

FINANCIAL INFORMATION FORM

Loan #:

BORROWER INFORMATION

Borrower Name:		Social Security Number:	
Co-Borrower Name:		Social Security Number:	
Borrower's Work#:	Co-Borrower's Work #:	Home Phone:	
Employer's Name:	Length of Employment:	Employer's Name:	Length of Employment:
	Year(s): Month(s):		Year(s): Month(s):

PROPERTY ADDRESS

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MAILING ADDRESS

Rent
 Own
 Don't know
 How long: 0 Year(s)

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MONTHLY INCOME DATA

Description	Borrower Income	Co-Borrower Income
Monthly (Take Home pay)	\$	\$
Commission/Bonuses	\$	\$
Other income (Please Specify)	\$	\$
	Childsupport SSI Retirement Room rent Family	SSI Retirement Bfs

ASSETS

LIABILITIES

LIABILITIES

Description	Estimated Value	Description	Monthly Payment	Balance Due	Description	Monthly Payment	Balance Due
Home	\$	Mortgage Payment	\$		Child Care	\$	
Other Real Estate	\$	Real Estate Taxes	\$		Cable	\$	
Automobile	\$	Homeowners Ins.	\$		Medical Expenses	\$	
		Other Mortgage/Rent	\$				
Checking Account	\$	Alimony/Child Support	\$		Student Loans	\$	
Savings/Money Mkt.	\$	Automobile Loan	\$				
IRA/Keogh Account	\$						
401K/ESOP Account	\$	Auto Exp. (Gas/Parking)	\$		Credit Card	\$	
Stocks, Bonds, CDs	\$	Auto Insurance	\$		HOA fees	\$	
Other Investments	\$	Food/Toiletries	\$		Miscellaneous	\$	
		Utilities/Telephone	\$		Other	\$0	

Below please briefly explain your hardship or reason for being delinquent and how you propose to resolve it.

I/We certify that the financial information stated above is true and is an accurate statement of my/our financial condition. I/We understand and acknowledge that any action taken by Litton Loan Servicing L.P. on my/our behalf will be made in strict reliance on the financial information provided. By signing below, I/we grant Litton Loan Servicing L.P. the authority to confirm the information disclosed including, but not limited to, the ordering of credit reports and verification of employment and account balances.

Litton Loan Servicing L.P. is a debt collector. This is an attempt to collect a debt and any information obtained will be used for that purpose.

Borrower Signature

Co-Borrower Signature

Please remember to:

- Sign and date this form
- Include copies of one (1) month of your most recent pay stubs or proofs of income
- Include copies of two (2) months of your most recent bank statements (for all accounts)
- Include copies of tax returns for the most recent year filed, including all schedules and W-2's
- Return completed and sign form to:

Litton Loan Servicing LP
Attention: Loss Mitigation Department
4828 Loop Central Drive
Houston, TX 77081

Home Affordable Modification Program Hardship Affidavit

Borrower Name (first, middle, last): _____ Date of Birth: _____

Co-Borrower Name (first, middle, last): _____ Date of Birth: _____

Property Street Address: _____

Property City, State and ZIP: _____

Servicer: _____

Loan Number: _____

In order to qualify for 's ("Servicer") offer to enter into an agreement to modify my loan under the federal government's Home Affordable Modification Program (the "Agreement"), I/we am/are submitting this form to the Servicer and indicating by my/our checkmarks ("✓") the one or more events that contribute to my/our difficulty making payments on my/our mortgage loan.

Borrower & Co-Borrower

Yes No My income has been reduced or lost. For example: unemployment, underemployment, reduced job hours, reduced pay, or a decline in self-employed business earnings. I have provided details under "Explanation" (page 3).

Yes No My household financial circumstances have changed. For example: death in family, serious or chronic illness, permanent or short-term disability, increased family responsibilities (adoption or birth of a child, taking care of elderly relatives or other family members). I have provided details under "Explanation" (page 3).

