



DEADLINE FOR APPLICATION IS APRIL 26, 2019

Kiwanis Club of Castle Rock

PO Box 222 Castle Rock, CO 80104
(303)475-6130

PARENT FINANCIAL REPORT

<i>Name of Applicant:</i>
<i>Name of Father, Stepfather, or male guardian:</i>
<i>Occupation of above:</i>
<i>Name of Mother, Stepmother, or female guardian:</i>
<i>Occupation of above:</i>
<i>Ages of minors claimed as dependents:</i>

Please provide the following financial information

<i>What are the family's total wages before deductions?</i>
<i>What are the family's total income from other sources, taxable or not?</i>
<i>If you own a home, what is its market value?</i>
<i>If the home above has a mortgage(s), how much do you owe?:</i>
<i>What is the street address of the above home?</i>
<i>What is the family's total assets, other than the above home (stocks, bonds, other property, bank accounts, etc.)</i>
<i>Enter the value of any trusts of which the applicant is the beneficiary</i>

List any special family problems that are relevant to your being able to support the applicant.

I certify that the above information is true and complete.

Signature: _____ Date: _____