

PERSONAL FINANCIAL STATEMENT

TYPE OF CREDIT - CHECK THE APPROPRIATE BOX	
<input type="checkbox"/> Individual (Provide your financial information only.) <input type="checkbox"/> Joint, with _____ <input type="checkbox"/> Information on separate financial statement. Relationship: _____	
Financial Statement as of: _____ (Date)	
APPLICANT	CO-APPLICANT
Name:	Name:
Street Address:	Street Address:
City: State: Zip Code:	City: State: Zip Code:
Date of Birth: Social Security Number:	Date of Birth: Social Security Number:
Home Phone: Work Phone: Cell Phone:	Home Phone: Work Phone: Cell Phone:
Employer: Address:	Employer: Address:
Position/Title: How Long:	Position/Title: How Long:
Dependents (Include Self):	Dependents (Include Self):
Marital Status Unmarried* <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> <small>* includes single, divorced, widowed</small>	Marital Status Unmarried* <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> <small>* includes single, divorced, widowed</small>

ASSETS:		LIABILITIES:	
Cash (Schedule 1)	\$	Notes payable to Financial Institutions (Schedule 6)	\$
Securities (Schedule 2)	\$	Notes payable to Others (Schedule 6)	\$
Life Insurance Cash Value (Schedule 3)	\$	Credit Card Accounts (Schedule 7)	\$
Notes and Contracts Held by You (Schedule 4)	\$	Loans against Life Insurance Policies (Schedule 3)	\$
Real Estate: Personal Residence (Schedule 5)	\$	Installment/Auto Loans (Schedule 6)	\$
Other Real Estate (Schedule 5)	\$	Mortgages on Personal Residence (Schedule 5)	\$
Pension & Retirement Accounts, including IRA's	\$	Mortgages on Other Real Estate (Schedule 5)	\$
Automobiles (Describe: Year/Make/Model)	\$	Taxes Due	\$
	\$	Other Liabilities (Described):	\$
Personal Property	\$		\$
Other Assets (Describe)	\$		\$
	\$		\$
	\$	Total Liabilities	\$
Total	\$	(Total Assets Less Total Liabilities) Net Worth	\$

Attach additional pages if necessary. Additional pages must be signed and dated by all parties to this financial statement.

ANNUAL INCOME	Applicant	Co-Applicant	PLEASE ANSWER EACH QUESTION (Yes or No)		
			Applicant	Co-Applicant	
Salary	\$	\$			
Bonuses/Commissions	\$	\$	Are you a co-maker, Endorser, or Guarantor for any other person's debt or obligation?		
Dividends/Interest	\$	\$			
Net Real Estate Rental Income	\$	\$	Income Tax Return filed thru what date?		
Income from alimony, child support, or maintenance payments need not be entered unless you want it considered as a basis for repayment.	\$	\$	Have you ever gone thru Bankruptcy or had a judgment against you in the last 10 years? If so, please attach explanation and dates of such actions.		
Other (list)	\$	\$	Are you a defendant in any suit or legal action?		
Total	\$	\$	Have you made a will?		

SCHEDULE 1 / CASH ON HAND AND IN BANKS

Name of Bank or Financial Institution	Type of Account	Account Balance
		\$
		\$
		\$
Total		\$

SCHEDULE 2 / SECURITIES OWNED

Description	# Shares	Par Value	Description (Indicate if Listed or Unlisted)	Current Market Value
				\$
				\$
				\$
Total				\$

SCHEDULE 3 / LIFE INSURANCE

Insurance Company	Face Value of Policy	Cash Value of Policy	Insured / Beneficiary	Loans
				\$
				\$
Total				\$

SCHEDULE 4 / RECEIVABLES DUE ME (US) ON NOTES & CONTRACTS I (WE) OWN

Name of Debtor	Maturity	Interest Rate	Security	Monthly Payment	Balance Due
				\$	\$
				\$	\$
				\$	\$
Total					\$

SCHEDULE 5 / REAL ESTATE OWNED

Description & Location of Property	Title in Name of and % Owned	Date Acquired	Purchase Price	Current Mkt. Value	Date Due	Monthly Payment	Balance Due
						\$	\$
						\$	\$
						\$	\$
						\$	\$
Total							\$

SCHEDULE 6 / NOTES PAYABLE TO FINANCIAL INSTITUTIONS/OTHERS & AUTO/INSTALLMENT LOANS

Name of Creditor	Collateral	Maturity Date	Monthly Payment	Balance Due
			\$	\$
			\$	\$
			\$	\$
			\$	\$
Total			\$	\$

SCHEDULE 7 / CREDIT CARD ACCOUNTS

Name of Creditor	Monthly Payment	Balance Due
	\$	\$
	\$	\$
	\$	\$
	\$	\$
Total		\$

This information and the information provided on all accompanying financial statements and schedules is provided for the purpose of obtaining credit or the Applicant(s) or for the purpose of Applicant(s) guaranteeing credit for others. Applicant(s) acknowledge that representations made in this Statement will be relied on by the Creditor in its decision to grant such credit. This Statement is true and correct in every detail and accurately represents the financial condition of the Applicant(s) on the date given herein. You are authorized to make all inquiries you deem necessary to verify the accuracy of the information contained herein and to determine the creditworthiness of the undersigned. Applicant(s) will promptly notify Creditor of any subsequent changes which would affect the accuracy of this Statement. Creditor is further authorized to answer any questions about Creditors credit experience with Applicant(s). Applicant(s) are aware that any knowing or willful false statements regarding the value of the above property for purposes of influencing the actions of Creditor can be a violation of federal law 18 U.S.C. sec 1014 and may result in a fine or imprisonment or both.

By signing below, each representative of the Applicant declares that he/she has read and understands the statement above.

Signature: _____ Date: _____ Signature: _____ Date: _____
 Applicant Co-Applicant

PERSONAL INFORMATION

Please fill in all spaces. If an item is not applicable, please indicate as such. You may include additional relevant information on a separate page. **SIGN & DATE** where indicated.

Attach Resume
If Available

PERSONAL INFORMATION:

Name_____	SS #_____
DATE OF BIRTH_____	HOME TELEPHONE_____
BUSINESS TELEPHONE_____	CELL_____
FAX_____	E-MAIL_____

HOME ADDRESS CITY/STATE_____		
FROM_____	TO_____	PRESENT

PREVIOUS ADDRESS_____	
FROM_____	TO_____

SPOUSE'S NAME_____	SS#_____
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ARE YOU A CITIZEN_____	IF NO ALIEN REGISTRATION #_____
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EDUCATION:

COLLEGE / TECHNICAL TRAINING - NAME/LOCATION	DATES ATTENDED	DEGREE?

MILITARY SERVICE:

BRANCH OF SERVICE_____	DATES OF SERVICE_____
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WORK EXPERIENCE: (go back last 10 years) Attach Resume If Available

COMPANY NAME / LOCATION_____		
FROM_____	TO_____	TITLE_____
DUTIES		

COMPANY NAME / LOCATION_____		
FROM_____	TO_____	TITLE_____
DUTIES		

COMPANY NAME / LOCATION_____		
FROM_____	TO_____	TITLE_____
DUTIES		