



OUWB Financial Services
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2018-2019 OUWB Student Expense and Income Form

A. Student's Information

Last Name	First Name	M.I.	Grizzly ID (G#)

B. Expenses & Income

Instructions: Please complete this form to document your expenses and income from:

January 1, 2016 – December 31, 2016

Student (and Spouse, if applicable) Expense Please enter your monthly expense for each category.		Student (and Spouse, if applicable) Income Please enter your monthly resources for each category.	
Mortgage or Rent *	\$	Wages	\$
Groceries	\$	Unemployment/ Workers Comp.	\$
Utilities	\$	Child Support Received	\$
Transportation	\$	Alimony or Separation Payments	\$
Insurance (medical, automotive)	\$	Social Security or Disability	\$
Medical/Dental (not covered)	\$	Pensions, Annuities, or Retirement	\$
Charge Cards	\$	TANF/ Welfare Benefits	\$
Personal Loans	\$	Veteran's Benefits	\$
Clothing/Miscellaneous	\$	Housing or other Living Allowances	\$
Other Payments: List Below	\$	Other Income: List Below	\$
Total**	\$	Total	\$

*If you reported "0" for Mortgage or Rent, explain in the space below how this expense was provided.

**If the total expenses listed exceed the student's (and spouse, if applicable) total income, please explain how the expenses were covered in the space below.

We certify the information reported on this form is true and correct to the best of our knowledge.

Student Signature _____ Date _____

Spouse Signature _____ Date _____