PERSONAL BUDGET WORKSHEET



Please provide the following information to enable us to fully assess your situation.

Borrower Information			
BORROWER NAME		CO-BORROWER NAME	
PROPERTY ADDRESS			
MAILING ADDRESS			
Contact Information			
		Co-Borrower	
	VORK PHONE		WORK PHONE
MOBILE PHONE		MOBILE PHONE	
EMAIL ADDDEGO		EMAIL ADDDEGO	
EMAIL ADDRESS		EMAIL ADDRESS	
Forward completed form, along	with proof of income for contrib	outing household members (e.g., p	aystubs) and current account
statements for deposit and brokerage accounts via fax to (206) 214-1692, or email to MemberAssistanceTeam@becu.org, or mail to BECU, PO Box 97050, Seattle, WA. 98124, Attn: Member Assistance Department, MS 1050-2. If you have any			
questions, please contact us at (877) 256-6460.			
Income (net monthly income f	or all household members)	Expenses (minimum monthly	payments)
Borrower: \$	8	1st Mortgage (include tax+ins): \$
Co-Borrower: \$	8	2nd Mortgage	e: \$
Other Household Members: \$	3	Other Mortgages or Ren	t: \$
Child Support / Alimony: \$	8	Auto Loai	n: \$
Renter Income: \$	8	Auto Loai	n: \$
Other Income: \$	8	Personal Loan(s): \$
Total: \$	8	Credit Card	s: \$
Please explain why you are	requesting assistance:	Child Care	e: \$
		Child Support / Alimon	y: \$
		Tuitio	n: \$
		Utilitie:	s: \$
		Home Phone	e: \$
		Television / Cable	e: \$
		Interne	et: \$
		Auto Insurance	e: \$
		Other Insurance	
		Transportation (gas, bus, train): \$
		Grocerie	s: \$
		Dining Ou	ıt: \$
		Mobile Phone	e: \$
		Othe	r: \$
		Tota	al: \$
Borrower Signature		Date	
Co-Borrower Signature		 Date	