

FINANCIAL WORKSHEET

Loan# _____

Borrower _____ Social Security # _____ DOB: __ / __ / 19__

Co-Borrower _____ Social Security # _____ DOB: __ / __ / 19__

Property Address _____ City, State, Zip _____

Number of Dependents _____ Contact Number _____

HOUSEHOLD INCOME

Borrower Employment _____ How Long? _____

Position _____ Commissions / Gross Yearly Pay \$ _____

Weekly / Biweekly Gross Pay \$ _____ Net Pay \$ _____

Co-Borrower Employment _____ How Long? _____

Position _____ Commission / Gross Yearly Pay \$ _____ Net Pay \$ _____

If you receive any other income please list each amount received on a monthly basis.

Room Rental \$ _____ Tips \$ _____ Mileage \$ _____ 2nd Business \$ _____ Other \$ _____

*NOTE - if you have medical, IRA, union dues, life insurance withdrawn from your paycheck put these expenses below on right side for the month.

MONTHLY EXPENSES

			<u>Deducted from Paycheck</u>	
Mortgage 1 _____	Phone _____	Credit Card 1 _____	Union Dues _____	
Mortgage 2 _____	Cable _____	Credit Card 2 _____	Health Ins _____	
Mortgage 3 _____	Electric _____	Credit Card 3 _____	401k _____	
Loans _____	Internet _____	Educational Loans _____	Dental _____	
HELOC _____	Heating _____	Car 1 _____	IRA _____	
HOA Dues _____	Groceries _____	Car 2 _____	Life Ins _____	
Taxes _____	Entertainment _____	Auto Ins _____	Medical _____	
Insurance _____	School Lunch _____	Gas - Fuel _____	Child Custody _____	
Water/Sewer _____	Child Care/Tuition _____	Tolls _____	IRS Back Taxes _____	
Trash _____	Dry-cleaning _____	Car Maintenance _____		
Rent _____	Pets _____	Religious Cont _____		

Brief Hardship on what happened? Give dates.

What you would like to do now??

I (we) certify that the financial information stated above is true, and is an accurate statement of financial conditions.

Borrower _____ Date _____

Co-Borrower _____ Date _____