Yes No My expenses have increased. For example: monthly mortgage payment has increased or will increase, high medical and health-care costs, uninsured losses (such as those due to fires or natural disasters), unexpectedly high utility bills, increased real property taxes. I have provided details under "Explanation" (page 3).

Yes No My cash reserves are insufficient to maintain the payment on my mortgage loan and cover basic living expenses at the same time. Cash reserves include assets such as cash, savings, money market funds, marketable stocks or bonds (excluding retirement accounts). Cash reserves do not include assets that serve as an emergency fund (generally equal to three times my monthly debt payments). I have provided details under "Explanation" (page 3).

Yes No My monthly debt payments are excessive, and I am overextended with my creditors. I may have used credit cards, home equity loans or other credit to make my monthly mortgage payments. I have provided details under "Explanation" (page 3).

Yes No There are other reasons I/we cannot make our mortgage payments. I have provided details under "Explanation" (page 3).

Borrower/Co-Borrower Acknowledgement

1. Under penalty of perjury, I/we certify that all of the information in this affidavit is truthful and the event(s) identified above has/have contributed to my/our need to modify the terms of my/our mortgage loan.
2. I/we understand and acknowledge the Servicer may investigate the accuracy of my/our statements, may require me/us to provide supporting documentation, and that knowingly submitting false information may violate Federal law.
3. I/we understand the Servicer will pull a current credit report on all borrowers obligated on the Note.
4. I/we understand that if I/we have intentionally defaulted on my/our existing mortgage, engaged in fraud or misrepresented any fact(s) in connection with this Hardship Affidavit, or if I/we do not provide all of the required documentation, the Servicer may cancel the Agreement and may pursue foreclosure on my/our home.
5. I/we certify that my/our property is owner-occupied and I/we have not received a condemnation notice.
6. I/we certify that I/we am/are willing to commit to credit counseling if it is determined that my/our financial hardship is related to excessive debt.
7. I/we certify that I/we am/are willing to provide all requested documents and to respond to all Servicer communication in a timely manner. I/we understand that time is of the essence.
8. I/we understand that the Servicer will use this information to evaluate my/our eligibility for a loan modification or other workout, but the Servicer is not obligated to offer me/us assistance based solely on the representations in this affidavit.

Borrower Signature Date

Co-Borrower Signature Date

E-mail Address: _____

E-mail Address: _____

Social Security Number: ____ - ____ - _____

Social Security Number: ____ - ____ - _____

Phone Numbers:

Phone Numbers:

Cell: _____

Cell: _____

Home: _____

Home: _____

Work: _____

Work: _____

Explanation:

Tip: Use Form 4506-T to order a transcript or other return information free of charge. See the product list below. You can quickly request transcripts by using our automated self-help service tools. Please visit us at IRS.gov and click on "Order a Transcript" or call 1-800-908-9946. 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, individual taxpayer identification number, or employer identification number (see instructions)

2a If a joint return, enter spouse's name shown on tax return 2b Second social security number or individual taxpayer identification number if joint tax return

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

4 Previous address shown on the last return filed if different from line 3 (see instructions)

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.

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. discloses your IRS transcript to the third party listed on line 5, the IRS has no control over what the third party does with the information. If you would like to limit the third party's authority to disclose your transcript information, you can specify this limitation in your written agreement with the third party.

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. 1040

- 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 provides the most detailed information as it is a combination of the Return Transcript and the Account Transcript. 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 1098 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 2010, filed in 2011, will not be available from the IRS until 2012. If you need W-2 information for retirement purposes, you should contact 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.
12/31/2011 12/31/2010

Check this box if you have notified the IRS or the IRS has notified you that one of the years for which you are requesting a transcript involved identity theft on your federal tax return []

Caution: Do not sign this form unless all applicable lines have been completed.

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

Sign Here Signature (see instructions) Date

Title (if line 1a above is a corporation, partnership, estate, or trust)

Spouse's signature Date