



2023-2024 MONTHLY EXPENSE STATEMENT

Student Name: _____

SSN: _____

The following information is for: Independent Student Parent of a dependent student

Dear Student/Parent:

The income you reported on your Free Application for Federal Student Aid appears to be unusually low. You reported your total income for the year 2021 as \$ _____. Please complete this form to explain how you supported your household in 2021. Page 2 of this form provides space for you to explain/clarify your circumstances.

Note: If you made an error in reporting your income on the FAFSA, contact Ottawa's financial aid office before completing this form.

Monthly Living Expense	\$ Amount Per Month	Whose name appears on the Statement/Bill (e.g. who "owns" the debt?)	Who is primarily responsible for paying the bill (e.g. whose money is used?)
<u>HOUSING EXPENSES</u>			
Rent/Mortgage	\$ _____ /mo	_____	_____
Electric & Gas	\$ _____ /mo	_____	_____
Phone	\$ _____ /mo	_____	_____
Water	\$ _____ /mo	_____	_____
All Other	\$ _____ /mo	_____	_____
<u>TRANSPORTATION EXPENSES</u>			
Car Payment & Insurance	\$ _____ /mo	_____	_____
Other Transp. Expenses	\$ _____ /mo	_____	_____
<u>PERSONAL EXPENSES</u>			
Groceries/Supplies	\$ _____ /mo	_____	_____
Health Insurance	\$ _____ /mo	_____	_____
Child Care/Elder Care	\$ _____ /mo	_____	_____
All Other	\$ _____ /mo	_____	_____
<u>TOTAL MONTHLY EXPENSES</u>	\$ _____ /mo		

Please list any additional sources of income or assistance that you were not required to report on a 2021 federal tax return (e.g. savings, retirement, pension/annuity, welfare benefits, food stamps):

Type of Income	Monthly Amount of Income
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_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____

You may use the space below for additional comments or explanation:

Student Signature _____ Date _____

Parent Signature _____ Date _____

Signature(s) of person(s) paying any or all of your expenses:

_____ Date _____
_____ Date _____

OFFICE USE ONLY

Counselor initials and date: _____

