

## PERSONAL FINANCIAL STATEMENT AS OF \_\_\_\_\_

			P	ERSONAL	INFORMATION					
APPLICANT (NAME)					CO-APPLICANT (NAME)					
Employer				Employer						
Address of Employer					Address of Employer					
Business	No. of	Title/Posit	ion		Business	No. of Years	Title/Position	on		
Phone	Years with				Phone	with				
No.	Employer				No.	Employer				
Name of previous employer				No of	Name of previous employer &	!			No of	
& position (if with current				Yrs.	position (if with current employer					
employer less than 3 yrs.)				less than 3 yrs.)						
Home Address					Home Address					
Home	Social		Date of		Home	Social Date of		Date of		
Phone No.	Security No.		Birth		Phone No.	Security No. Bi		Birth		
Name, Phone No. of your Accou	ıntant				Name, Phone No. of your Accountant					
Name, Phone No. of your Attorn	ey				Name, Phone No. of your Attorney					
Name, Phone No. of your Investment Advisor/Broker			Name, Phone No. of your Investment Advisor/Broker							
Name, Phone No. of your Insurance Advisor			Name, Phone No. of your Insurance Advisor							

AMOUNT (\$)
\$
5 \$

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Balance Sheet as of	

ASSETS	AMOUNT (\$)	LIABILITIES	AMOUNT (\$)
Cash in this Bank (including money market accounts,	\$		
CD's)			
Cash in Other Financial Institutions (List) (including			
money market accounts, CD's)		Notes Payable to this Bank	
		Secured	\$
		Unsecured	
		Notes Payable to Others (Schedule E)	
		Secured	
		Unsecured	
		Accounts Payable (including credit cards)	
		Margin Accounts	
Readily Marketable Securities (Schedule A)		Notes Due: Partnership (Schedule D)	
Non-Readily Marketable Securities (Schedule A)		Taxes Payable	
Accounts and Notes Receivable		Mortgage Debt (Schedule C)	
Net Cash Surrender Value of Life Insurance		Life Insurance Loans (Schedule B)	
(Schedule B)			
Residential Real Estate (Schedule C)		Other Liabilities (List):	
Partnerships/PC Interests (Schedule D)			
IRA, Keogh, Profit-Sharing & Other Vested			
Retirement Accts.			
Deferred Income (number of years deferred)			
Personal Property (including automobiles)			
Other Assets (List):			
		TOTAL LIABILITIES	
		NET WORTH	
	\$		\$
	,	-	,

CONTINGENT LIABILITIES	YES	NO	AMOUNT
Are you a guarantor, co-maker, or endorser for any debt of an individual, corporation, or partnership?			\$
Do you have any outstanding letters of credit or surety bonds?			
Are there any suits or legal actions pending against you?			
Are you contingently liable on any lease or contract/			
Are any of your tax obligations past due?			
What would be your total estimated tax liability if you were to sell your major assets?			
If yes for any of the above, give details:			

Schedule A – All Sec	Schedule A – All Securities (including non-money market mutual funds)											
No. of Shares (stock) or Face Value (Bonds)	DESCRIPTION	OWNER(S)	WHERE HELD	COST	CURRENT MARKET VALUE	YES	NO					
READILY MARKETABLE SECURITIES (including U.S. Governments and Municipals) *												
NON-READILY MARKET	NON-READILY MARKETABLE SECURITIES (closely held, thinly traded, or restricted stock)											

<sup>\*</sup> If not enough space, attach a separate schedule or brokerage statement and enter totals only.

Schedule B – Insurance Life Insurance (use additional sheet if necessary)									
Insurance Company	Face Amount of Policy	Type of Policy	Beneficiary	Cash Surrender Value	Amount Borrower	Ownership			

Disability Insurance	Applicant	Co-Applicant
Monthly Distribution if Disabled		
Numbers of Years Covered		

Schedule C- Personal Residence & Real Estate Investments, Mortgage Debt (majority ownership only)									
Personal Residence Property Address	Legal Owner	Purchase Year	Price	Market Value	Present Loan Balance	Interest Rate	Loan Maturity Date	Monthly Payment	Lender
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Investment Property Address	Legal Owner	Purchase Year	Price	Market Value	Present Loan Balance	Interest Rate	Loan Maturity Date	Monthly Payment	Lender

Type of Investment	Date of Initial Investment	Cost	Percent Owned	Current Market Value	Balance Due on Partnerships: Notes, Cash Call	Final Contribution Date
Business/Professional (indicate name):					·	
Investments (Including Tax Shelters)						

<sup>\*</sup> Note: For investments that represent a material portion of your total assets, please include the relevant financial statements or tax returns, or in the case of partnership investments or S-corporations, schedule K-1s.

Schedule E – Notes Payable										
Due to	Type of Facility	Amount of Line	Secured Yes No		Collateral	Interest Rate	Maturity	Unpaid Balance		

Personal Financial Statement Page 4 of 4 Please answer the Following Questions: Income tax returns filed through (date): Are any returns currently being audited or contested? Yes No If yes, what year(s)? Have (either of) you or any firm in which you were a major owner ever declared bankruptcy? 2. 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? No Yes 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: Do you anticipate any substantial inheritances? 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. 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 contain 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 **Your Signature** Date Co-Applicant's Signature (If you are requesting the financial accommodation jointly)