



BARBADOS TEACHERS' CO-OPERATIVE CREDIT UNION LTD.

“THE JOHN W. LOVELL BUILDING”

LOWER COLLYMORE ROCK, ST. MICHAEL BB11115, BARBADOS, W.I.

TEL.: (246) 426-3657 FAX: (246) 437-3499

E-MAIL: info@barteachcredit.com

Website: www.barteachcu.com

PERSONAL MONTHLY BUDGET

GROSS SALARY	\$
Monthly	\$
Bi-Monthly	\$
Weekly	\$
Other Income	\$
Take-home pay	\$
Spouse take-home pay	\$
Tips & Bonuses	\$
Interest Income	\$
Rental Income	\$
Pensions & Social Security	\$
Business Income	\$
Other Income	\$
TOTAL INCOME	\$
EXPENDITURE	
Rent	\$
Mortgage Payments	\$
Property Taxes	\$
Electricity	\$
Cooking Gas	\$
Water	\$
Telephone	\$
Car Loan Payments	\$
Car Insurance	\$
Fuel & Oil	\$
Car Maintenance	\$
Bus & Taxi Fares	\$
House owner's Insurance	\$
Life Insurance	\$
Medical & Dental Costs	\$
School Tuition	\$
Uniforms, Books, etc.	\$

Food & Drinks	\$
Household Incidentals	\$
Clothing & Shoes	\$
Furnishings	\$
Home Improvement	\$
Entertainment & Vacation	\$
Covenants	\$
Charity	\$
Hire Purchases	\$
Credit Cards	\$
Bank Loans	\$
TOTAL EXPENDITURE:	\$
NET SURPLUS:	\$

I accept that this Declaration constitutes part of the Loan Application Form submitted to the Barbados Teachers’ Co-operative Credit Union Limited and all statements are true to the best of my knowledge. I understand that any false statements or declarations will null and void this application or payment to the stated beneficiaries.

Signature of Member:

Name of Member: (Print).....

Account Number:

Date:

Yours in co-operative faith
B'DOS TEACHERS' CO-OP. CREDIT UNION LTD.

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Dwaine Stuart
Operations Manager