



Home Evaluation and Placement Services  
Bureau of Social Services Administration  
Division of Public Welfare  
Department of Public Health and Social Services



**INSTRUCTIONS**

**FOR**

**FINANCIAL REPORT SHEET**

Below are the instructions for completing the financial report sheet for an applicant/petitioner/party who may apply for Adoption/Termination of Parental Rights (TPR), Custody, Guardianship, Foster, Child Care Center, Inter-Country Adoption Board (ICAB), United States Citizenship and Immigration Services (USCIS), or Off-Island Request for Placement services.

**This form is to be completed by the applicant/petitioner/party.**

To ensure the financial report sheet is complete, please read and follow the instructions below. Please type or print legibly in black or blue ink.

- I. **INCOME:** Income is a financial return or gain from one's business, labor, or property. It may also be a profit, wage, salary, earning, retirement, payment, etc.

**There are two types of Income:**

- A. **Earned Income:** Income received in exchange for an individual's physical or mental labor including, but not limited to, the following:

- Civil Service (Federal) Employment
- Government of Guam Employment
- Military Earnings
- Private Enterprise Income
- Self-Employment Income
- Property Rental
- Commission
- Tips
- Cash on Hand, etc.

- B. **Unearned Income/Other Sources of Support:** An individual's income from sources other than employment, work, effort or any other contribution from persons including, but not limited to, the following:

- Social Security Benefits
- Retirement
- Child Support
- Alimony
- Welfare
- Food Stamps
- WIC
- Contribution from Persons, etc.

1. Enter the last, first name and middle initial of the applicant/petitioner/party (and co-applicant's if applicable).
2. List the source(s) of and monthly gross income.
3. Enter the sub-totals and total amount of income.

## **II. ASSETS:**

1. List all types of assets including, but not limited to: Checking, Savings, TCD/Money Market. If other, please specify.
2. Indicate the owner(s) of the account(s) by checking the appropriate boxes (applicant, co-applicant or joint).
3. Enter the name of the financial institution and current balance for each account.
4. Enter the total amount of assets.

## **III. MONTHLY EXPENSES:**

### **A. Creditors:**

1. List your monthly expenses (and co-applicant's if applicable) including, but not limited to: Mortgages, Auto Loans, Personal Loans, Credit Cards (Master Card, Visa, American Express, Department Store Cards, Gas cards, etc). If other, please specify.
2. Enter the name of creditors.
3. Enter the remaining balances and the monthly payments.
4. Enter the total amount of remaining balances and monthly payments to creditors.

**B. Living Expenses:**

1. Indicate your monthly expenses (and co-applicant's if applicable) including, but not limited to: Rent, Medical Insurances, Dental Insurances, Home Insurances, Auto Insurances, Life Insurances, Power, Water, Telephone/Cell Phone, Internet, Cable, Tipping Fee, Tuition/Child Care, Groceries. If other, please specify.
2. Enter the average monthly payments.
3. Enter the total amount of living expenses.

**IV. CERTIFICATION:** Upon completion, the applicant/petitioner/party (and co-applicant if applicable) must sign and date. The signature will certify that the information provided is true, correct and complete to the best of your knowledge.