

# Statement of Counseling Services

*Please read the following statements carefully so that you will understand the procedures for the counseling session. Initial the line next to each statement to indicate your understanding of that provision.*

\_\_\_\_\_ I/We understand Consumer Credit Counseling Service of Central Pennsylvania will provide a confidential personal money management interview.

\_\_\_\_\_ I/We understand that the interview will be conducted by a certified consumer credit counselor or a qualified professional counselor. All action plans not conducted by a certified consumer credit counselor will be reviewed by a consumer credit counselor.

\_\_\_\_\_ I/We understand that in the event we are dissatisfied, we may contact the counselor's superior.

\_\_\_\_\_ I/We understand that most of CCCS funding comes from voluntary contributions from creditors who participate in Debt Management Plans ("DMP"). Since creditors have a financial interest in getting paid, most are willing to make a contribution to help fund our agency. These contributions are usually calculated as a percentage of payments you make through your DMP – up to fifteen percent (15%) of each payment received. However, your accounts with your creditors will always be credited with one hundred percent (100%) of the amount you pay through us and we will work with all your creditors regardless of whether they contribute to our agency. Additionally, I/we understand that, in the event of a debt management plan, there will be a \$35 start-up fee, which must be submitted before contact with creditors may begin. A monthly fee will also be made in conjunction with my/our monthly deposits. The fee ranges from \$5 to \$25 per month based on the amount of disbursement.

\_\_\_\_\_ I/We hold Consumer Credit Counseling Service of Central Pennsylvania, its employees, agents and volunteers harmless from any claim, suit, action or demand of my/our creditors, my/ourselves or any other person resulting from advice or counseling.

\_\_\_\_\_ **I/We will be given a written assessment outlining a suggested client action plan which will be based on the following options:**

a) I/We will handle any financial concerns on my/our own.

b) I/We may choose to enroll in CCCS of Central Pennsylvania's debt management plan. Under the debt management plan CCCS serves as a neutral third party in negotiating with creditors to liquidate financial obligations.

Consumer Credit Counseling Services of Central Pennsylvania has no responsibility or obligation for any past, present, or future credit rating I/we receive. **In certain circumstances, a debt management plan may affect my/our credit rating negatively.** In the event that the counselor suggests a debt management plan, I/we will receive complete details of the operations, requirements, and responsibilities.

c) A counselor may answer questions about bankruptcy but not give legal advice. If I/we want legal advice, I/we will be referred for appropriate assistance. While an attorney can make a recommendation to file bankruptcy, it is a personal choice based on individual circumstances. I/We will inform CCCS of Central Pennsylvania of an attorney's advice and our subsequent decision.

d) I/We will be referred to the other services of our organization or another agency or agencies as appropriate that may be able to assist with particular problems that have been identified.

\_\_\_\_\_ At some time in the future CCCS of Central Pennsylvania or a neutral third party may contact me/us to request an evaluation of the agency's services.

\_\_\_\_\_  
Applicant

\_\_\_\_\_  
Counselor

\_\_\_\_\_  
Applicant

\_\_\_\_\_  
Date



<b>Category</b>	<b>You</b>	<b>Partner</b>	<b>Child(ren)</b>
<b>Full-time Job</b>			
<b>Part-time Job</b>			
<b>Other Jobs</b>			
<b>Government Benefits</b>			
<b>Child or Spousal Support</b>			
<b>Other Sources</b>			
<b>Total Monthly Income</b>			
<b>Rent or Mortgage</b>			
<b>Taxes</b>			
<b>Home Maintenance</b>			
<b>Homeowners or Renters Insurance</b>			
<b>Electricity</b>			
<b>Gas/Oil/Propane</b>			
<b>Telephone</b>			
<b>Water/Sewer/Trash</b>			
<b>Groceries &amp; Supplies</b>			
<b>Work and/or School Lunches</b>			
<b>Dining Out</b>			
<b>Gasoline for Vehicle(s)</b>			
<b>Auto Registration &amp; Inspection</b>			
<b>Car Maintenance</b>			
<b>Auto Insurance</b>			
<b>Public Transportation</b>			
<b>Barber/Beauty Shop</b>			
<b>Allowance &amp; School Expenses</b>			
<b>Cosmetics/Toiletries/Baby Supplies</b>			
<b>Tobacco/Alcohol</b>			
<b>Medical Expenses</b>			
<b>Health Insurance</b>			
<b>Clothing</b>			
<b>Laundromat/Dry Clean</b>			
<b>News Magazine Subscription</b>			
<b>Gifts: Xmas, Birthdays, Anniversaries, etc.</b>			
<b>Donations</b>			
<b>Cable TV</b>			
<b>Videos &amp; Movies</b>			
<b>Hunt/Fish/Sports/Crafts/Hobbies</b>			
<b>Gambling</b>			
<b>Pets</b>			
<b>Child Care</b>			
<b>Alimony/Child Support</b>			
<b>Life/Disability Insurance</b>			
<b>Vacations/Miscellaneous</b>			
<b>Total Monthly Expenses</b>			