

**PERSONAL FINANCIAL STATEMENT**

Submitted to: \_\_\_\_\_

Date: \_\_\_\_\_

**IMPORTANT: Read these directions before completing this Statement**

- If you are applying for individual credit in your own name and are relying on your own income, or assets of another person as the basis for repayment of the credit requested, or if this statement relates to your guaranty of the indebtedness of other person(s), firm(s), or corporation(s), complete only sections 1,3, and 4.
- If you are applying for individual credit but are relying on income from alimony, child support, or separate or on the income or assets of another person as a basis for repayment of the credit requested, complete all Provide information in Section 2 about the person whose alimony, support, or maintenance payments or income or or assets you are relying on. Alimony, child support, or separate maintenance income, need not be revealed if you do not wish to have it considered as a basis for repaying this obligation.

Section 1 - Individual Information	Section 2 - Other Party Information
Name: _____	Name: _____
Address: _____	Address: _____
City, State & ZIP: _____	City, State & ZIP: _____
Social Security #: _____	Social Security #: _____
Date of Birth: _____	Date of Birth: _____
Position or Occupation: _____	Position or Occupation: _____
Business Name: _____	Business Name: _____
Business Address: _____	Business Address: _____
City, State & ZIP: _____	City, State & ZIP: _____
Length at present address: _____	Length at present address: _____
Length of employment: _____	Length of employment: _____
Res. Phone: _____ Bus. Phone: _____	Res. Phone: _____ Bus. Phone: _____
Have (either of) you or any firm in which you were a major owner ever declared bankruptcy, or settled any debts for less than the amounts owed? If yes, please provide details on a separate sheet. <span style="float:right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span>	
Are (either of) you a defendant in any suit or legal action? <span style="float:right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span>	
Are (either of) you presently subject to any unsatisfied judgements to tax liens? <span style="float:right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span>	
When, if ever, have (either of) you been audited by IRS?	

Section 3 - Statement of Financial Condition as of _____, 200									
Assets (omit cents) <small>(Do not include assets of doubtful value)</small>	In dollars	[Individual]	[Joint]	If joint, with whom	Liabilities	In dollars	[Individual]	[Joint]	If joint, with whom
Cash, checking & Savings, CD's - sched. A	\$0				Notes payable - Sched. H	\$0			
U.S. Gov't & Marketable securities - sched. B	\$0				Due to brokers				
Non-marketable securities - sched. C	\$0				Amounts payable to others-secured				
Securities held by broker in margin accounts					Amounts payable to others-unsecured				
Restricted, control or margin account stocks					Accounts & Bills due				
Real estate owned - sched. D	\$0				Unpaid income tax				
Accounts, loans & notes receivable					Other unpaid taxes & interest				
Automobiles					Mortgages payable - Sched. D&H				
Cash surrender value-life insurance - sched. E	\$0								
Vested interest in deferred comp. - sched. F	\$0								
Business Ventures - sched. G	\$0								
Other assets/personal property - sched. G									
					<b>Total Liabilities</b>	<b>\$0</b>	<b>\$0</b>		
					<b>Net Worth</b>	<b>\$0</b>	<b>\$0</b>		
<b>Total Assets</b>	<b>\$0</b>	<b>\$0</b>			<b>Total Liabilities &amp; Net Worth</b>	<b>\$0</b>	<b>\$0</b>		

Section 4 - Annual Income For Year Ended _____, 200						
Annual Income	[Individual]	[Joint]		Annual Expenditures	[Individual]	[Joint]
Salary, bonus & commission				Mortgage/Rent Payments		
Dividends & interest				Real estate taxes/asses.		
Real estate income				Taxes-Fed, State, Local		
Other income				Insurance payments		
<small>(alimony, child support, etc. need not be revealed if you do not wish have it considered for repayment)</small>				Other contracts (car, credit, etc)		
				Alimony, child support, maint.		
				Other expences		
<b>Total Income</b>	<b>\$0</b>	<b>\$0</b>		<b>Total Expenditures</b>	<b>\$0</b>	<b>\$0</b>

