

# Benefit Trust Fund - Budget Planner

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| Application Type First  Continuance  Update | Is this a veterans' association application? Yes  No |
| **Applicant Identification** |
| Surname | Given Names | Date of Birth (yyyy-mm-dd) |
| Tel. Number (incl. area code) | Address | Postal Code (A9A 9A9) |
| Present Employer Name | Address of Employment | Tel. Number (incl. area code) |
| **Persons Residing in Your Household** |
| All fields in the following table expand, except the "Age" and "Income per Month" fields. |
| **Full Name** | **Relationship to Applicant** | **Age** | **Name of Employer or School** | **Income per Month** | **Country of Citizenship** |
|  |  |  |  |  |  |
|  | Add and Go to New Row |
| **Previous Assistance** |
| Reasons for Previous Assistance (this field expands) |
| Amount of Previous Assistance | Date (yyyy-mm-dd) |
| **Revenue Information** |
| Include copies of the most recent pay statement for each individual listed in this section. |
| **Individual** | **Name of Employer** |
| Applicant |  |
| Spouse |  |
| **Annual Income** | **Applicant** | **Spouse** | **Other** | **Total** |
| Gross Annual Salary |  |  |  | $0.00 |
| Old Age Pension and Supplement |  |  |  | $0.00 |
| Guaranteed Annual Income Supplement |  |  |  | $0.00 |
| Veterans Affairs Canada (VAC) or Disability Income Gains |  |  |  | $0.00 |
| Social Assistance |  |  |  | $0.00 |
| Child and Family Benefits |  |  |  | $0.00 |
| Employment Insurance (EI) |  |  |  | $0.00 |
| Family Insurance (Life or Accident) |  |  |  | $0.00 |
| Worker's Compensation |  |  |  | $0.00 |

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| **Annual Income** | **Applicant** | **Spouse** | **Other** | **Total** |
| Interest from Investments |  |  |  | $0.00 |
| Income from Other Family Members |  |  |  | $0.00 |
| Other Income |  |  |  | $0.00 |
| **Total Annual Income** | $0.00 | $0.00 | $0.00 | $0.00 |
| **Total Monthly Income (Total Annual Income / 12)** | $0.00 | $0.00 | $0.00 | $0.00 |
| **Worth** |
| **Assets** |
| **Cash Assets** | **Current Value** |
| Cash |  |
| Total of Savings and Chequing |  |
| Income Tax Refund |  |
| Tax Free Savings Account (TFSA) |  |
| **Marketable Assets** | **Cost at Acquisition** | **Current Value** |
| Canada Saving Bonds |  |  |
| Investment Certificates |  |  |
| Stock and Bonds |  |  |
| Mutual Funds |  |  |
| Real Estate Investments |  |  |
| Cryptocurrencies |  |  |
| Business Interests |  |  |
| **Long Term Assets** | **Current Value** |
| Registered Retirement Saving Plan (RRSP) |  |
| Registered Education Savings Plan (RESP) |  |
| RCMP Superannuation |  |
| **Personal Assets** | **Cost at Acquisition** | **Current Value** |
| Residence |  |  |
| Vehicle |  |  |
| Recreational Vehicle |  |  |
| Household Furnishings |  |  |
| Collectibles (stamps, coins, etc.) |  |  |

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| **Personal Assets** | **Cost at Acquisition** | **Current Value** |
| Recreational Equipment |  |  |
| Other: |  |  |
|  | Add and Go to New Row |
| **Liabilities** |
| For each credit card that you list, provide one year of credit card statements.**For the Annual Interest Rate column, please enter the percentage as a decimal (e.g. 25.22 percent would be entered as 0.2522).** |
| **Type of Liability** | **Name of Creditor** | **Number of Payments Left** | **Annual Interest Rate** | **Monthly Payment** | **Original Loan** | **Current Balance** |
| 1st Mortgage |  |  |  |  |  |  |
| 2nd Mortgage |  |  |  |  |  |  |
| Credit Card No. 1 |  |  |  |  |  |  |
|  | Add and Go to New Row |
| **Type of Loan** | **Name of Creditor** | **Number of Payments Left** | **Annual Interest Rate** | **Monthly Payment** | **Original Loan** | **Current Balance** |
|  |  |  |  |  |  |  |
|  | Add and Go to New Row |
| **Other Liabilities** | **Current Balance** |
| Line of Credit |  |
| Taxes |  |
| Charitable Pledges |  |
| Unpaid Bills |  |
| Other: |  |
|  | Add and Go to New Row |
| **Total** |
| Total Assets$0.00 | Total Liabilities$0.00 | Net Worth (total assets - total liabilities)$0.00 |
| **Expenses** |
| **Monthly** |
| **Savings** | **Amount** |
| Emergency Fund |  |
| **Food** | **Amount** |
| Groceries |  |
| Restaurant and Take-out |  |
| **Housing** | **Amount** |
| First Mortgage |  |

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| **Housing** | **Amount** |
| Second Mortgage |  |
| Rent |  |
| Cleaning Supplies |  |
| Electricity |  |
| Water and Sewage |  |
| Heating |  |
| **Communications** | **Amount** |
| Telephone |  |
| Cell Phone |  |
| Cable or Satellite |  |
| Streaming Subscriptions |  |
| Internet |  |
| **Transportation** | **Amount** |
| Gasoline |  |
| Parking |  |
| Public Transportation |  |
| **Childcare** | **Amount** |
| Child Support Payments |  |
| Children's Allowance |  |
| Other: |  |
|  | Add and Go to New Row |
| **Repayments** | **Amount** |
| Credit Card Obligations |  |
| Loans |  |
| **Personal Allowances** | **Amount** |
| Applicant |  |
| Spouse |  |
| Children |  |
| Other: |  |
|  | Add and Go to New Row |

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| **Recreation** | **Amount** |
| Extracurricular Activities |  |
| **Annual** |
| **Gifts and donations** | **Amount** |
| Charitable Donations |  |
| Gifts |  |
| **Medical** | **Amount** |
| Medical Expenses / Medication |  |
| Dental Fees |  |
| **Clothing** | **Amount** |
| Applicant |  |
| Spouse |  |
| Children |  |
| Other: |  |
|  | Add and Go to New Row |
| **Education** | **Amount** |
| Tuition |  |
| Books and Supplies |  |
| **Recreation** | **Amount** |
| Travel |  |
| Season Tickets |  |
| Memberships |  |
| **Insurance** | **Amount** |
| Life |  |
| Property |  |
| Vehicle |  |
| Other |  |
| **Taxes** | **Amount** |
| Property Taxes |  |
| Income (if paid directly) |  |

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| **Housing** | **Amount** |
| Property Maintenance |  |
| **Total** |
| Subtotal Monthly Expenses$0.00 | Subtotal Annual Expenses$0.00 | Total Monthly Average Expenses (Monthly Expenses + Annual Expenses / 12)$0.00 |
| Monthly Income$0.00 | Remaining Balance (Total Income - Total Expenses)$0.00 |
| **Applicant Attestation** |
| I solemnly declare that the information in the budget planner is true and I hereby consent to the release of any personal information which, may be deemed necessary in the investigation of my case. |
| Signature | Date (yyyy-mm-dd) |