

**BORROWER'S FINANCIAL STATEMENT**

Loan #:			
Borrower Name:			Social Security #:
Mailing Address:			
Employer:			Position:
Employer Address:			Employer Phone:
Daytime Phone:			Evening Phone:
Email Address:			
Number of Dependents at this address:			
Co-Borrower Name:			Social Security #:
Mailing Address:			
Employer:			Position:
Employer Address:			Employer Phone:
Daytime Phone:			Evening Phone:
Email Address:			

ASSETS/LIABILITIES				MONTHLY INCOME DATA			
DESCRIPTION	Estimated Value	Amount Owed	Net Value	DESCRIPTION	Borrower	Co-Bor	Total
Primary Residence				Gross Pay:			
Other Real Estate				Overtime:			
Automobile:				Commissions:			
Automobile:				Bonus:			
Checking Account:				Child Support:			
Savings Account:				Rental Income:			
IRA/Keough Accts:				Other (Specify):			
401 (k) Acct:							
Stocks/Bonds/CD's:							
Boats:							
Collections/Art/Etc:							
Personal Items:							

**NET INCOME:**

**ACKNOWLEDGEMENT and AUTHORIZATION**

**ACKNOWLEDGEMENT**

I obtained a Mortgage loan secured by the above referenced mortgage d property. I have described my current financial condition with this Financial Statement form and I certify that all information presented herein, as well as all attachments is true, accurate, and correct to the best of my knowledge. I understand that submission of this information in no way obligates my Lender, Mortgage Servicer, Investor or Insuror to provide assistance to me.

**AUTHORIZATION**

By signing this Financial Statement, I hereby authorize my lender, Mortgage Servicer, Insurer and their respective agents to order a credit report and verify any and all employment and account information.

Borrower Signature	_____	Date	_____	Co-Borrower Signature	_____	Date	_____
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**MONTHLY EXPENDITURES**

DESCRIPTION	MONTHLY DUE	BALANCE DUE	DELINQUENT Y / M ?
<b>Household Expenses:</b>			
Mortgage Payment			
Other Mortgages			
Alimony / Child Support			
Child Care			
Electric / Gas / Heat			
Water / Sewage			
Telephone / Internet			
Food for Household			
School / Work Lunches			
Clothing / Dry Cleaning			
Cable TV / Satellite			
<b>Total Household Expenses</b>	\$		
<b>Credit Card Expenses:</b>			
VISA			
MASTER CARD			
DEPT STORE CREDIT			
Other Credit Cards			
<b>Total Credit Card Expenses</b>	\$		
<b>Auto Expenses:</b>			
Auto Loan #1			
Auto Loan #2			
Auto Insurance			
Gasoline			
Auto Repairs			
Parking			
<b>Total Auto Expenses</b>	\$		
<b>Personal Loans:</b>			
Personal Loan #1			
Personal Loan #2			
<b>Total Personal Loans</b>	\$		
<b>Ins./Medical Expenses:</b>			
Health Insurance			
Life Insurance			
Doctors / Dentists			
Prescriptions			
Medical bills			
<b>Total Ins./Medical Expenses</b>	\$		
<b>Miscellaneous Expenses:</b>			
Charity / Donations			
Union Dues / Club Dues			
Entertainment			
Sports / Hobbies			
Vacations			
MISC. Expense #1			
MISC. Expense #2			
MISC. Expense #3			
<b>Total Misc Expenses</b>	\$		
<b>TOTAL EXPENSES</b>	\$		

\*\*\*Please note: DO NOT list bills in the MONTHLY DUE column if they are a "one-time" debt. Please NOTATE if any of the above bills are deducted from your paycheck. Please NOTATE any loans which will be paid in full within the next 6 months.

# AUTHORIZATION TO RELEASE INFORMATION

I/We hereby authorize you to release any and all information to:

Company: **Short Sale Success**

Individuals: **Deborah Priebe or Randy Asbell** (including any of its agents and/or assigns)

regarding the loan for the below referenced property. This authorization shall remain in effect until I specifically notify my mortgage company either verbally or in writing that this authorization is no longer in effect.

Date of last payment made on loan: \_\_\_\_\_ (if applicable)

Borrower Name/Address:

**1st Mortgage Company**

Print Name \_\_\_\_\_

Street Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

**1st Mortgage Account Number** \_\_\_\_\_

Signed \_\_\_\_\_

Social Security Number \_\_\_\_\_

Print Name \_\_\_\_\_

Date \_\_\_\_\_

Signed \_\_\_\_\_

Social Security Number \_\_\_\_\_

Print Name \_\_\_\_\_

Date \_\_\_\_\_

Form **4506-T**

(Rev. January 2010)

Department of the Treasury  
Internal Revenue Service

**Request for Transcript of Tax Return**

OMB No. 1545-1872

▶ Request may be rejected if the form is incomplete or illegible.

**Tip.** Use Form 4506-T to order a transcript or other return information free of charge. See the product list below. You can also call 1-800-829-1040 to order a transcript. If you need a copy of your return, use Form 4506, Request for Copy of Tax Return. There is a fee to get a copy of your return.

