

Borrower: _____ Co-Borrower: _____

Property Address: _____

Loan No.: _____ Lender: _____

INCOME AND EXPENSE FORM

MONTHLY EXPENSES PAID

Mortgage/Rent	\$ _____
Second Mortgage	\$ _____
Utilities	
Electric	\$ _____
Gas	\$ _____
Phone	\$ _____
Water/Sewer/Trash	\$ _____
Cable/TV	\$ _____
Food	\$ _____
Vehicle Loan(s)	\$ _____
Health/Life Insurance	\$ _____
Transportation/Auto Fuel	\$ _____
All other Credit Cards	
Charge Accts/Gas/Dept Store	\$ _____
Medical Expenses	\$ _____
Child Care	\$ _____
Total Monthly Expense	\$ _____

MONTHLY INCOME RECEIVED

Wages (Borrower)	\$ _____
Wages (Co-Borrower)	\$ _____
Rental	\$ _____
Contributions	\$ _____
Unemployment	\$ _____
Welfare (Type) _____	\$ _____
Retirement/Pension	\$ _____
Child Support/Alimony	\$ _____
Disability	\$ _____
Veterans Benefits	\$ _____
Total Monthly Income	\$ _____

Signature

Date