## **BUDGET WORKSHEET**

## ~San Mateo~ Credit Union

Please complete all sections as thorougly and accurately as possible. Unanswered questions may delay processing.

Member Name									
Member No.									
Co-Signer / Co-Applicant									
Co-Signer Member No. (if different)									
Please provide your current phone numbers.									
Primary			Co-S	Signer					
Primary Employer			Co-S	Signer Er	mployer				
Primary Mobile			Co-S	Signer M	obile				
,		□ No □ No							
If your home is not financed with SMCU, wha			of your p	oroperty	?				
Address									
City, State, Zip									
How many people live at your address?	<b>]</b> 1	<b>2</b> 2	<b>3</b>	<b>4</b>	<b>5</b>	<b>□</b> 6 or	more		
Are you or the co-borrower living in the prop	perty?		☐ Yes	☐ No					
Why are you having trouble with your home loan payments (select all that apply)?									
☐ Payment Amount Changed ☐ Illness			☐ Loss	oss of employment			iced Income		
☐ Death ☐ Other (please explain)									
How many of the people living at this address	ss are de	penden	ts?	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>	☐ 6 or more
Would you prefer to keep your home or sell it? ☐ Keep it			it	☐ Sell i	t				
If you want to sell it, is it listed for sale?		☐ Curre	ntly liste	d	☐ Lissted previously		☐ Neve	er isted	
Do you have any other loans on the home?	[	☐ Yes	□ No						
If you have other loans on the home, approximately how much do you owe on all other loans combined? \$									
Have you spoken with a debt counselor?	[	☐ Yes	☐ No						
How many cars do you own?	[	<b>1</b>	<b>2</b> 2	<b>3</b>	□ 4 or	more			

Please enter how much you pay for the items listed. Please attach an extra sheet if there is insufficient room.

	Borrower	Co-Borrower
Home loans, rents, and liens		
HOA (association dues)		
Property Tax		
Homeowner insurance		
Auto loans:		
Car #1		
Car #2		
Auto:		
Insurance		
Gasoline		
Maintenance		
Transportation expense		
Credit cards and installment loans		
Health insurance		
Medical expense		
Child care, child support, and alimony		
Food		
Miscellaneous spending money		
Utilities:		
Gas/electricity		
Water		
Garbage		
Cable/satellite		
Communications (land line, cell, internet)		
Other		
Total	\$	\$

Please enter your income details. Please attach an extra sheet if there is insufficient room.

	Borrower	Co-Borrower
Gross pay		
Net pay		
Other income		
Retirement/Pension		
2nd job		
Child support/Alimony		
Social security		
Food stamps		
Public assistance		
Other		

	Borrower	Co-Borrower
Paycheck deductions		
401k		
Savings deposits		
Other		
Total	\$	\$

Please enter how much money you have in the assets below. Please attach an extra sheet if there is insufficient room.

Assets	Borrower	Co-Borrower
Savings		
Money market and CDs		
Stocks, bonds		
401K - 403B		
Retirement accounts		
Autos (no lien)		
Other		
Total	\$	\$

Please explain circumstances that impacted your financial condition below.				

Information provided on this questionnaire is meant to assist the credit union in understanding your current financial condition and how we may assist you in preserving your good standing with the credit union. This is not a loan application.

I (we) agree that the financial information provided is an accurate statement of my (our) financial status. I (we) understand and acknowledge that any action taken by the lender of my (our) home loan on my (our) behalf will be made in strict reliance on the financial information provided. My (our) signatures(s) below grants the holder of my (our) home loan the authority to confirm the information I (we) have disclosed in this financial statement, to verify that it is accurate by ordering a credit report and to contact my (our) real estate agent and or credit counseling representative (if applicable). By signing below, I (we) advise you that if I (we) should hereafter reinstate my (our) home loan, or payoff my (our) home loan in full, then by doing so and without the necessity of any further action on my (our) part, I (we) hereby expressly withdraw this request for a loan workout. In that event, I (we) hereby direct you to take no further action to process this request for a workout.

Borrower Signature	Date	Co-Borrower Signature	Date

## Include copies of your:

- All pages of your most recent monthly statements (e.g. Checking, savings, Money markets, CD).
- If you don't have a checking account, submit copies of cash and money order receipts for all paid bills for the last month.
- Savings account statement(s)
- If you are self-employed provided a profit and loss statement for the year to date
- If you receive regular paychecks copies of pay stub(s) for the month most recently worked for you and your co-borrower.
- If you are not employed provide proof of income (e.g. social security, disability, unemployment, rental, child support/alimony and retirement).
- Any death certificates or divorce decree(s)
- Any documentation to support changes in your financial condition.

## Please mail/fax all documents to:

Asset Recovery Department P O Box 910 Redwood City CA 94063 650-363-0862