

Buckingham Relief in Need Charity
(a registered charity)

Ancient Parish of Buckingham (Buckingham, Gawcott, Lenborough and Bourton)

1.	What is your full name? (Please state whether Mr, Mrs or Miss)	
2.	What is your present address and telephone number?	
3.	How long have you resided in the Parish of Buckingham?	
4.	What is your age?	
5.	Do you receive any of the following:-	
a)	Widows pension	
b)	Retirement pension	
c)	Employment and support allowance (ESA)	
d)	Jobseeker's allowance (JSA)	
e)	Pension credit	
f)	Working tax credit	
g)	Child tax credit	
h)	Disability living allowance (DLA)	
i)	Child benefit	
j)	Carer's allowance	
k)	Attendance allowance	
	If the reply to any of the above is yes, please state amount of each	
6.	Have you any other income in addition to that mentioned in no. 5 above?	

7.	Please give details of the following expenditure:-	
a)	Loans (including car loans)	
b)	Water rates	
c)	Gas	
d)	Electricity	
e)	Housekeeping	
f)	Telephones (including mobiles)	
g)	TV license	
h)	Car insurance	
i)	Car tax	
j)	Petrol	
k)	Fares	
l)	Life insurance	
m)	Pension scheme	
n)	Buildings and contents insurance	
o)	Clothing	
p)	Child care	
q)	Cigarettes / alcohol	
r)	Any fines outstanding	
8.	Have you any dependents living at home? If the answer is yes, please give full particulars	
9.	(a) Do you own the house or flat in which you live? (b) If the answer to (a) is yes, is there any mortgage on the house? (c) If the answer to (a) and (b) is yes, please state the amount of the monthly repayments	
10.	(a) Do you rent the house or flat in which you live? (b) If the answer is yes, what is the amount of the weekly or monthly rent?	

11. How much do you pay half yearly in council tax?	
12. (a) Do you have any savings or other investments? (b) If the answer to (a) is yes, please give full details	
13. (a) Do you receive any wage or salary? (b) If the answer to (a) is yes, please state the weekly or monthly amount	
14. Do you receive money from any other charity? If yes, please give details	
15. Is there any other fact, emergency or unexpected expenditure that you have incurred which will assist the Trustees in deciding whether to make you a grant?	

I recommend this application to the Trustees

Signature.....

Name.....

Date

Occupation.....

Please return this form to
Miss K Phillips, 78 London Road,
Stony Stratford, Milton Keynes, MK11 1JH.

Proof of identify will be required if your application is successful