

SDAMAN

APPENDIX F

COMMANDING OFFICER'S FINANCIAL WORKSHEET

Disclosure of information on this format is voluntary. Possible adverse affects of nondisclosure could result in a decision being made to assign the subject to a special duty or independent duty assignment without consideration of information which, if known, might have had a bearing on that decision. The information solicited by this format is not to be included in any official system of records.

<u>Rank</u>	<u>Last Name, First Name, MI</u>	<u>SSN/MOS</u>
<u>Unit</u>	<u>MCC</u>	

1. GENERAL INFORMATION

Married	Number of Children/dependants (excluding spouse)
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2. MONTHLY INCOME (Note 1)

- a. Base Pay .....\$ \_\_\_\_\_
- b. PRO/SEP Rations.....+ \_\_\_\_\_
- c. SDA Pay - D.I. 275.00 RCTR 375.00.....+ \_\_\_\_\_  
MSG 110.00
- d. Other Income .....+ \_\_\_\_\_
- e. Total Monthly Income .....\$ \_\_\_\_\_

3. MANDATORY MONTHLY DEDUCTIONS (Note 2)

- a. FITW (Federal Tax) .....\$ \_\_\_\_\_
- b. Social Security .....+ \_\_\_\_\_
- c. Medicare .....+ \_\_\_\_\_
- d. SITW (State Tax) .....+ \_\_\_\_\_
- e. SGLI .....+ \_\_\_\_\_
- f. Dental Family .....+ \_\_\_\_\_
- g. Charity (Note 3 .....+ \_\_\_\_\_

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h. Allotments: \_\_\_\_\_ + \_\_\_\_\_  
(Note 4) \_\_\_\_\_ + \_\_\_\_\_

i. Advance Pay .....+ \_\_\_\_\_  
(Balance: \$ \_\_\_\_\_ )

j. Child Support/Alimony .....+ \_\_\_\_\_

k. Other .....+ \_\_\_\_\_  
(Explain: \_\_\_\_\_ )

l. Total Mandatory Monthly Deductions .....\$ \_\_\_\_\_

4. MONTHLY CREDIT PAYMENTS/RECURRING BILLS & OBLIGATED DEBTS  
(Note 5)

a. Car #1.....\$ \_\_\_\_\_

b. Car #2.....+ \_\_\_\_\_

c. Car Insurance .....+ \_\_\_\_\_

d. Personal Life Insurance .....+ \_\_\_\_\_

e. Credit Cards: \_\_\_\_\_ + \_\_\_\_\_  
\_\_\_\_\_ + \_\_\_\_\_  
\_\_\_\_\_ + \_\_\_\_\_  
\_\_\_\_\_ + \_\_\_\_\_  
\_\_\_\_\_ + \_\_\_\_\_  
\_\_\_\_\_ + \_\_\_\_\_  
\_\_\_\_\_ + \_\_\_\_\_

f. Loans: \_\_\_\_\_ + \_\_\_\_\_  
\_\_\_\_\_ + \_\_\_\_\_  
\_\_\_\_\_ + \_\_\_\_\_

g. Other: \_\_\_\_\_ + \_\_\_\_\_  
\_\_\_\_\_ + \_\_\_\_\_

h. Total Monthly Credit Payments..... \$ \_\_\_\_\_

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5. NET AVAILABLE FUNDS

- a. Total Monthly Income..... \$ \_\_\_\_\_
- b. Total Mandatory Monthly Deductions..... + \_\_\_\_\_
- c. Total Monthly Credit Payments..... + \_\_\_\_\_
- d. NET AVAILABLE FUNDS..... \$ \_\_\_\_\_

6. ADDITIONAL INFORMATION (Note 6)

- a. Savings Account(s): \_\_\_\_\_ \$ \_\_\_\_\_
- b. Checking Account(s): \_\_\_\_\_ + \_\_\_\_\_
- c. Investments: \_\_\_\_\_ + \_\_\_\_\_
- d. Total Amount Available ..... \$ \_\_\_\_\_
- e. Spouse Income..... \$ \_\_\_\_\_  
This income contributes to credit  
payments (Transferable Skill?) \_\_\_\_\_
- f. Do you own a home or mobile home? \_\_\_\_\_ yes/no  
When Purchased? \_\_\_\_\_
- g. If yes, monthly payment:..... \$ \_\_\_\_\_  
(Mortgage Balance: \$ \_\_\_\_\_ )

- NOTE 1: Do not include BAH in computing monthly income. BAH payments are considered to adequately cover housing expenses.
- NOTE 2: Normally those deductions found on the LES
- NOTE 3: NRS, CFC, USN/MC Retirement Home, etc.
- NOTE 4: Explain the type of allotment. Do not include dependent allotments. (i.e. child's savings bonds, etc.)
- NOTE 5: Do not include those creditors that are paid by an allotment listed under MANDATORY MONTHLY DEDUCTIONS. Do not include rent, mortgage, utilities, telephone, etc. Do include recurring bills paid by spouse.
- NOTE 6: The items listed under ADDITIONAL INFORMATION are intended to provide amplification of your financial status. (Include mutual funds, IRA, etc., under savings investments.)

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\_\_\_\_\_  
Signature of Marine

\_\_\_\_\_  
Date

Based upon my assessment, I find this Marine financially Qualified/Unqualified. The finding of UNQUALIFIED is amplified in the remarks below.

\_\_\_\_\_  
\_\_\_\_\_  
Signature of Commanding Officer \_\_\_\_\_