



## **PERSONAL FINANCIAL STATEMENT**

Submitted to the bank as of:	
	Date

SECTION 1 - INDIVIDU	JAL INFORMATION	SECTION 2 – OTHER								
Name		Name								
Address		Address								
City, State, Zip		City, State, Zip	City, State, Zip							
Business Name		Business Name	Business Name							
Business Address		Business Address								
City, State, Zip		City, State, Zip								
Home Phone	Bus. Phone	Home Phone	Bus. Phone							
Date of Birth	SSN	Date of Birth	SSN							
Email Address		Email Address								
Accountant Name	Phone	Accountant Name	Phone							
Attorney Name	Phone	Attorney Name	Phone							
Insurance Company	Phone	Insurance Company	Phone							

<b>SECTION 3 – STATEMENT OF FINANCIAL</b>	CONDITION				
ASSETS	DOLLARS	LIABILITIES	DOLLARS		
Cash in this Bank	\$	Notes Payable to this Bank	\$		
Cash in Other Institutions	\$	Notes Payable to Other Institutions ( Schedule G )	\$		
Marketable Securities ( Schedule A )	\$	Due to Brokers / Margin Accounts	\$		
Non-Marketable Securities ( Schedule B )	\$	Amounts Payable to Others Secured	\$		
Accounts & Notes Receivable (Schedule C)	\$	Amounts Payable to Others Unsecured	\$		
Residential Real Estate Owned (Schedule D)	\$	Accounts Payable (Including Credit Cards)	\$		
Investment Real Estate Owned ( Schedule D )	\$	Real Estate Mortgages Payable ( Schedule D )	\$		
Business Interests, Partnerships (Schedule E)	\$	Notes Due Other Business Ventures (Schedule E)	\$		
Cash Value Life Insurance In ( Schedule F )	\$	Life Insurance Loans (Schedule F)	\$		
Vested Retirement, IRA, Keough & Other	\$	Taxes Payable	\$		
Personal Property (Including Automobiles)	\$				
Other Assets (List):		Other Liabilities (List):			
	\$		\$		
	\$		\$		
	\$	Total Liabilities	\$		
	\$	Net Worth	\$		
	\$				
TOTAL ASSETS	\$	TOTAL LIABILITIES AND NET WORTH	\$		

YEAR ENDING		ANNUAL EXPENDITURES		CONTINGENT LIABILITIES	AMOUNTS			
Salary, Bonus, & Commission	\$	Mortgage, Rental Payments	\$	Do you have any		No		
Dividends & Interest	\$	Real Estate Taxes & Assessments	\$	Contingent Liabilities (as endorser, co-maker, or guarantor?)			\$	
Real Estate Income	\$	Taxes – Federal, State & Local	\$	Involvement in Pending Legal Actions?			\$	
Other Income \$		Insurance Payments	\$	Other Special Debt or Circumstances?			\$	
(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)		Other Contract Payments (auto, credit card, etc.)	\$	Contested Income Tax Liens?			\$	
		Alimony, Child Support Maintenance	\$	Obligations Past Due?	ons Past Due?			
		Other Expenses	Other Expenses  Have (either of) you or any firm in which you were a major owner ever declared bankruptcy?				\$	
				Income Tax Returns Filed Through D/M/YYYY			\$	
TOTAL ASSETS	\$	TOTAL EXPENDITURES	\$	TOTAL CONTINGENT LIABILITIES			\$	

SCHEDULE A - MARKETABL	LE SEC	URITIES																	
Financial Institution	Account Type			Owner					If Pled	?	Market Value								
SCHEDULE B - NON-MARKE	ETABL	E SECURITIES																	
Number of Shares or Value of Bonds		Description		ı	n Nam	e(s) Of		Аге		Registered, Plo eld by Others?		I	Mark	cet Value					
SCHEDULE C – ACCOUNTS A	AND N	IOTES RECEIV	ABLE																
Due From		Amount		٨	/aturit	y Date				Terms			Col	llateral					
SCHEDULE D - PERSONAL F	RESID	ENCE & REAL	ESTAT	TE INVEST	MEN	TS (A	ГТАСН	ADD	ITION	AL SCHEDU	JLE IF NE	CESSA	ARY	)					
Address/Property Type		Legal Owner		Purchase ear / Price	Market Value		Loan Balance		INT Rate	Maturity Date	Monthly Payment	Own		Lender					
SCHEDULE E – BUSINESS IN	ITERE	STS / PARTNE	PSHIE	os .															
List Name & Address of Venture		Position / Titl	_			Years	in	Сигг	ent	Your % of	Balance [	Due on		Final					
you are a Principal or Partner	•	in Business		Line of Busin	ess	Busin	ess M	1arket	Value	Ownership	Partnershi	p Note	s (	Contribution Date					
SCHEDULE F – LIFE INSURA	NCE																		
Name of Company	INCE	Owner of Policy		Beneficiary (		Tvi	ne of Poli	CV	Face	Amount	Policy Los	nc	Cas	h Surrender Value					
Nume of company		- Owner or rodacy		Relationship		1,91	pe of Policy		1 000	Amount	1 oney Loc	Policy Loans		Casii surrender value					
SCHEDULE G – NOTES PAYA	BLE																		
Creditor/Lender		vpo of Facility		nount of	S	есигед		Collate	oral	Monthly	Interest	Mak	urity	, Unpaid					
Creditor/Lender	Type of Facility		Li	Line/Loan		s N		Collateral		Payment	Rate	Mat	urity	/ Balance					
REPRESENTATIONS AND WARRANTI The information contained in this statundersigned. The undersigned acknowl Each of the undersigned represents, water and in writing if any change in name, and of any of the undersigned or (3) in the asthould be considered as a continuing stanceurate or incomplete in any mater ammediately due and payable. You are report on me now and at any time durithe credit-worthiness of the undersigned guarantee of the undersigned to you is or other information that the undersign of the fully understand that it is a federate 18 U.S.C. Section 1014.  Your Signature	tement i ledge an arrants, a ldress, on ability of tatement rial respo authoriz ng the t ed. Each s outstan aned give	nd understand that and certifies that the remployment and if any of the undersit and substantially ect, you may declared to make all inquerm of my loan(s) of the undersigneen ding, the undersigneen ding, the undersigneen you shall be your	you are the inform of any magned to correct. The individual of the	relying on the mation provid naterial advers perform its (c If the undersi ndebtedness ou deem nece bank and/or izes you to an all supply ann cy.	e informed here se chan or their, igned for the essary to loan(s) swer qually a	nation pein is truinge (1) in obligation of the contraction of the con	rovided he, correct nany of the cions to you tify you as igned or l the accur se bank in s about you ed financ	erein i and cone info ou. In the srequithe inconacy of which our cre-	in decidir omplete. rmation i he absen ired abov debtedno the info I am a g dit exper tement.	ng to grant or contained in the containe	ontinue credi dersigned ag is statement ce or a new a he informatic d by the unde dersionally liat undersigned. inancial state	t or acc rees to or (2) in nd full v on herei ersigne nd to o ole with As long ment a	ept a notil the writte in she d, as btair the g as a nd a	guarantee thereofing you immediately financial condition en statement, this bould prove to be the case may be, in a credit bureau bank to determine any obligation or my other financial					
Tour Signature									Da	re									
Co-Applicant Signature (if applica	able)								Da	te									