

Personal Budget Worksheet

Please complete the following in order for us to fully assess your situation and provide a response to your request for assistance.

Borrower Name:	
Co-Borrower Name:	
Property Address:	
Billing Address:	

Contact Information

Borrower	Home:		Co-Borrower	Home:	
	Work:			Work:	
	Mobile:			Mobile:	

Income (List net income for all household members)	
Borrower:	\$
Co-Borrower:	\$
Other Household Members:	\$
Child Support/Alimony:	\$
Rental Income:	\$
Other Income:	\$
Please explain the reason you fell behind on your payments:	

Expenses (List minimum monthly payment)	
1st Mortgage (Include tax/ins):	\$
2nd Mortgage:	\$
Other Mortgages or Rent:	\$
Auto Loan 1:	\$
Auto Loan 2:	\$
Installment Loan(s):	\$
Credit Cards:	\$
Child Care:	\$
Child Support/Alimony:	\$
School/Tuition:	\$
Electric:	\$
Gas/Oil:	\$
Water:	\$
Auto Insurance:	\$
Life/Other Insurance:	\$
Transportation (gas, bus fare):	\$
Groceries:	\$
Dining Out:	\$
Cell Phone:	\$
Home Phone:	\$
Cable/Satellite:	\$
Internet:	\$
Misc/Other:	\$

Borrower: _____ **Date:** _____

Mail or FAX to:

Home Retention Department
 475 CrossPoint Pkwy
 NY2-002-01-17
 Getzville, NY 14068

Fax: 716.635.7255