**1a** Name shown on tax return. If a joint return, enter the name shown first.

**1b** First social security number on tax return or employer identification number (see instructions)

**2a** If a joint return, enter spouse's name shown on tax return.

**2b** Second social security number if joint tax return

**3** Current name, address (including apt., room, or suite no.), city, state, and ZIP code

**4** Previous address shown on the last return filed if different from line 3

**5** If the transcript or tax information is to be mailed to a third party (such as a mortgage company), enter the third party's name, address, and telephone number. The IRS has no control over what the third party does with the tax information.

**Caution.** If the transcript is being mailed to a third party, ensure that you have filled in line 6 and line 9 before signing. Sign and date the form once you have filled in these lines. Completing these steps helps to protect your privacy.

**6** Transcript requested. Enter the tax form number here (1040, 1065, 1120, etc.) and check the appropriate box below. Enter only one tax form number per request. ▶

- a** **Return Transcript**, which includes most of the line items of a tax return as filed with the IRS. A tax return transcript does not reflect changes made to the account after the return is processed. Transcripts are only available for the following returns: Form 1040 series, Form 1065, Form 1120, Form 1120A, Form 1120H, Form 1120L, and Form 1120S. Return transcripts are available for the current year and returns processed during the prior 3 processing years. Most requests will be processed within 10 business days . . . . .
- b** **Account Transcript**, which contains information on the financial status of the account, such as payments made on the account, penalty assessments, and adjustments made by you or the IRS after the return was filed. Return information is limited to items such as tax liability and estimated tax payments. Account transcripts are available for most returns. Most requests will be processed within 30 calendar days. . . . .
- c** **Record of Account**, which is a combination of line item information and later adjustments to the account. Available for current year and 3 prior tax years. Most requests will be processed within 30 calendar days . . . . .
- 7** **Verification of Nonfiling**, which is proof from the IRS that you did not file a return for the year. Current year requests are only available after June 15th. There are no availability restrictions on prior year requests. Most requests will be processed within 10 business days. . . . .
- 8** **Form W-2, Form 1099 series, Form 1088 series, or Form 5498 series transcript.** The IRS can provide a transcript that includes data from these information returns. State or local information is not included with the Form W-2 information. The IRS may be able to provide this transcript information for up to 10 years. Information for the current year is generally not available until the year after it is filed with the IRS. For example, W-2 information for 2007, filed in 2008, will not be available from the IRS until 2009. If you need W-2 information for retirement purposes, you should contact the Social Security Administration at 1-800-772-1213. Most requests will be processed within 45 days . . . . .

**Caution.** If you need a copy of Form W-2 or Form 1099, you should first contact the payer. To get a copy of the Form W-2 or Form 1099 filed with your return, you must use Form 4506 and request a copy of your return, which includes all attachments.

**9** **Year or period requested.** Enter the ending date of the year or period, using the mm/dd/yyyy format. If you are requesting more than four years or periods, you must attach another Form 4506-T. For requests relating to quarterly tax returns, such as Form 941, you must enter each quarter or tax period separately.

**Signature of taxpayer(s).** I declare that I am either the taxpayer whose name is shown on line 1a or 2a, or a person authorized to obtain the tax information requested. If the request applies to a joint return, either husband or wife must sign. If signed by a corporate officer, partner, guardian, tax matters partner, executor, receiver, administrator, trustee, or party other than the taxpayer, I certify that I have the authority to execute Form 4506-T on behalf of the taxpayer. **Note.** For transcripts being sent to a third party, this form must be received within 120 days of signature date.

Telephone number of taxpayer on line 1a or 2a

▶	Signature (see instructions)	Date
▶	Title (if line 1a above is a corporation, partnership, estate, or trust)	
▶	Spouse's signature	Date

Servicer: \_\_\_\_\_

Loan Number: \_\_\_\_\_

**HELP FOR AMERICA'S HOMEOWNERS.**



**Dodd-Frank Certification**

The following information is requested by the federal government in accordance with the Dodd-Frank Wall Street Reform and Consumer Protection Act (Pub. L. 111-203). You are required to furnish this information. The law provides that no person shall be eligible to begin receiving assistance from the Making Home Affordable Program, authorized under the Emergency Economic Stabilization Act of 2008 (12 U.S.C. 5201 et seq.), or any other mortgage assistance program authorized or funded by that Act, if such person, in connection with a mortgage or real estate transaction, has been convicted, within the last 10 years, of any one of the following: (A) felony larceny, theft, fraud, or forgery; (B) money laundering or (C) tax evasion.

I/we certify under penalty of perjury that I/we have not been convicted within the last 10 years of any one of the following in connection with a mortgage or real estate transaction:

- (a) felony larceny, theft, fraud, or forgery,
- (b) money laundering or
- (c) tax evasion.

I/we understand that the servicer, the U.S. Department of the Treasury, or their agents may investigate the accuracy of my statements by performing routine background checks, including automated searches of federal, state and county databases, to confirm that I/we have not been convicted of such crimes. I/we also understand that knowingly submitting false information may violate Federal law.

This Certificate is effective on the earlier of the date listed below or the date received by your servicer.

Borrower Signature	_____	Date	_____
Co-Borrower Signature	_____	Date	_____
Co-Borrower Signature	_____	Date	_____
Co-Borrower Signature	_____	Date	_____