



Personal Financial Statement as of _____
(Date)

- Individual Credit Application- relying solely on my income
- Individual Credit Application- relying on my income as well as income from other sources
- Joint Credit Application

Please initial here: _____
Applicant Co-Applicant

PERSONAL INFORMATION

APPLICANT (NAME)			CO-APPLICANT (NAME)		
Phone No.	Social Security No.	Date of Birth	Phone No.	Social Security No.	Date of Birth
Home Address			Home Address		
Present Employer		Position	Present Employer		Position
Employer Address		Phone No.	Employer Address		Phone No.

ASSET AND LIABILITY INFORMATION (Omit Cents)

ASSETS	AMOUNT	LIABILITIES	AMOUNT
Cash in This Bank		Notes Payable to This Bank	
Cash in Other Financial Institutions		Notes Payable to Others	
Homestead/Contracts for Deed Owned		Mortgages on Homestead	
IRA/Other Retirement Accounts		Automobile Payments	
Accounts & Notes Receivable		Credit Cards	
Life Insurance (Cash Surrender Value)		Loans Against Life Insurance	
Securities Owned		Mortgages/Liens on Other Real Estate	
Other Real Estate Owned		Loans Against 401k/Retirement	
Automobiles		Unpaid Taxes	
Other Personal Property		Other Liabilities (Detail)	
Other Assets (Detail):			
		Total Liabilities	
		Total Net Worth	
Total Assets		Total Liabilities + Net Worth	

INCOME & CONTINGENT LIABILITIES

ANNUAL INCOME	APPLICANT	CO-APPLICANT	CONTINGENT LIABILITIES	AMOUNT
Salary			As Endorser	
Commissions			As Guarantor	
Dividends			Lawsuit/Legal Actions	
Interest			Tax Obligations	
Rental Income			Other	
Other Income*				
			<input type="checkbox"/> Check here if None	
TOTAL INCOME			TOTAL CONTINGENT LIABILITIES	

*Income from alimony, child support, or separate maintenance income need not be revealed if the applicant or co-applicant does not wish to have it considered as a basis for repaying this obligation

HOMESTEAD/CONTRACTS FOR DEED OWNED

Debtor	Owed To	Property Type	Lien Position	Monthly Payment	Unpaid Balance
			TOTAL		

IRA/OTHER RETIREMENT ACCOUNTS

Investment Fund	Investment Owner	Fund Type	Cost	Market Value	Date of Quotation
		TOTAL			

ACCOUNTS & NOTES RECEIVABLE

Name of Debtor	Owed To	Collateral	Monthly Payment	Maturity Date	Unpaid Balance
		TOTAL			

LIFE INSURANCE

Insured	Insurance Company	Beneficiary	Policy Value	Cash Value	Loans
		TOTAL			

SECURITIES OWNED

Number of Shares	Name of Securities	Security Owner	Cost	Market Value	Date of Quotation
		TOTAL			

OTHER REAL ESTATE OWNED

Debtor	Owed To	Property Type	Lien Position	Monthly Payment	Unpaid Balance
			TOTAL		

NOTES PAYABLE

Debtor	Owed To	Collateral	Lien Position	Monthly Payment	Unpaid Balance
			TOTAL		

CREDIT CARD DEBT

Creditor	Card Owner	Monthly Payment	Unpaid Balance
TOTAL			

PLEASE ANSWER THE FOLLOWING QUESTIONS

1. Income tax returns filed through (date): _____ Are any currently being audited or contested? Yes No
If yes, what year(s)? _____
2. Have (either of) you or any firm in which you were a major owner ever declared bankruptcy? Yes No
If yes, please provide details: _____
3. Have you drawn a will? Yes No
If yes, please furnish the name of the executor(s) and year will was drawn: _____
4. Number of dependents (excluding self) and relationship to applicant: _____
5. Have you ever had a financial plan prepared for you? Yes No
6. Did you include two years federal and state tax returns? Yes No
7. Do (either of) you have a line of credit or unused credit facility at any other institution(s)? Yes No
If so, please indicate where, how much, and name of banker: _____
8. Do you anticipate any substantial inheritances? Yes No
If yes, please explain: _____
9. Any significant changes expected in the next 12 months on this financial statement? Yes No
If yes, please explain: _____

REPRESENTATIONS AND WARRANTIES

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 guarantee of the undersigned. The undersigned acknowledge and understand that you are relying on the information provided herein in deciding to grant or continue credit or to accept a guarantee thereof. Each of the undersigned represents, warrants and certifies that the information provided herein is true, correct and complete. 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. If the undersigned fail to notify you as required above, or if any of the information herein should prove to be inaccurate or incomplete in any material respect, you may declare the indebtedness of the undersigned or the indebtedness guaranteed by the undersigned, as the case may be, immediately due and payable. 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. The undersigned authorize any person or consumer reporting agency to give you any information it may have on the undersigned. Each of the undersigned authorizes you to answer questions about your credit experience with the undersigned. As long as any obligation or guarantee of the undersigned to you is outstanding, the undersigned shall supply annually an updated financial statement. This personal financial statement and any other financial or other information that the undersigned give you shall be your property.

Date

Applicant Signature

Date

Co-Applicant's Signature (if you are requesting the financial accommodation jointly)