



Dear Client,

Thank you for contacting BALANCE.

The following is a worksheet for you to use to record your existing financial situation. Please print it out and complete it prior to your meeting. There is no need to send us a copy; during your hour-long counseling session, your counselor will ask you for this information. A recent pay check stub and your current creditor statements are also helpful to have available. If you are married, please provide the information for both you and your spouse.

We've also included a counseling agreement. Please take a moment to read it over before your session.

If you are unable to keep your appointment, please contact us as soon as possible at 888-456-2227 and we'll be happy to reschedule. Otherwise, your counselor will call you at the appointed time.

We look forward to speaking with you.

Regards,

Ren Magat

Vice President



Personal Financial Assessment

BALANCE offers financial information and counseling nationwide to help individuals and families make the most of their money. We offer solutions for those experiencing a financial crisis, suggestions and guidance for those facing money challenges, and practical information for those considering financial opportunities.

The BALANCE financial fitness program is available to you and your family through the sponsorship of your employer, credit union or other organization with which you are affiliated. Each year, we help thousands achieve their financial goals.



During this call, you can expect to receive thorough, non-judgmental counseling. The session will include a discussion of your current situation and your concerns; a review of your income, expenses and debt; an explanation of your options; and a written action plan.

If you are having trouble keeping up with your bills, one of your options might be consolidation of your bill payments. Our Debt Management Plan allows you to make one payment to all your creditors through us. We will also negotiate with your creditors to stop collection action, lower payments and, in some cases, reduce or eliminate interest and fees.

595 Market Street, 16th Floor, San Francisco, CA 94105

888.456.2227 www.balancepro.net

Assets

Please use this worksheet to record your existing financial situation. There is no need to mail this form back to us. During the call, the counselor will ask you what you entered for each category, and will use this information to offer solutions and suggestions to help you master your money. Calculate your monthly income. If you know what your gross pay (before taxes and other deductions) is, please enter that. However, net pay (face value of your check) is the more important figure. Include variable income received each month, such as commissions, as well as periodic income, such as a large tax refund or bonus. This will have to be divided by 12 to get the monthly figure.

INCOME	Gross	Net
Income Source/Employer		
Second Income Source/Employer		
Retirement/Pension		
Child Support		
Social Security		
Food Stamps		
Other Income		
Other Income		
Total Monthly Income		

For income, take home or "net income" is most important in this section.

PROPERTY	Present Value	Amount Owed	Monthly Payment
Mortgage			
Second Mortgage			
Car Payment			
Second Car Payment			

ASSETS & LIABILITIES	Present Value	Amount Owed	Monthly Payment
Boat			
Property / Land			
Timeshare			
401(k) - 403(b) Loan			
Other			
Other			

INVESTMENTS	Present Value	Monthly Contribution
401(k) - 403(b)		
Savings		
IRA		
Stocks / Mutual Funds		
Other		
Other		

Don't forget to include your payroll deducted 401(k) - 403(b) contributions.

Expenses

Household expenses are categorized into **essential** and **variable**. For all categories, enter the monthly amount you spend. Many of the expenses fluctuate each month and will need to be averaged. Other expenses may be periodic (such as insurance, vehicle registration and taxes). Calculate the annual amount and divide by 12.

ESSENTIAL LIVING EXPENSES:

HOUSING	Monthly Payment
Rent/Mortgage	
2nd Mortgage	
HOA (Association dues)	
Property Taxes	
Homeowner's Insurance	
Renter's Insurance	
Gas/Electric (average)	
Water/Sewer/Garbage	
Cable/Satellite	
Telephone	
FOOD	Monthly Payment
Groceries/Household Items	
At Work/School	
MEDICAL	Monthly Payment
Health Insurance (dental/vision)	
Prescriptions/Doctor Visits	
TRANSPORTATION	Monthly Payment
Car Payment #1	
Car Payment #2	
Gasoline	
Maintenance/Repairs	
Auto Insurance	
Auto Registration	
Tolls/Parking/Bus	
CHILDCARE	Monthly Payment
Daycare/Sitting	
Alimony/Child Support	
EDUCATION	Monthly Payment
Tuition/Lessons	
Student Loans	
MISCELLANEOUS	Monthly Payment
Taxes (monthly repayment)	
Life Insurance	
Union Dues	
Storage Fees	
Other	
Other	

