

**HOME OWNER INFORMATION WORKSHEET
MONTHLY SPENDING PLAN**

Monthly Expense	Current	Delinquency	Adjusted	Crisis
Fixed Expenses				
Housing				
Mortgage(s)				
HOA				
Gas				
Electricity				
Telephone: Land Line				
Telephone: Cell				
Other:				
Transportation				
Gas				
Car Payment				
Public Transportation or Taxi				
Parking and Tolls				
Other:				
Insurance				
Health (<i>medical and dental, if not payroll deducted</i>)				
Life				
Disability				
Other:				
Childcare				
Childcare or Babysitters				
Child Support or Alimony				
Fixed Expenses Sub-Total				

Periodic Fixed Expenses (Divide annual payment by 12)				
Housing				
Homeowners Insurance (<i>if not in mortgage payment</i>)				
Taxes (<i>if not in mortgage payment</i>)				
Water or Sewage				
Trash Service				
Other:				
Transportation				
Car Insurance				
Car Inspection				
Car Repairs and Maintenance				
License Plates and Registration Fees				
Other:				
Periodic Fixed Expenses Sub-Total				

HOME OWNER INFORMATION WORKSHEET MONTHLY SPENDING PLAN

Monthly Expense	Current	Delinquency	Adjusted	Crisis
Flexible Expenses				
Food				
Groceries				
School Lunches				
Work-Related (lunches and snacks)				
Other:				
Housing				
Home Maintenance				
Furnishings				
Cleaning Supplies				
Lawn Care				
Other:				
Medical				
Doctor				
Dentist				
Prescriptions				
Other:				
Savings				
Savings Account				
College Funds				
Emergency Fund				
Clothing				
Clothing				
Laundry and Dry Cleaning				
Other:				
Education				
Tuition				
Books, Papers and Supplies				
Newspapers and Magazines				
Lessons (sports, dance, music)				
Other:				
Donations				
Religious or Charity				
Gifts				
Birthdays				
Major Holidays				
Other:				
Personal				
Barber or Beauty Shop				
Toiletries				
Children's Allowances				
Tobacco Products				
Beer, Wine, Liquor				
Other:				
Entertainment				
Movies, Sporting Events, Concerts, Theater, Etc.				
Video Rentals				
Internet Service				
Cable/Satellite TV				
Other				

**HOME OWNER INFORMATION WORKSHEET
MONTHLY SPENDING PLAN**

Monthly Expense	Current	Delinquency	Adjusted	Crisis
Flexible Expenses				
Restaurants and Take-Out Meals				
Gambling or Lottery Tickets				
Fitness or Social Clubs				
Vacations/Trips				
Hobbies or Crafts				
Other:				
Miscellaneous				
Checking Account or Money Order Fees				
Pet Care or Supplies				
Postage				
Pictures and Photo Processing				
Other:				
Flexible Expenses Sub-Total				

Monthly Debts				
Student Loan				
Credit Card (monthly minimum*)				
Credit Card (monthly minimum*)				
Credit Card (monthly minimum*)				
Credit Card (monthly minimum*)				
Credit Card (monthly minimum*)				
Credit Card (monthly minimum*)				
Medical Bills				
Personal Loan				
Payday Loan(s)				
Rent to Own Contract				
Income Tax Payment Plan				
Other:				
Other:				
Monthly Debts Sub-Total				

Income/Debt Summary		
1	Monthly Household Income (Page 5)	\$
2	Fixed Expenses Sub-Total (Page 6)	\$
3	Periodic Fixed Expenses Sub-Total (Page 6)	\$
4	Flexible Expenses Sub-Total (Page 8)	\$
5	Monthly Debt Sub-Total (Page 8)	\$
6	Total Monthly Expenses and Debts (2+3+4+5)	\$
7	Monthly Deficit or Surplus (1 – 6)	\$

**HOME OWNER INFORMATION WORKSHEET
MORTGAGE INFORMATION**

	First Mortgage	Second Mortgage	Third Mortgage
Loan Info			
Mortgage Holder			
Monthly Payment			
Date of Loan			
Paid Through Date			
Delinquent Amount			
Outstanding Balance			
Loan Type			
Sub-prime			
FHA			
VA			
Insured Conventional			
Uninsured Conventional			
Mortgage Insurance Co			
Rural Development			
Contract for Deed			
Other:			
Loan Terms			
Fixed Rate			
Adjustable Rate			
Hybrid ARM (2/28)			
Interest Only			
Option ARM			
40/30 Balloon			
80/20			
Deferred			
Balloon			
Other:			
Escrow Account Info			
Taxes Escrowed (Y/N)			
Past Due Taxes			
Insurance Escrowed (Y/N)			
Past Due insurance			
Homeowner Association (HOA) Info			
Name Of HOA			
Monthly Assessment			
Paid Through Date			
Amount Outstanding			
Previous Workouts			
Type of Workout			
Date of Workout			
Completed? (Y/N)			