

APPLICANT FINANCIAL STATEMENT

ASSETS			
MONTHLY INCOME		SAVINGS	
Primary Salary (After Taxes)		Retirement	
Secondary Salar (After Taxes)		Retirement	
Other		Other	
Other		Other	
Other		Other	
TOTAL		TOTAL	

EXPENDITURES		
	MONTHLY PAYMENT	BALANCE
Rent/Mortgage		
Groceries		
Utilities		
Water		
Car Loan Payment		
Car Insurance		
Car Repairs/Maintenance		
Gas/Transportation		
Health/Dental Insurance		
Phone/Cell Phone		
Internet		
Cable/Satellite		
Entertainment		
Credit Cards		
HOA Dues		
Child Care		
School Activities		
Life Insurance		
Religious Contributions		
Student Loans		
Other		
TOTAL		

TOTAL INCOME	
TOTAL EXPENSES	
NET INCOME	

I/we hearby assert that the above information is true and correct.

Signature _____

Spouse Signature _____

Date _____

Applicant Financial Statement