VARIABLE EXPENSES

PERSONAL	Monthly Payment
Beauty/Barber	
Other	
ENTERTAINMENT	Monthly Payment
Movie/Video	
Dining Out	
Sports/Hobbies/Clubs/Gym	
Vacations/Travel	
Reading Material/Music	
Other	
CLOTHING	Monthly Payment
Purchases	
Laundry/Dry Cleaning	
HOME CARE	Monthly Payment
Maintenance/Cleaning	
Pool Service/Gardening	
Monitored Alarm	
MISCELLANEOUS	Monthly Payment
Gifts	
Pet Care	
Pager/Cell Phone	
Banking Fees/Postage	
Cigarettes/Alcohol	
Computer/Online Fees	
Religious/Charity	
Other	
Other	
Other	

For yearly expenses, divide the total figure by 12 to get the monthly payment.

Current Debts

Please list all unsecured debts with balances over \$100. Do not include mortgage, vehicle or student loans. List these loans in the appropriate categories on the previous expense information page. Please have your current creditor statements available during your counseling session.

Name of Creditor	Account Number	Current Balance	Current Payment	Interest Rate	Months Late
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					

Agreement for Counseling Services

1. I understand BALANCE will provide a confidential personal money management consultation after which I will receive a written action plan consisting of recommendations for handling my finances, possibly including referrals to other services or agencies as appropriate.
2. One of the possible outcomes of the consultation may be to repay my creditors through a Debt Management Plan. I understand that BALANCE and its affiliate companies receive funding from those creditors and that the Debt Management Plan serves the dual role of helping me repay my debts and helping the creditors receive the money owed them.
3. A counselor may answer questions regarding financial issues, but not give legal advice.
4. At some time in the future, information discussed in the counseling session, or obtained from my credit report, may be used for confidential research and/or a neutral third party may contact me to request an evaluation of the agency's service.
5. I hold BALANCE, its employees, agents, and volunteers harmless from any claim, suit, action or demand of my creditors, myself or any other person resulting from advice or counseling.
6. I understand that unless I choose to "opt-out", the agency will, if asked by my creditors, verify my appointment as well as the date and results of that appointment. I further understand that I have the right to "opt-out" of having this information shared by calling BALANCE "opt-out" line (888-440-4663).
7. If referred by a credit union: I understand that the results of the session will be shared with my referring credit union, so the credit union may offer other services to assist me in achieving my financial goals.
8. I authorize the agency to access my credit report for account verification and for confidential research in the future. I understand these reports being accessed will not have a detrimental affect on my credit score.

Client Signature _____ Date _____

Client Signature _____ Date _____

Privacy Policy

BALANCE 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 information shared both orally and in writing will be managed within legal and ethical considerations. Your “nonpublic personal information,” such as your total debt information, income, living expenses and personal information concerning your financial circumstances, will be provided to creditors and others only with your specific authorization. We may also use anonymous aggregated case file information for the purpose of evaluating our services, gathering valuable research information and designing future programs.

Types of information that we gather about you

- Information we receive from you orally, on applications or other forms, 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.

Consent to disclose

If you wish to “opt-out” of this information sharing at any time, you may call us at (888) 440-4663 to do so. After we have had a reasonable opportunity to act on your request, we will no longer share your non-public personal information, except as permitted by law.

Release of your information to third parties

1. If you have not withdrawn your consent, we may disclose some or all of the information that we collect, as described above, to your credit union, your creditors, or third parties that you have authorized and where we have determined that it would be helpful to you or would aid in counseling you.
2. Generally we will provide only the following information to your credit union and to your creditors if asked:
 - Verification of appointment with us
 - Date of counseling
 - Disposition (e.g. you will handle affairs on your own; pending action like Debt Management Program)
3. 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.
4. We do not disclose any nonpublic personal information about our customers or former customers to anyone without their consent and as otherwise permitted by law.
5. We restrict access to nonpublic personal information about you to those employees that we determine need to know that information to provide services to you. We maintain physical, electronic and procedural safeguards to guard your nonpublic personal information.

Debt Management

If you need intervention on your behalf with creditors through a Debt Management Program or similar program, we will refer you to our affiliate Consumer Credit Counseling of San Francisco (“CCCSSF”). At that time, you will become subject to their privacy policy.