

FFT™ Financial Counseling Service Entry

(Required elements are underlined.)

Client Name: _____

Date: _____

Start time: _____

Duration (in minutes): _____

Staff Person: _____

Contact Location/Method: In person By phone By email By fax By mail By text message By social media Other

Did you reach the person you attempted to contact? Yes No

Contact with: Client Employer Service Provider Other

Story	Name of Entity	Status	Details
Apartment Rental			
Auto Insurance			
Auto-Title Loan			
Bankruptcy (Chapter 7)			
Bankruptcy (Chapter 11)			
Bankruptcy (Chapter 13)			
Car Purchase (cash)			
Car Purchase (loan)			
Certificate of Deposit			
Checking Account			
ChexSystems Error			
Child Support (for Petitioner)			
Credit Builder Loan (with match)			<input type="checkbox"/> Twin Accounts?
Credit Builder Loan (without match)			<input type="checkbox"/> Twin Accounts?
Credit Card (includes store cards)			Type of Credit Card: <input type="checkbox"/> Secured <input type="checkbox"/> Unsecured Paying: <input type="checkbox"/> Minimum <input type="checkbox"/> More than minimum <input type="checkbox"/> Entire balance

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Credit Report Error			
Debt Consolidation Loan			
Debt Consolidation Program			
Delinquent Bill			Type of Delinquent Bill <input type="checkbox"/> Medical <input type="checkbox"/> Non-Medical
Educational Savings Account			
Home Equity Loan (HELOC)			
Home Loan (purchase/refinancing)			
Homeowner/Renter Insurance			
Identification Acquisition			
Identification Error			
Identity Theft			
Individual Development Account			
Informal Loan			
Investment Portfolio (non real estate)			
Judgment (i.e. child support arrears)			
Lending Circle			
Life Insurance			
Line of Credit (not HELOC)			
Microenterprise Loan			
Other Formal Loan			
Payday Loan			
Property Tax Appeal			
Property Tax Exemption			
Real estate investment (loan)			
Refund Anticipation Loan			
Rent-to-own Plan			
Retirement Account			
Reverse Mortgage			
Savings Account			
Stored Value Card (prepaid card)			
Student Loan			
Tax Arrears			
Transaction Dispute			

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(Required elements are underlined.)

Notes: _____

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