



# WILLIAM PATERSON UNIVERSITY

FINANCIAL AID OFFICE  
300 POMPTON ROAD • WAYNE, NEW JERSEY 07470-2103  
973.720.2202 FAX 973.720.3133

## 2009 - 2010 Monthly Resource and Expenditure Statement Independent/Dependent Student

Student's Name: \_\_\_\_\_ Banner ID: \_\_\_\_\_  
Last First

### **INSTRUCTIONS (Please read carefully)**

The income that you and your spouse (if married), and/or your parents (if dependent) reported on the Free Application for Federal Student Aid (FAFSA) appears unusually low to support the family. You and your spouse (if married) and your parents (if dependent) must complete sections I, II, and the Certification. Return the completed form to the Financial Aid Office **within 7 business days**.

- *Attach a signed copy of the student's (and spouse's if married) 2008 Federal Income Tax Return. If the student (and/or spouse) did not receive any income from work or benefits, please state so. If the student (and/or spouse) worked but did not file a Federal Income Tax Return **and were not required to file**, submit copies of all W-2 forms.*
- ***Dependent students** must attach a signed copy of their parents' 2008 Federal Income Tax Return. If your parents did not receive any income from work or benefits, please state so. If your parents worked but did not file a Federal Income Tax Return **and were not required to file**, submit copies of all W-2 forms.*

**If you completed the 2009-10 FAFSA as an Independent student, you must answer the following question:**

Did you live with your parents in 2008 and were they your only source of financial support? \_\_\_yes \_\_\_no

If you answered "YES" to the above question, please sign below and you do not need to complete the rest of this form.

Student's Signature \_\_\_\_\_

### **SECTION I - 2008 MONTHLY PAID EXPENDITURES**

State the actual monthly dollar (\$) amount paid in 2008 next to each expense item. Enter 0 if you and your spouse and/or your parent(s) incurred no expenses for any item.

#### **Monthly Expenditures**

<b>Monthly Expenditures</b>	<b>Student/Spouse</b>	<b>Parents</b>
1. Home mortgage/Rental payment		
2. Real estate taxes		
3. Utilities (phone, gas, electric, water, heating, etc.)		
4. Food and household supplies		
5. Automobile payments		
6. Automobile insurance, gas, etc. and/or transportation		
7. Life and health insurance		
8. Medical expenses not covered		
9. Child care/Day care		
10. Clothing		
11. Credit cards		
12. Miscellaneous		
<b>Total Monthly Expenses</b>		

**SECTION II - 2008 MONTHLY RESOURCES**

List the financial resources and the monthly dollar (\$) amounts that were used to meet the expenses listed above. Include all resources such as wages, unemployment, disability, social security, pensions, SSI, credit card advances, personal loans, drawing account from business savings, etc. **Provide documentation confirming listed resources. (Examples of acceptable documentation are promissory notes, refinancing documents, savings account withdrawal statements, 1099 forms, etc.).**

<u>Resources</u>	<u>Amount Per Month</u>
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____
5. _____	_____
<b>TOTAL MONTHLY RESOURCES</b>	<b>\$ _____</b>

Are any of the expenses in section "I" paid by another person(s) or business?

\*Yes \_\_\_\_\_ No \_\_\_\_\_

*\*If yes, complete the information below.*

Type of expense paid	By whom (name)	Relationship	Amount per month
			\$

**Total Paid by Other(s)** \$ \_\_\_\_\_

Are the above-mentioned payments made in the form of a gift? Yes \_\_\_\_\_ No \_\_\_\_\_

Are the above-mentioned payments made in the form of a loan? Yes \_\_\_\_\_ No \_\_\_\_\_

Please describe any unusual circumstances: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**CERTIFICATION**

I (We) certify that the information in Section I and II above are correct and complete to the best of my (our) knowledge.

**RETURN THIS FORM AND ITS ATTACHMENTS TO THE FINANCIAL AID OFFICE**

Student's signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent's signature: \_\_\_\_\_ Date: \_\_\_\_\_  
**(If dependent)**

**FOR OFFICE USE ONLY**

Comments: \_\_\_\_\_  
\_\_\_\_\_