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Loan #

INCOME AND EXPENSES

Applicant 1 Last Name	Applicant 1 First Name
Applicant 2 Last Name	Applicant 2 First Name

Sources of Income (Net Monthly)	Applicant 1	Applicant 2	Total Monthly
Take-Home Salary Including Commissions and Tips (after tax)			\$
Self-Employment (after tax)			\$
Family/Child Benefits			\$
Social Assistance: Ontario Works, Ontario Disability, Canada Pension Disability, WSIB Compensation			\$
Pensions (old age, CPP, private)			\$
Employment Insurance			\$
Spousal/Child Support			\$
Scholarships and Bursaries			\$
JF&CS Supplementary Financial Assistance			\$
Investment Income (interest/dividends/rent)			\$
Other			\$
Total (Monthly)	\$	\$	\$

	Monthly Amount		
Food			
Clothing			
Rent (Monthly)	Subsidized	Unsubsidized	
Property Tax			
Maintenance (Condo/Towr	nhouse)		
Home Insurance			
Utilities (water, hydro, gas,			
Telephone / Cell Phone / C			
Auto Expenses (lease paym			
Public Transportation			
Monthly Debt Payments (e			
Medical (Medications, Den			
Private School / Childcare			
Spousal / Child Support	· · · · · · · · · · · · · · · · · · ·		
Other (Please Specify) (e.g.			
Total (Monthly)	\$		

	Current Value		
Residence (if own)	Year of Purchase:	Purchase Price:	
Other Properties (Specify)			
Automobile(s) – Make and Year			
Savings (GIC, term deposit, etc.)			
Other			

	Amount			
Mortgage (Copy of Mortgage Statement required)	Lender:	Principal Outstanding:	Interest Rate:	
Credit Card(s) Owing				
(Copies of statements required)				
Line(s) of Credit (Copies of statements required)	Secured:	Unsecured:		
Other Debts				
Total				\$