

Financial Worksheet for Loan Modification

Borrower Name _____	SS# _____	Co-Borrower Name _____	SS# _____
Property Address _____	City _____	State _____	Zip _____
Mailing Address _____	City _____	State _____	Zip _____
Home Phone _____	Work Phone _____	Cell _____	Fax _____
Best time to Call _____		Email _____	
Borrower Employer _____	Position _____	<input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/> Unemployed <input type="checkbox"/> Self-Employed <input type="checkbox"/> Retired	
Occupant Employer _____	Position _____	<input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/> Unemployed <input type="checkbox"/> Self-Employed <input type="checkbox"/> Retired	
Borrower Income Frequency _____	<input type="checkbox"/> Weekly <input type="checkbox"/> Bi-Weekly <input type="checkbox"/> Semi Monthly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Yearly		
Additional Occupants Income Frequency _____	<input type="checkbox"/> Weekly <input type="checkbox"/> Bi-Weekly <input type="checkbox"/> Semi Monthly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Yearly		
Mortgage Company Name: 1 _____	2 _____	Loan # 1 _____	2 _____

Income		Borrower Income		Occupant Income		Assets / Liabilities		
	Gross	Net	Gross	Net	Description	Value	Owe	Net
Income					Auto			
Disability					Checking/Saving			
Rental					IRA			
Unemployment					401K			
Child Support					Stocks/Bond/CDs			
Other					Other			
Total					Total			

Household Liabilities and Expenses						
Expenses	Payments	Balance Due	Expenses	Payments	Balance Due	
Alimony Child Support			Clothing			
Auto Expense(gas repairs)			Dry Cleaning			
Child Care/Elder Care			Monthly Parking			
Other Mortgages			Club or Union Dues			
Education			School or Work Lunch Cost			
Medical			HOA Dues			
Pets			Other			
Spending Money			Debts			
Other Expenses			Auto Loan			
Auto Insurance			Credit Cards			
Health Insurance			Installment Loans			
Life Insurance			Mortgage Payment			
Hospital			2 nd Loan Payment			
Prescriptions			Property Tax & Insurance			
Cable			Personal Loans			
Electricity			Other Secured Debts			
Gas			Other Unsecured Debts			
Phone/Cell/Internet			Other			
Water/Sewage			Total Expense / Debts			