

## Financial Statement

Mortgager Name: \_\_\_\_\_

Co-Mortgager Name: \_\_\_\_\_

Loan # \_\_\_\_\_

Property Address: \_\_\_\_\_  
\_\_\_\_\_

Mailing Address: \_\_\_\_\_  
\_\_\_\_\_

Borrower Work Phone \_\_\_\_ - \_\_\_\_ - \_\_\_\_ Home Phone \_\_\_\_ - \_\_\_\_ - \_\_\_\_

Co-Borrower Work Phone \_\_\_\_ - \_\_\_\_ - \_\_\_\_ Home Phone \_\_\_\_ - \_\_\_\_ - \_\_\_\_

E-Mail Address: \_\_\_\_\_

Total Number of Persons Living in the Property: \_\_\_\_\_

Have you contacted an approved Credit Counselor: \_\_\_\_\_

Please provide the name, telephone number and company of your counselor:  
\_\_\_\_\_  
\_\_\_\_\_

Do you receive government assistance (food stamps, disability, etc): Yes No  
If yes, please provide proof.

Do you receive any additional income other than wages: (I.E. rent, child, support, alimony, etc.) \_\_\_\_\_

If yes, amount \$ \_\_\_\_\_ /Month. Please provide proof.

How often are you paid \_\_\_\_ WEEKLY \_\_\_\_ BI-WEEKLY \_\_\_\_ MONTHLY \_\_\_\_ OTHER

Are you self employed: \_\_\_\_ If so provide a profit and Loss Statement for the past six months.

Do you own any properties other than the above referenced: Yes NO  
If yes, how many: \_\_\_\_\_ Total Monthly Payment(s) \$ \_\_\_\_\_

Number of cars you own: \_\_\_\_\_

Please complete the below section listing the "monthly" total for each debt:

Auto Loans: (1)	\$ _____	(1) \$ _____	\$ _____
Credit Cards: Number of Accounts:	_____	Mo. Payment (2)	\$ _____
Medical/Life Insurance (not deducted from salary)(3)	\$ _____		
Auto Insurance (3)	\$ _____	Med/Doctor Bills(4)	\$ _____
Alimony (5)	\$ _____	Child Support (5)	\$ _____
Child Care (6)	\$ _____	Student Loans (7)	\$ _____
Equity/Other Loans (8)	\$ _____	Food (9)	\$ _____
Telephone/Cell Phn.(10)	\$ _____	Home Security (10)	\$ _____
Gas/Elec/Water/Trash(11)	\$ _____	Appliance rent (11)	\$ _____
Donations (12)	\$ _____	Other/Misc. (12)	\$ _____
Gas/Parking (13)	\$ _____	Auto Maint. (13)	\$ _____
Cleaning Supplies (14)	\$ _____	Clothes/Dry Cln(15)	\$ _____
Newspaper/Magazines(16)	\$ _____	Internet (16)	\$ _____
Cable (17)	\$ _____	Satellite (17)	\$ _____
Entertainment (17)	\$ _____	Mortgage Payment	\$ _____

I (we) agree that the financial information provided above is an accurate statement of my (our) financial status. I understand and acknowledge that any action taken by the lender of my mortgage loan account on my behalf will be made in strict reliance on the financial information provided. My signature below grants the holder of my mortgage the authority to confirm the information we have disclosed in the statement, to verify that it is accurate by ordering a credit report and to contact my realtor and/or credit counseling representative (if applicable). I (we) also authorize the following person(s) to gain access to information regarding my (our) account. Please indicate a date that you wish for this authorization to expire.

_____	_____	_____
Authorized party	Date	
_____	_____	_____
Borrower	Date	
_____	_____	_____
Co-Borrower	Date	