

FINANCIAL INFORMATION INTAKE FORM (March 2025)

Name: _____

Are you receiving government assistance such as disability, food stamps, housing vouchers, social security, Bridge card? (Check one) Yes _____ No _____

MONTHLY INCOME	AMOUNT
Monthly Income	\$
Income of Other Household Members Available and Accessible to You (such as spouse)	\$
	\$
Total Estimated Monthly Income	\$

MONTHLY EXPENSES	AMOUNT
Rent / Mortgage / Utilities	\$
Loan Payments / Credit Card Payments	\$
Child Care / Child Support / Alimony	\$
Health Care/ Medical / Dental	\$
Fines, fees, restitution, bail in other cases	\$
Other (such as gas, insurance, food)	\$
Total Estimated Monthly Expense	\$

Please explain any other current conditions (examples: marital status, kids/dependents, length of residency, mental health, disability, loss of income):

2025 Poverty Level			
Household size	100%	140%	200%
1	\$15,650	\$21,910	\$31,300
2	\$21,150	\$29,610	\$42,300
3	\$26,650	\$37,310	\$53,300
4	\$32,150	\$45,010	\$64,300

For a **personal bond**, without other disqualifying factors, anything below 200% of the poverty level is a presumptive qualification.

For an **appointed attorney**, income level below 140% of the poverty level is a presumed qualification.

For Poverty Level: each additional person add: \$5,500 for 100% | \$7,700 for 140% | \$11,000 for 200%