



*Hypnotherapy Institute*

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## Financial Hardship

Monthly Household Income: \_\_\_\_\_

Monthly Household Expenses: \_\_\_\_\_

Rent/Mortgage: \_\_\_\_\_

Utilities: \_\_\_\_\_

Car: \_\_\_\_\_

Gas: \_\_\_\_\_

Food: \_\_\_\_\_

Medical: \_\_\_\_\_

Other Expenses: \_\_\_\_\_

Total Monthly Expenses:

Total Income Less Expense:

To my full knowledge, the worksheet is an accurate statement of my financial condition.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_