

FINANCIAL ASSESSMENT

The following information will be included in your Home Study and should match your **current** income and expenses. If your salary is different than what is reported on your most recent tax return, please have your employer provide a letter verifying your current salary.

DO NOT LIST YEARLY TOTALS! If an item does not apply, please enter 0

MONTHLY INCOME (INDIVIDUAL)

	APPLICANT 1:	APPLICANT 2:
Monthly Gross Income		
Monthly Investment Income		
Monthly Alimony/Child Support Income		
Monthly State/Federal Assistance Income		
Other Monthly Income		
Total Gross Monthly Income	\$ -	\$ -
Total Monthly Net Income (Subtract all deductions taken from gross pay such as payroll taxes, retirement contributions, etc.)	\$	\$

TOTAL/JOINT MONTHLY HOUSEHOLD EXPENSES

Do not list items that are deducted from your paycheck (i.e. health insurance, life insurance, retirement contributions, etc.)

	TOTAL AMOUNT PER ITEM
Rent/Mortgage	
Real Estate Taxes	
Home Owner's Association Dues	
Car Payment(s)	
Utilities (phone, cell, gas, water, electric, internet, cable)	
Home Owner's/Renter's Insurance	
Car Insurance	
Alimony and/or Child Support	
Food/Groceries	
Clothing	
Family Fun/Entertainment	
Medical/Prescription Expenses	
Life Insurance Premiums	
Credit Card Payment(s)	
Investment/Retirement Contributions	
Charitable/Religious Contributions	
Student Loan Payments	
Other	

Other	
TOTAL MONTHLY EXPENSES	\$ -

Average monthly checking account balance	
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FINANCIAL ASSETS

Value of Residence 1	
Value of Residence 2	
Amount in Savings	
Amount in Investments (Retirement & Other)	
Value of Cars	
Other Assets	
Other Assets	
TOTAL ASSETS	\$ -

FINANCIAL LIABILITY

Mortgage Balance on property owned	
Mortgage Balance on property owned	
Loan Balance for Cars	
Credit Card(s) Balance	
Student Loan(s) Balance	
All other outstanding loans	
TOTAL LIABILITY	\$ -

LIFE INSURANCE COVERAGE

Applicant 1:	
Applicant 2:	

Applicant 1 Signature

Applicant 2 Signature

Date

Date