

THE GALLO LAW CENTER, PLLC

Initial Agreement

This agreement is made by and between The Gallo Law Center, PLLC (hereinafter known as "Company") and the client signed below (hereinafter known as "I"). I hereby authorize the Company to review my financial situation in relation to unsecured debt, at no charge or further obligation.

If I elect to engage additional services of Company, the terms and conditions under which such services shall be performed shall be agreed to both verbally and in writing by the parties.

*Applicant Name (print) _____

Mailing Address: _____

*City: _____ * State: _____ * Zip: _____

*Phone 1: _____ Phone 2: _____

Phone 3: _____

*Email: _____

*Signature : _____

*Date : _____

*Required fields to fill out

THE GALLO LAW CENTER, PLLC

Creditor Information Sheet

Creditor Name:	Balance Owed:	Interest Rate:	# of Payments Behind:	Your Monthly Payment:
Name of Co-signer (if any):				
<input type="checkbox"/> Credit Card/Store Card <input type="checkbox"/> Bank Loan <input type="checkbox"/> Student Loan <input type="checkbox"/> Dr./Hospital <input type="checkbox"/> Coll. Agency				

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MAKE ADDITIONAL COPIES AS NEED

THE GALLO LAW CENTER, PLLC

Budget Worksheet

Print Client Name _____

Counselor Code: _____

Please note all creditors require this form be itemized for accuracy

Monthly Household Expense	
Mortgage	
Second Mortgage	
Rent	
Condo Fee	
HOA Fee	
Taxes	
Car Payment	
Second Car Payment	
Car Expenses/Maintenance	
Union Due	
Alimony/Child Support	
Transportation	
Groceries/Food	
Day Care	
Education	
Clothing	
Charitable Donations	
Dry Cleaning/Laundry	
Gifts	
Cellular/Pager	
House Maintenance	
Entertainment	
Other	
Monthly Sub-total	

Monthly Utilities	
Gas/Oil	
Electric	
Telephone	
Water/Sewage	
Cable	
Internet	
Monthly Sub-Total	

Monthly Insurance	
Life	
Auto	
Medical/Health	
Medication	
Homeowners	
Flood	
Monthly Sub-Total	

Monthly Revolving Debts	
Credit Cards	
Personal Loans	
Installment Loans	
Other Secured Debts	
Monthly Sub-total	

Total Monthly Expenses	
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Monthly Income Sources	
Net monthly Salary	
Net Spouse Salary	
Part-Time Income	
Social Security	
Retirement	
Pension	
Military	
Annuity	
Child Support	
Alimony	
Food Stamps	
Disability	
Other	
Total Monthly Income	

Monthly Income Less Monthly Debt