Section 4 Continued- Annual Income For Year Ended _____, 200					
Contingent Liabilities Estimated Amounts					
	Yes	No	[Individual]	[Joint]	
Do you have any... Contingent liabilities (as endorser, co-maker, or guarantor?)... (On leases? On contracts?)	<input type="checkbox"/>	<input type="checkbox"/>			
Involvement in pending legal actions?	<input type="checkbox"/>	<input type="checkbox"/>			
Contested income tax liens?	<input type="checkbox"/>	<input type="checkbox"/>			
Any estimated capital gains tax on the unrealized asset appreciation?	<input type="checkbox"/>	<input type="checkbox"/>			
Other special debt or circumstances?	<input type="checkbox"/>	<input type="checkbox"/>			
If "yes" to any question(s) describe:					
<b>Total Contingent</b>			<b>\$0</b>	<b>\$0</b>	

**SCHEDULE A - CASH, CHECKING AND SAVINGS ACCOUNTS, CERTIFICATES OF DEPOSIT, MONEY MARKET FUNDS, ETC**

Name of Financial Institution	Type of Account	Owner	Joint?	If pledged, to whom?	Balance

**SCHEDULE B - U.S. GOVERNMENT & MARKETABLE SECURITIES**

Number of Shares or Face Value of Bonds	Description	In the name of	Are these Registered, Pledged, or held by others?	Market Value	Exchanges Where Traded

**SCHEDULE C - NON-MARKETABLE SECURITIES**

Number of Shares	Description	In the name of	Are these Registered, Pledged, or held by others?	Value	Method of Valuation

**SCHEDULE D - INVESTMENTS IN REAL ESTATE**

Description/Location of Real Estate Investment	Joint?	Original Date & Investment	% owned by You	Market Value of Your %	Present Balance	Monthly Payment	Mortgage Maturity Date	Mortgage Owed to

**SCHEDULE E - LIFE INSURANCE CARRIED, INCLUDING GROUP INSURANCE**

Name of Insurance Company	Owner of Policy	Beneficiary & Relationship	Face Amount	Policy Loans	Cash Surrender Value

**SCHEDULE F - VESTED INTEREST IN DEFERRED COMPENSATION/PROFIT-SHARING PLANS**

% Vested	Company Name	Account Number	Manner of Payout	Distribution Date	Beneficiary	Amount

**SCHEDULE G - BUSINESS VENTURES**

List Name and Address of any Business Venture in which you are a Principal or Partner	Your Position/ Title in the Business	Line of Business	Years in Business	Total Assets Listed in Section 3	Your % of Ownership	Net worth of Business	Present Net Value of Your Investment

**SCHEDULE H - LOANS OWING BANKS, BROKERS, FINANCE COMPANIES, AND OTHERS (MASTERCARD, VISA, ETC.)**

Owing to (account number)	Joint?	Date of Original Borrowing/Amount	Present Balance	Due	Monthly Payment	Date of Final Pay	Secured By

The information contained in this statement is provided to induce you to extend or to continue the extension of credit to the undersigned or to others upon the guaranty of the undersigned. The undersigned acknowledges and understands that you are relying on the information provided herein in deciding to grant or continue credit or to accept a guaranty thereof. Each of the undersigned represents, warrants, and certifies that (1) the information provided herein is true, correct and complete and gives a correct and complete showing of the financial condition of the undersigned, (2) the undersigned has no liabilities direct, indirect or contingent except as set forth in this statement, and (3) legal and equitable title to all assets listed herein is in the undersigned's sole name, except as may be herein otherwise noted. Each of the undersigned agrees to notify you immediately and in writing of any change in name, address, or employment and of any material adverse change (1) in any of the information contained in this statement or (2) in the financial condition of any of the undersigned or (3) in the ability of any of the undersigned to perform its (or their) obligations to you. In the absence of such notice or a new and full written statement, this should be considered as a continuing statement and substantially correct. You are authorized to make all inquiries you deem necessary to verify the accuracy of the information contained herein, and to determine the credit-worthiness of the undersigned and the undersigned hereby authorizes all persons of whom you make such inquiries to respond thereto in full. Each of the undersigned authorizes you to answer questions about our credit experience with the undersigned.

Date Signed \_\_\_\_\_, 200\_\_\_\_ Signature (individual) \_\_\_\_\_

Date Signed \_\_\_\_\_, 200\_\_\_\_ Signature (other party) \_\_\_\_\_