

INCOME AND EXPENSE DISCLOSURE

CONFIDENTIAL

Name:	Marital Status:	Spouse:
SIN:	Family Size:	
Employment / Business:	Bank	
Home Address:	Bank Address	
	Bank Telephone:	
Daytime Telephone:	Account #:	

HOUSEHOLD INCOME PER MONTH

Please provide details

Employment Take Home Pay:	\$	
Spouse's Take Home Pay:	\$	
Other Family Contributions:	\$	
Alimony / Child Support Income:	\$	From:
Rental Income After Expenses:	\$	
Dividend / Interest Income:	\$	
Pension:	\$	
UIC / WSIB / Social Assistance:	\$	
Guaranteed Income Supplement:	\$	
Other: (Specify)	\$	
TOTAL INCOME: (ALL SOURCES)	\$	

HOUSEHOLD EXPENSES PER MONTH

Please provide details

Mortgage:	\$	
Property Tax: (if not included in mortgage)	\$	
Food: (supporting documents not required)	\$	
Vehicle (Gas & Maintenance) Public Transit:	\$	
Hydro:	\$	
Gas / Heating:	\$	
Water:	\$	
Telephone / Mobile Phone / Internet:	\$	
Cable:	\$	
Alimony Paid Out:	\$	
Copy of court document or legal agreement:	\$	
Other: i.e. Deductions on pay (specify):	\$	

TOTAL BALANCE

MONTHLY PAYMENT

INSTITUTION NAME

Bank Loan:	\$	\$	
Car Loan	\$	\$	
Overdraft / Line of Credit:	\$	\$	
Visa:	\$	\$	
MasterCard:	\$	\$	
Other Credit Cards:	\$	\$	
Other Credit Cards:	\$	\$	
House Insurance:	\$	\$	
Car Insurance:	\$	\$	
Life Insurance:	\$	\$	
Health Care Plan:	\$	\$	
Medical Costs Not Covered:	\$	\$	
TOTAL:	\$	\$	

PLEASE ATTACH DOCUMENTS TO SUPPORT ALL EXPENSE CLAIMS

PERSONAL NET WORTH STATEMENT

CONFIDENTIAL

ASSETS

Type	Value	Address/ Location / Description / Ownership
HOUSE MARKET VALUE:	\$	
Other Property:	\$	
(Vacation, land, rental, etc.)	\$	
	\$	
	\$	
	\$	
	\$	
Vehicles:	\$	
	\$	
RRSP Investments:	\$	
(Maturity Dates:)		
Term Deposits / Mutual Funds / Stock & Bonds	\$	
(Maturity Dates:)		
Business Assets: (Sole Proprietor)	\$	BUSINESS NAME: Please include copy of financial statement
Accounts Receivables (Average Monthly)	\$	
Equipment:	\$	
Other: (specify)	\$	
Other Assets: (description)	\$	
TOTAL ASSETS:	\$	

LIABILITIES

Type:	Amount:	Address / Location / Description:
Mortgage: 1st Renewal Date:	\$	
2nd Renewal Date:	\$	
Property Tax (if not included in mortgage)	\$	
Car Loans:	\$	
Line of Credit:	\$	
Other Loans:	\$	
Credit Card Balances - Visa, MasterCard	\$	
American Express	\$	
Department Store Cards etc.	\$	
TOTAL LIABILITIES:	\$	

NET WORTH:

TOTAL ASSETS:	\$	
LESS (-) TOTAL LIABILITIES:	\$	
NET WORTH:	\$	

I hereby certify that to the best of my knowledge and belief, the information given in these statements is true, correct and complete in every respect. It is also understood that the information given may be subject to verification.

Signature: _____ Date: _____

Spouse's Signature: _____ Date: _____