



Analysis Appointment

Name - _____ Phone # - _____

Address - _____ Email - _____

Mortgages

Lender Name	Mortgage Start Date	Mortgage Term	Monthly Payment*	Extra Principle Payment	Interest Rate	Escrow Payment	Mortgage Insurance Payment	Current Mortgage Balance	Original Mortgage Amount

**Including Principle, Interest, Escrows, PMI/Mortgage Insurance etc.*

Loans

Account Name*	Loan Start Date	Loan Term	Monthly Payment	Extra Principle Payment	Interest Rate	Current Loan Balance	Original Loan Amount

**Auto Loans, Student Loans, Personal Loans, Business Loans*

Revolving Credit

Type of Credit*	Current Balance	Minimum Payment	Extra Principle Payment	Interest Rate	Credit Limit

**LOC- Line of Credit, Credit Card, HELOC – Home Equity Line of Credit*

Average Household Net Income

Income Source*	Payment Frequency*	Average Net Income Per Paycheck

**Every Week, Every Other Week, Once a Month, Twice a Month, Every Three Months, Twice a Year, Once a Year*

Monthly Expenses (All Bills--Food, Gas, Electric etc...)- _____

AND / OR

Monthly Discretionary Income (left after Bills are paid)- _____