

FAMILY SAVINGS ACCOUNT

Client Name: _____

___ Application

___ Certificate of Eligibility

___ Contract

___ Enrollment Fee

___ Account (opening date ___/___/___)

___ Personal Outcomes I

___ Budget

___ Action Plan

___ Credit Check

___ Attended required classes (7 out of 9)

___ Personal Outcomes II

___ Final Evaluation

___ Matching Money used; for what _____

Proof of Income

___ Check Stub

___ Eligibility Letter (unemployment compensation)

___ Pink Receipts (Welfare Payments)

___ Other _____

___ Other _____