



CDPE Homeowner Financial Worksheet

CERTIFIED DISTRESSED
PROPERTY EXPERT®

Borrower Name

Co-Borrower Name

1st Loan Number

2nd Loan Number

INCOME—TAKE HOME PAY:

	Borrower	CO-Borrower	TOTAL
Primary Job			
Misc. Income Overtime			
Part-time Job (net)			
Retirement-Military			
Retirement-Civil Service			
Support / Alimony			
Social Security			
Room & Board / Rent			
TOTAL NET INCOME			

How often is Borrower paid? ☐ Every Week ☐ Every 2 Weeks ☐ Twice A Month ☐ Once A Month

How often is Co-Borrower paid? ☐ Every Week ☐ Every 2 Weeks ☐ Twice A Month ☐ Once A Month

EXPENSES:

	MONTHLY PAYMENT		BALANCE	NAME OF CREDITOR
Home Mortgage				
2 nd Home Mortgage				
Auto Loan				
Auto Loan				
Creditor				
Creditor				
Creditor				
Creditor				
Creditor				
Creditor				
Student Loan				
Alimony / Support				
Child Care				
IRS				
Chapter 13				
Electricity				
Heating Fuel				Oil or Natural Gas
Water & Sewer				
Telephone				
Cable TV				
Auto Insurance				
Health Insurance				Paid directly (not by
Life Insurance				Paid directly (not by
Medical/Dental Expenses				

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Homeowner's Insurance			Only list here if not in Mortgage
Real Estate Tax			Only list here if not in Mortgage
Personal Property Tax			
Groceries			
School Lunches			
Transportation, Parking, Tolls			
Clothing			
Dry Cleaning/Laundry			
Cell Phone			
Internet Service			
Homeowner's Association Dues			
Recreation / Spending Money			
Charitable Donations			
Other Expenses			
TOTAL MONTHLY EXPENSES			

A. Total Monthly Income: \$ _____ \$ _____
B. Total Monthly Expenses: \$ _____ \$ _____
C. Net Income / Loss: \$ _____ \$ _____
Balance in 401K: _____ Cash Value of Stocks: _____
Balance in IRA: _____ Other Valuables to be sold: _____
Cash on Hand: _____ Other Misc. Assets: _____

I/We have described my/our financial condition in the enclosed Financial Status Report and certify that all information, as well as all Attachments, is true, accurate and correct to the best of my/our knowledge. I/we understand that submission of this information in no way obligates my lender, servicer, Veterans Affairs, FHA/ HUD, the investor, the mortgage insurers, (Agent) or (BROKERAGE) to provide assistance to me or stop the foreclosure process.

I/We hereby authorize my/our lender, servicer, Veterans Affairs, FHA/ HUD, the investor or the Mortgage Insurers to:

1. Order a credit report from any credit reporting agency;
2. Order a title search from any title agency; and/or
3. Verify the accuracy of the information contained in this Financial Status Report, including without limitation, any current or previous employment information

I/We agree that I/we will notify the AGENT and BROKERAGE mentioned above, my lender, Veterans Affairs, FHA/ HUD, the investor, or the Mortgage Insurers immediately of any material change in the financial information that I/We have provided herein. If I/we fail to do so, or if it is determined that the financial information provided herein has been misrepresented by me, and lender, servicer, Veterans Affairs, FHA/ HUD, the investor or the mortgage insurers makes decisions which would not have been made had the true facts been known, then (1) I shall be liable for all costs (fees) incurred or damages suffered by lender, servicer, Veterans Affairs, FHA/ HUD, the investor, the mortgage insurers or AGENT and BROKERAGE above, and (2) lender, servicer, Veterans Affairs, FHA/ HUD, the investor, the mortgage insurers and/or AGENT shall have the right, in its sole discretion, to terminate any arrangement or agreement that has been extended to me based, in whole or in part, on the inaccurate or incomplete information that I/we have provided.

Print Borrower's Name

Date

Borrower's Signature

Print Co-Borrower's Name

Date

Co-Borrower's Signature