

**A ADOPTION ADVOCATES OF GEORGIA, INC.**  
**FINANCIAL STATEMENT FOR ADOPTIVE PARENT(S)**

<b>Date:</b>		
<b>Family Name:</b>	<b>Father:</b>	<b>Mother:</b>
<b>Father's Occupation:</b>		
<b>Name &amp; Address of Employer:</b> _____ _____		
<b>Date Employed:</b>	<b>Monthly/Yearly Gross Salary:</b>	
<b>Mother's Occupation:</b>		
<b>Name &amp; Address of Employer:</b> _____ _____		
<b>Date Employed:</b>	<b>Monthly/Yearly Gross Salary:</b>	
<b>Other Household Income:</b>		
<b>Home:</b> _____ Own _____ Rent	<b>Monthly Payment/Rent:</b>	
<b>Amount of Mortgage:</b>	<b>Approximate Market Value:</b>	
<b>List all other Assets:</b>		

<b>Total Amount of Assets: (Including House)</b>	
<b>Life Insurance:</b>	
<b>Father:</b>	
<b>Mother:</b>	
<b>Health Insurance:</b> _____	
<b>Is an adoptive child covered from the date of placement:</b>	___ Yes ___ No
<b>Is there a waiting period for pre-existing conditions:</b>	___ Yes ___ No

**FINANCIAL STATEMENT FOR ADOPTIVE PARENTING**

<b>List all Outstanding Debts: (show total owed and monthly payments) Attach additional page if needed:</b>		
<b>(Name of Creditor)</b>	<b>(Total Owed)</b>	<b>(Monthly Payment)</b>
Credit Card(s): _____ _____ _____	_____ _____ _____	_____ _____ _____
Automobile(s): _____ _____	_____ _____	_____ _____
Bank Loan(s): _____ _____	_____ _____	_____ _____
Furniture /Appliance(s) _____	_____	_____
Student Loan(s): _____	_____	_____
Other (list): _____	_____	_____

Monthly Expenses: (List all monthly expenses by name and amount)

Attach additional page if needed:

<b>(Monthly Expense)</b>	<b>(Amount of Expense)</b>
Rent / Mortgage:	_____
Electricity:	_____
Gas:	_____
Water:	_____
Sewage:	_____
Telephone:	_____
Insurance:	_____
Automobile:	_____
Home:	_____
Health:	_____
Dental:	_____
Life:	_____
Medical and Prescription Expenses:	_____
Cable Television:	_____
Internet Service:	_____
Cell Phone:	_____
Groceries:	_____
Clothing:	_____
Tithes/Charitable Contributions:	_____
Child Support:	_____
Day Care:	_____
Other (list):	_____

Total Monthly Income (after withholding): \_\_\_\_\_

(-) Total Monthly Payments and Expenses: \_\_\_\_\_

(=) Available Monthly Surplus: \_\_\_\_\_