

GPS FINANCIAL SOLUTIONS

80-279 Via Tesoro, LaQuinta Ca 92253

866-440-5566 Toll Free

925 886-3971 Fax

info@gpsfinancialsolutions.com

Date: _____

Your Sales Representative _____

Applicant Name: _____

Co-Applicant Name: _____

Address: _____

Mailing Address: _____

(If different from above) _____

Email Address(es): _____

Daytime Phone: _____

Evening Phone: _____

Cell Phone: _____

Please visit our website:

www.gpsfinancialsolutions.com

Watch the educational video!

Please complete the following three pages and return via email, fax, postal mail or hand delivery.



MONTHLY INCOME

Gross Monthly Income	Applicant	+	Co-Applicant	=	Combined Total Monthly Income	
Base Income \$		+	\$	=	\$	
Other Income \$		+	\$	=	\$	
Total Monthly Household Income					=	\$

Pay Frequency:
Please check one

Weekly _____	Weekly _____
Bi-Weekly _____	Bi-Weekly _____
Monthly _____	Monthly _____
2 x per Month _____	2 x per Month _____

NOTES TO CLIENTS

1. The following pages ask for detailed information about your credit card accounts, vehicle loans, mortgages, student loans and any other accounts for which you pay principal and/or interest on balances owed. We ask you to list ALL open accounts, such as VISA, MasterCard, Discover and/or American Express, even those with a zero balance.

2. If you prefer to submit copies of your most recent statements and loan documents rather than fill out these forms, you may do so. We do not require account numbers or any personal information initially. You are welcome to block out that information on any documents you submit for analysis. We will, however, be required to collect complete statements for your creditors at the time of your enrollment in the GPS Financial Compass Debt Acceleraton Program.

REVOLVING CREDIT CARDS

Please list all accounts, as of your most recent statement, and include accounts that currently have a zero balance.

Credit Card Accounts*	Credit Limit	Current Balance Due	Interest Rate	Minimum Payment Due	Monthly Due Date	Extra Amount Submitted
	\$	\$	%	\$		\$
	\$	\$	%	\$		\$
	\$	\$	%	\$		\$
	\$	\$	%	\$		\$
	\$	\$	%	\$		\$
	\$	\$	%	\$		\$
	\$	\$	%	\$		\$

* Account numbers are not needed initially, only the name of the issuer of the account (example: Wells Fargo VISA).

AUTO/RV/BOAT LOANS

Please list all accounts, as of your most recent statement. Do NOT include leased vehicles.

Name of Lender*	Start Date of Loan	Current Balance Due	Interest Rate	Monthly Payment	Monthly Due Date	Extra Amount Submitted
		\$	%	\$		\$
		\$	%	\$		\$
		\$	%	\$		\$

* Account numbers are not needed, only the name of the issuer of the account (example: Ford Motor Credit).

OTHER INSTALLMENT LOANS OR LINES OF CREDIT

Please list all other liabilities, such as student loans, that are NOT related to your mortgage(s).

Type and Name of Account	Credit Limit	Current Balance Due	Interest Rate	Minimum Payment Due	Monthly Due Date	Extra Amount Submitted
	\$	\$	%	\$		\$
	\$	\$	%	\$		\$
	\$	\$	%	\$		\$

Use additional pages if needed.

MORTGAGE EXPENSES

Please list first and second and/or HELOC for primary residence, second home and rental properties.

Mortgage Company	Loan Balance	Current Interest Rate	Mo. Payment Principal & Interest Only	Loan Start Date Mo/Yr	Years Remaining	Mo. Due Date	Extra Principal Submitted
	\$	%	\$				\$

Loan Type: Fixed _____
 ARM _____
 Interest Only _____

Special Terms: _____

 (Example: 4% for 5 yrs, 6% remaining term)

Monthly Expenses:

Hazard Insurance \$ _____
 Property Taxes \$ _____ OR Escrow/Impound Fees \$ _____
 Mortgage Insurance \$ _____

Mortgage Company	Loan Balance	Current Interest Rate	Mo. Payment Principal & Interest Only	Loan Start Date Mo/Yr	Years Remaining	Mo. Due Date	Extra Principal Submitted
	\$	%	\$				\$

Loan Type: Fixed _____
 ARM _____
 Interest Only _____

Special Terms: _____

 (Example: 4% for 5 yrs, 6% remaining term)

Monthly Expenses:

Hazard Insurance \$ _____
 Property Taxes \$ _____ OR Escrow/Impound Fees \$ _____
 Mortgage Insurance \$ _____

Mortgage Company	Loan Balance	Current Interest Rate	Mo. Payment Principal & Interest Only	Loan Start Date Mo/Yr	Years Remaining	Mo. Due Date	Extra Principal Submitted
	\$	%	\$				\$

Loan Type: Fixed _____
 ARM _____
 Interest Only _____

Special Terms: _____

 (Example: 4% for 5 yrs, 6% remaining term)

Monthly Expenses:

Hazard Insurance \$ _____
 Property Taxes \$ _____ OR Escrow/Impound Fees \$ _____
 Mortgage Insurance \$ _____

Use additional pages if needed.