

## Student's Statement of Expenses and Resources

This form must be completed by all students regardless of tax filing status.

Class of \_\_\_\_\_

Student's Name \_\_\_\_\_

UCLA ID# No. \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Please itemize your expenses and resources for the period from January 1 through December 31 for the year 2003:

<b>Expenses</b>	<b>1/1/03 to 12/31/03</b>
Rent and/or campus room contract	_____
Utilities	_____
Gas and Electric	_____
Water and Trash	_____
Telephone	_____
Food	_____
Transportation	_____
Gas	_____
Maintenance/Repairs	_____
Insurance	_____
Car Payments	_____
Other	_____
Personal	_____
Clothing	_____
Recreation	_____
Miscellaneous _____	_____
Medical//Dental	_____
Registration Fees/Tuition	_____
Books and Supplies	_____
<b>Total Expenses</b>	_____

<b>Resources</b>	
Income from work - student	_____
Income from work - spouse	_____
Parental assistance	_____
Social Security benefits	_____
AFDC	_____
Food Stamps	_____
Savings used to meet expenses	_____
Child Support	_____
Financial Aid received	_____
Other Income (please specify source)	_____
1. _____	_____
2. _____	_____
<b>Total Resources</b>	_____

**Please Check One:**

During the AY 04/05 will you be living: Off-Campus \_\_\_\_\_ or With Family \_\_\_\_\_

**Please note:** This form is used to verify and supplement the information provided on the FAFSA and the NEED ACCESS application. It is also used to substitute for the tax form if the student is a non-filer.

Student's Signature

Date

Spouse's Signature

Date