

Income and Expenses Analysis

Borrower 1

Name of Employer:		
Address of Employer: (street)		
City:	State:	Zip Code:
Frequency of Pay: <input type="checkbox"/> Weekly <input type="checkbox"/> Bi-Weekly <input type="checkbox"/> Bi-monthly <input type="checkbox"/> Monthly <input type="checkbox"/> Other: _____		

Description		Income		Total
Gross Salary / Wages		\$	\$	\$
Overtime Pay		\$	\$	\$
Commissions		\$	\$	\$
Bonuses		\$	\$	\$
L E S S	Taxes	Federal	\$	\$
		FICA	\$	\$
		State	\$	\$
		Other	\$	\$
Net Pay		\$	\$	\$

Borrower 2

Name of Employer:		
Address of Employer: (street)		
City:	State:	Zip Code:
Frequency of Pay: <input type="checkbox"/> Weekly <input type="checkbox"/> Bi-Weekly <input type="checkbox"/> Bi-monthly <input type="checkbox"/> Monthly <input type="checkbox"/> Other: _____		

Description		Income		Total
Gross Salary / Wages		\$	\$	\$
Overtime Pay		\$	\$	\$
Commissions		\$	\$	\$
Bonuses		\$	\$	\$
L E S S	Taxes	Federal	\$	\$
		FICA	\$	\$
		State	\$	\$
		Other	\$	\$
Net Pay		\$	\$	\$

Other Sources of Income

Description	Income		Total
Social Security Income	\$	\$	\$
Rental Income	\$	\$	\$
Child Support / Alimony	\$	\$	\$
Other:	\$	\$	\$

Assets / Liabilites

Description	Estimated Value	Amount Owed	Net Value
Home	\$	\$	\$
Other Property	\$	\$	\$
Automobile	\$	\$	\$
Automobile	\$	\$	\$
Bank Accounts	\$	\$	\$
Boats	\$	\$	\$
Cash Value of Life Insurance	\$	\$	\$
Collections	\$	\$	\$
Computers	\$	\$	\$
IRA / Keogh Accounts	\$	\$	\$
Stocks / Bonds / CD's	\$	\$	\$
Trailers	\$	\$	\$
IRS Liens	\$	\$	\$
Other	\$	\$	\$
Other	\$	\$	\$
Other	\$	\$	\$
Other	\$	\$	\$
Totals			

Expenses

Category	Description				
		Payment #1	Payment #2	Payment #3	Total
Automobile	Automobile Gasoline	\$	\$	\$	\$
	Automobile Insurance	\$	\$	\$	\$
	Automobile Loans	\$	\$	\$	\$
	Automobile Maintenance	\$	\$	\$	\$
	Automobile Parking	\$	\$	\$	\$
	Other Transportation	\$	\$	\$	\$
Utilities And Bills	Alimony / Child Support	\$	\$	\$	\$
	Cable TV Satellite	\$	\$	\$	\$
	Club and Union Dues	\$	\$	\$	\$
	Heating/ Electricity	\$	\$	\$	\$
	IRS Payments	\$	\$	\$	\$
	Online Service	\$	\$	\$	\$
	Rent	\$	\$	\$	\$
	School Tuition	\$	\$	\$	\$
	Telephone/ Pager/ Cell Phone	\$	\$	\$	\$
	Utilities (nonPrimary)	\$	\$	\$	\$
	Water/ Sewage	\$	\$	\$	\$
Loans	Credit Cards	\$	\$	\$	\$
	Finance Co./Installment Loan	\$	\$	\$	\$

	Furniture/Appliance	\$	\$	\$	\$
	Other Loan	\$	\$	\$	\$
	Student Loan	\$	\$	\$	\$
Mortgage	Homeowner's Association Spec.	\$	\$	\$	\$
	Homeowner's/Condo Fees	\$	\$	\$	\$
	Insurance (non Primary)	\$	\$	\$	\$
	Insurance (Primary Residence)	\$	\$	\$	\$
	Other Mortgage	\$	\$	\$	\$
	Property maint. (Non Primary)	\$	\$	\$	\$
	Property maint. (Primary res.)	\$	\$	\$	\$
	Real Estate Taxes(non primary)	\$	\$	\$	\$
	2nd Mortgage / Home Equity Ln	\$	\$	\$	\$
	Taxes on Primary Residence	\$	\$	\$	\$
Daily Expenses	Child Care	\$	\$	\$	\$
	Clubs, Sports, Hobbies	\$	\$	\$	\$
	Dry Cleaning/Uniforms	\$	\$	\$	\$
	Entertainment - Movies, Dining	\$	\$	\$	\$
	Groceries & Toiletries	\$	\$	\$	\$
	Religious/Charitable Contr.	\$	\$	\$	\$
	Spending Money	\$	\$	\$	\$
Medical Expenses	Dental Expense	\$	\$	\$	\$
	Health Insurance (non payroll)	\$	\$	\$	\$
	Life Insurance	\$	\$	\$	\$
	Medical Expenses	\$	\$	\$	\$
	Prescription Drugs	\$	\$	\$	\$
Other	Financial Counsel	\$	\$	\$	\$
	IRA	\$	\$	\$	\$
	Legal Counsel	\$	\$	\$	\$
	Other Expense:	\$	\$	\$	\$
	Other Expense:	\$	\$	\$	\$
	Savings Bonds	\$	\$	\$	\$
	Time Share Property	\$	\$	\$	\$
	Vacations	\$	\$	\$	\$
Total of All Expenses					\$

Recap

Item	Current
Total Income	\$
Total Expense	\$
Difference	\$