment arrangement you propose must be *realistic and sustainable*. You should also continue paying your current rent in full (if you still live at the property) to prevent further arrears.

SECTION 6: ADDITIONAL INFORMATION

Is there anything else you would like the claimant to know about your financial situation?

DECLARATION

I confirm that the information I have given on this form is true and complete to the best of my knowledge. I understand that if I provide false information, it may affect any agreement or court order.

Your signature:	_____
Date:	_____

WHAT TO DO NEXT

1. **Complete this form** as accurately as possible.
2. **Attach proof of income** (e.g., recent payslips, benefit letters, bank statements).
3. **Attach proof of outgoings** (e.g., utility bills, rent agreement, loan statements).
4. **Send this form with the Reply Form** to the claimant within 30 days.

Send to:

Tariq Mohammed
35 Woodhall Park Avenue, Pudsey
LS28 7HF

NEED HELP COMPLETING THIS FORM?

Free debt advice services can help you complete this form and negotiate with the claimant on your behalf:

- **Citizens Advice:** 0800 144 8848 or www.citizensadvice.org.uk
 - **StepChange Debt Charity:** 0800 138 1111 or www.stepchange.org
 - **National Debtline:** 0808 808 4000 or www.nationaldebtline.org
 - **MoneyHelper:** 0800 138 7777 or www.moneyhelper.org.uk
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Data Protection: The claimant will use the information on this form to consider your payment offer and, if necessary, for court proceedings. Your personal data will be processed in accordance with GDPR and the Data Protection Act 2018.