

Section III. Request Information

How much financial assistance do you need? \$ _____

For what will the money be used?

Deposit/rent Food/Clothing Utility bills Other bills Other

** Please include documentation of this need. Acceptable documentation includes a lease agreement, copy of the bill or invoice, copy of a paycheck stub, etc.*

Why do you have this need?

Who can we contact regarding this request? (e.g. your landlord, billing agent, employer, etc.)

1) Name/Title: _____ 2) Name/Title: _____

Phone: _____ Phone: _____

If The River is able to support you, to whom should we make the check out?

Name/Company Name: _____

Address: _____

City: _____ State: _____ Zip: _____ Phone: _____

Have you requested financial assistance from The River before? Yes No

If yes, how many times have you requested assistance before? _____ When? _____

Office Use Only

Request Approved? Approved Denied

By: _____ Date: _____

Make Check Payable To: _____

Address: _____

If denied, reason for denial?

Section IV: Financial Information

Monthly Income	Amount	Monthly Expense	Amount	Comments
Salary (self)		Housing		
Salary (partner)		Medical		
Social Security		Food		
Veteran's Admin.		Utilities		
AFDC - Child Support		Phone		
SSI / Unemployment		Car/Transportation		
DSS State Disability		Charge Accounts		
Food Stamps		Insurance		
Other:		Other:		

Assets	Amount	Liabilities	Amount	Comments
Checking Account		Credit Card Debt		
Savings Account				
		Auto Loan		
Home Value				
		Home Loan		
Investments				
Retirement				

I verify that all the information above is accurate and complete to the best of my knowledge.

Signature: _____ Date: _____

Please sign and date and return to the River office or email to benevolence@the-river.org