LOAN NUMBER		
ADDRESS:		
PLEASE SIGNED AND DATE BELOW:		
(Print Name: Borrower)	(Signature)	(Date)
(Print Name: Co-Borrower)	(Signature)	(Date)
MONTHLY EXPENSE	AMOUNT	
Mortgage/Rent	\$	
Second Mortgage/Rent	\$	
Food	\$	
Misc (Please explain) \$		
UTILITIES (MONTHLY)		
Electric	\$	
Home Gas	\$	
Water/Sewer	\$	
Cable/Satellite/Internet \$		
Phone/Landline/Cell \$		
Others (Please explain) \$		
TRANSPORTATION (MONTHLY		
Car Payment 1 \$		
Car Payment 2	\$	
Gas \$		
Car Insurance \$		
Repairs/Maintenance \$		
Others (Please explain)		
INSURANCE (MONTHLY)		
Life Insurance	\$	
Health Insurance (not on pay checks)		
Others (Please explain) \$		
DEBT PAYMENTS (MONTHLY)		
Credit Card 1 \$		
Credit Card2	\$	
Credit Card 3 \$		
Personal Loans/Tuition \$		
Others (Please explain)	\$	