

DEPARTMENT OF HOMELAND SECURITY
U.S. COAST GUARD

STATEMENT OF FINANCIAL OBLIGATIONS/SPOUSE'S CONSENT

NAME (<i>Last, First, Middle</i>)	RATE	NO. OF DEPENDENTS
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(X) ONE	<input type="checkbox"/> BUYING HOME	MORTGAGE COMPANY	MONTHLY PAYMENT (<i>Including Utilities</i>)
	<input type="checkbox"/> BUYING MOBILE HOME		
	<input type="checkbox"/> RENTING HOME	LANDLORD	MONTHLY RENT (<i>Including Utilities</i>)
	<input type="checkbox"/> RENTING MOBILE HOME		

OUTSTANDING DEBTS

NAME OF COMPANY	FOR PURCHASE OF	TOTAL OWED	MONTHLY PAYMENT
TOTALS			

Dependents presently under care of physician (<i>Include wife, if pregnant</i>)	INCOME		
	Monthly Coast Guard income (<i>Include quarters allowance</i>)		
	Spouse's monthly income		
	Other monthly income (<i>Explain in Remarks</i>)		
	Total		
	Total monthly expenditures		
	Balance		

I CERTIFY that the above is a true account of my family status and financial obligations to the best of my knowledge and belief as of this date.

SIGNATURE OF RECRUITER	DATE	SIGNATURE OF APPLICANT	DATE
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CERTIFICATION ON DAY OF ENLISTMENT

I CERTIFY that no additional debts have been incurred by me since execution of the above certificate, or, I certify that the following additional debts have been incurred by me since execution of the above certificate (if none, so state).

SIGNATURE OF ENLISTING OFFICER	DATE	SIGNATURE OF ENLISTEE	DATE
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I, _____ the spouse of _____
 certify that should my spouse be accepted for entrance into the United States Coast Guard or Coast Guard Reserve in the rate or rank of _____ no effort will be made to secure his/her discharge on the grounds of dependency of his/her presence at home. I understand that his/her basic rate of pay is \$ _____ per month, quarters allowance \$ _____ per month, plus any other special pay or allowances that he/she may be entitled to from time to time, and I am prepared to support myself and our children on his/her Coast Guard pay. I further understand that his/her period of obligation is for _____ years and that I am not aware of any circumstances now existing or that can be foreseen which will cause me to request his/her discharge prior to the expiration of his/her obligation.

REMARKS

DATE

SIGNATURE OF RECRUITER OR NOTARY PUBLIC

SIGNATURE OF SPOUSE

