



# Financial Freedom Application

Applicant			Co-Applicant		
Name	Account #		Name	Account #	
Street Address			Street Address		
City	State	Zip	City	State	Zip
County	<input type="checkbox"/> Own <input type="checkbox"/> Rent	# of Years at Current Address	County	<input type="checkbox"/> Own <input type="checkbox"/> Rent	# of Years at Current Address
Previous Address (Complete if current address less than 2 years)			Previous Address (Complete if current address less than 2 years)		
Social Security Number	Home Phone #		Social Security Number	Home Phone #	
Date of Birth	Other Phone #		Date of Birth	Other Phone #	
Please include Verification of all income listed (Paystub or W-2; Tax Return if self-employed)			Please include Verification of all income listed (Paystub or W-2; Tax Return if self-employed)		
Employer Name	Date Hired		Employer Name	Date Hired	
Employer Address			Employer Address		
Employer Phone #	Position		Employer Phone #	Position	
Gross Annual Income	Monthly Net Income		Gross Annual Income	Monthly Net Income	
Extra Income from:	\$	per	Extra Income from:	\$	per
Pay Frequency:	<input type="checkbox"/> Weekly <input type="checkbox"/> Bi-Weekly <input type="checkbox"/> Semi-Monthly <input type="checkbox"/> Monthly		Pay Frequency:	<input type="checkbox"/> Weekly <input type="checkbox"/> Bi-Weekly <input type="checkbox"/> Semi-Monthly <input type="checkbox"/> Monthly	
Previous Employer Name	Position	# of Years Employed	Previous Employer Name	Position	# of Years Employed

Account Type	Name of Depository	Balance	Market Value of Primary Residence	\$													
Savings			<table border="1"> <thead> <tr> <th>Vehicles</th> <th>Year</th> <th>Make</th> <th>Model</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>	Vehicles	Year	Make	Model										
Vehicles	Year	Make		Model													
Checking																	

**Purpose of Counseling** *check all that apply*

<input type="checkbox"/> Consolidate Debt	<input type="checkbox"/> Reach a Goal <i>(for example: down-payment on house, remodeling, investments, etc)</i>
<input type="checkbox"/> Save More	My Goal is:

**Counseling Agreement:**

LANCO Federal Credit Union (LANCO FCU) offers a financial counseling service called the Financial Freedom Program that offers guidance or assistance with monthly budget preparation, savings plans, and loan consolidation as appropriate for my particular financial circumstances. I hereby acknowledge that LANCO FCU provides me these financial counseling services, including but not limited to the services stated above, as a mere courtesy and without charge for such services. LANCO FCU does not in any respect act as my professional investment advisor. Accordingly, I hereby release LANCO FCU, its successors and assigns, and its directors, officers, employees, agents, and representatives from any and all responsibility for any losses, expenses, costs, damages, claims or liabilities of any kind whatsoever that I have suffered or may suffer if I choose to rely on any information, guidance, advice or services provided to me by LANCO FCU as a part of its Financial Freedom Program.

I further agree and acknowledge that any action I choose to take as a result of the information, advice, and services provided to me by LANCO FCU is with full knowledge that I am solely responsible for the consequences of such action. I/We give permission to LANCO Federal Credit Union to obtain a credit profile regarding my/our credit history from various credit reporting agencies. These credit reports will be used for consideration of the following: (1) credit counseling, (2) loan approval. I/We understand and agree with all of the above statements.

Applicant Signature	Date	Co-Applicant Signature	Date
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# BUDGET ANALYSIS

All information should be completed to the best of your knowledge.

Monthly Bills			Average Monthly Income		
Housing	Heat (avg)		Monthly Take Home Pay		
	Electric		Partner's Take Home Pay		
	Water		Other Income (include child support, alimony, Social Security, etc.)		
	Phone				
	Household Exps.		<i>Total Monthly Income</i>		
Food	Groceries		<i>Less Monthly Bills</i>		
	Non-food/Toiletries		<i>Equals Amount Available for Debt</i>		
	Mid-week Shopping		<b>Debts</b>		
	Meal Out		<i>(credit cards, car payments, student loans...)</i>		
Transport	Gas		<b>Creditor</b>	<b>Balance</b>	<b>Payment</b>
	Fares		mtg/rent		
	Parking/Tickets				
Personal	Clothing				
	Medical/Dental				
	Donations				
	Entertainment				
	Child Care				
	Haircuts				
Savings	Other				
	Retirement		<b>Amount Available for Debt</b>		
	Christmas Club		<i>Less Total Debt Balance</i>		
	Vacation		<i>Less Total Payments</i>		
	Emergency Savings		<i>Equals Bottom Line</i>		
	Savings Account		<b>Weekly Spending Allowance</b>		
Escrow		<i>(divide bottom line by 4)</i>			
<i>Sub Total Monthly Bills</i>					
<b>Annual Expenses</b>					
Insurance					
Home					
Auto					
Life					
Real Estate Taxes					
Vacation					
Gifts					