



FSA Home Purchase Action Plan

FSA Case Manager: Harriet Gibbs - M- F 9 a.m to 4 p.m. **412-487-6316**
 FSA Assistant Case Manager: Marleen - evenings, 412-366-7113

North Hills Community Outreach (NHCO), 1975 Ferguson Rd., Allison Park, PA 15101-3235

A. Approved Plan:

1st Year: Amount saved weekly? \$ _____ X 52 wks = \$ _____

2nd Year: Amount saved weekly? \$ _____ X 52 wks = \$ _____

Lump Sum Deposits (\$1,000 max over 2 years): \$ _____

Personal Savings Total: \$ _____

+ 100% FSA Match: \$ _____

TOTAL FSA SAVINGS = \$ _____

If I decide to change this plan, I must contact my FSA Case Manager.

B. Open my FSA account. Bring the bank the Authorization & Release Form

- ② Set up Direct Deposit (if possible)
- ② Notify Harriet that my account is open & give her the account number .
- ② My **Goal Date** _____ is 24 months from the Date my Account was opened
 _____ . However, it is possible to complete the program in 12 months plus one day.
- ② If I encounter a financial hardship and can not make my Approved Plan deposits - I must contact Harriet immediately. **ANY WITHDRAWAL without written authorization is cause for termination from the FSA program.**

FSA Program participants are permitted to make one lump sum deposit of \$500 once a year to increase the match amount (savers are still required to save the minimum of \$10 per week). Please indicate if you plan to make such deposits during your saving period.

C. Complete Budget and Return to NHCO.

D. Attend 4 Money Management Workshops Designed Especially for Home Buyers

Date: _____ Workshop _____

Date: _____ Workshop _____

Date: _____ Workshop _____

Date: _____ Workshop _____

Participate in two Electives that encompass any in a wide range of life management & asset building topics. (examples: Lowes home improvement, library computer training, etc., meeting about your budget

Date: _____ Elective _____

Date: _____ Elective _____

