

GUADALUPE COUNTY
COMMUNITY SUPERVISION & CORRECTIONS DEPARTMENT
SEGUIN OFFICE 209 E. Donegan Seguin, Tx. 78155 (830) 303-0058 379-7270 Fax (830) 379-3843
SCHERTZ OFFICE 1101 Elbel Suite 2 Schertz, Tx. 78154 (210) 945-9708 Fax (210) 566-1287

FINANCIAL STATEMENT / BUDGET WORKSHEET

Name _____

Month of _____

RECORD EXPENSES AND PROVIDE VERIFICATION TO OFFICER

MONTHLY INCOME

MONTHLY EXPENSES

Salary \$ _____
A.F.D.C. \$ _____
Food Stamps \$ _____
Social Sec. \$ _____
Disability \$ _____
Unemployment \$ _____
Workman's Comp. \$ _____
Retirement \$ _____
Child Support \$ _____
Other Income \$ _____

Rent/House Payment \$ _____
Electricity \$ _____
Gas/Water/Garbage \$ _____
Telephone \$ _____
Cable \$ _____
Grocery/Household Supp. \$ _____
Clothing \$ _____
Car Payment \$ _____
Gasoline \$ _____
Car Insurance \$ _____
Life/Health Insurance \$ _____
Child Care \$ _____
Doctor/Medicine \$ _____
Entertainment \$ _____
Other _____ \$ _____
_____ \$ _____
_____ \$ _____

Credit Cards/Other Debt
Creditor _____ Monthly \$ _____
Creditor _____ Monthly \$ _____
Creditor _____ Monthly \$ _____
Creditor _____ Monthly \$ _____

Probation Fee \$ _____
Restitution \$ _____
Fine/Court Fees \$ _____

TOTAL INCOME: _____

TOTAL EXPENSES _____

I will pay \$ _____ per month toward my fees beginning _____.

SUPERVISION OFFICER

PROBATIONER DATE