

Personal Financial Statement

You can either download this form to your computer and complete it electronically or print it and complete it by hand. Either way, please complete all sections, sign and date the last page (your actual signature is required), and mail or email it to your loan officer.

With respect to completion of the Asset and Liabilities sections, entries should be made as follows:

- Assets:**
- The “Applicant” column should include entries for assets owned SOLELY by the Applicant.
 - The “Co-Applicant” column should include entries for assets owned SOLELY by the Co-Applicant.
 - The “Joint” column should include entries for assets owned by either the Applicant or Co-Applicant jointly with any other party, including each other.
- Liabilities:**
- The “Applicant” column should include entries for obligations owed SOLELY by the Applicant.
 - The “Co-Applicant” column should include entries for obligations owed SOLELY by the Co-Applicant.
 - The “Joint” column should include entries for obligations owed by either the Applicant or Co-Applicant jointly with any other party, including each other.

Read carefully, check the applicable box and complete the form accordingly:

- Individual Credit: If you are applying for individual credit in your own name and are relying on your own income or assets and not the income or assets of another person as the basis for repayment of the credit requested, you may skip Section 2 (Co-Applicant Information).
- If you are applying for individual credit, but are relying on income from alimony, child support or separate maintenance or on the income or assets of another person as a basis for repayment of the credit requested, complete all Sections providing information in Section 2 about the person whose alimony, support, maintenance payments, income or assets you are relying.
- If you intend to apply for joint credit, complete all sections, providing information in Section 2 about the joint applicant.
Initial Here: Applicant: _____ Co-Applicant: _____
- If this statement relates to your guaranty of the indebtedness of other person(s), firm(s) or corporation(s), complete all sections (including Section 2, if applicable).

Type or Print

SECTION 1 Applicant Information	
Name:	
Residence Address, City, State, Zip:	Years There:
Position or Occupation:	
Business Name:	Years There:
Business Address, City State, Zip:	
Residence/Cell Phone:	Business Phone:
Email Address:	

SECTION 2 Co-Applicant Information	
Name:	
Residence Address, City, State, Zip:	Years There:
Position or Occupation:	
Business Name:	Years There:
Business Address, City, State, Zip:	
Residence/Cell Phone:	Business Phone:
Email Address:	

SECTION 3 | Statement of Financial Condition

Financial Condition as of : / /	In Dollars (Omit Cents)		
Assets (Exclude assets of doubtful value)	Applicant	Co-Applicant	Joint
Cash-on-Hand and in Banks (See Schedule A)			
U.S. Government and Marketable Securities, Non-retirement (See Schedule B)			
Securities held by Broker in Margin Accounts			
Cash Value Life Insurance (See Schedule C)			
Securities: Not Readily Marketable (See Schedule D)			
Real Estate Owned (See Schedule E)			
Partial Interest in Real Estate (See Schedule F)			
Closely Held Businesses (See Schedule G)			
Retirement and Deferred Compensation Accounts (See Schedule H)			
Loans Receivable			
Automobiles and Other Personal Property			
Other Asset:			
Other Asset:			
Other Asset:			
TOTAL ASSETS:			

Liabilities	Applicant	Co-Applicant	Joint
Notes Payable to Banks; Secured (See Schedule I)			
Notes Payable to Banks; Unsecured (See Schedule I)			
Due to Security Brokers			
Cash Value Life Insurance Policy Loans			
Outstanding Credit Card Balances			
Real Estate Mortgages Payable (See Schedule E)			
Unpaid Taxes and Interest			
Amounts Payable to Others; Secured			
Amounts Payable to Others; Unsecured			
Other Debt:			
Other Debt:			
Total Liabilities:			
Total Net Worth: (assets minus liabilities)			
TOTAL LIABILITIES AND NET WORTH:			

SECTION 4 | Income Sources for the Year

Year Ended : / /	Applicant	Co-Applicant	Total
Salary			
Bonuses			
Commissions			
Dividends and Interest			
Real Estate Income			
Other Income			
TOTAL:			

Alimony, child support or separate income need not be revealed if you do not wish to have it considered as a basis for repaying your obligations with the Bank.

SECTION 5 | Personal Information

Are you a partner or officer in any other venture? Yes No If so, describe:

Are any assets pledged other than as described on schedules? Yes No If so, describe:

Are you obligated to pay alimony, child support or separate Maintenance payments? Yes No If so, describe:

Dependent Names, Ages:

Personal bank accounts carried at:

Have you ever been declared bankrupt, or had real estate in which you had ownership (i) foreclosed upon, or (ii) been part of a short sale?
 Yes No If so, describe:

Do you have a will? Yes No Year dated: / / Do you have a trust? Yes No Year dated: / /

Income taxes filed through: / /

SECTION 6 | Contingent Liabilities

Are you an endorser, co-maker or guarantor on any notes? Yes No Are any of your tax obligations past due? Yes No

Are you contingently liable on any lease or contract? Yes No Are there any suits or legal actions pending against you? Yes No

Are you contingently liable for any partnership or other contributions? Yes No

Do you have any other contingent (or other potential) liabilities elsewhere undisclosed? Yes No

If you answered yes to any of the above questions, provide details on an additional sheet, sign it and attach to this financial statement.

SECTION 7 | Detailed Schedule Information**SCHEDULE A | Cash (Checking, Savings, Money Market, CDs, etc.)**

Financial Institution	Type of Account	Name on Account	Pledged?	Balance
			<input type="checkbox"/> Y <input type="checkbox"/> N	
			<input type="checkbox"/> Y <input type="checkbox"/> N	
			<input type="checkbox"/> Y <input type="checkbox"/> N	
			<input type="checkbox"/> Y <input type="checkbox"/> N	
			<input type="checkbox"/> Y <input type="checkbox"/> N	
			<input type="checkbox"/> Y <input type="checkbox"/> N	

SCHEDULE B | U.S. Government and Marketable Securities (Non-Retirement)

Provide copies of Broker's/Other Account Statements

Brokerage Firm	In Name of	Account #	Pledged?	Market Value
			<input type="checkbox"/> Y <input type="checkbox"/> N	
			<input type="checkbox"/> Y <input type="checkbox"/> N	
			<input type="checkbox"/> Y <input type="checkbox"/> N	
			<input type="checkbox"/> Y <input type="checkbox"/> N	
			<input type="checkbox"/> Y <input type="checkbox"/> N	

SCHEDULE C | Life Insurance Carried

Insurance Company Name	Insured	Owner of Property	Face Value	Policy Loans	Cash Surrender Value	Pledged?
						<input type="checkbox"/> Y <input type="checkbox"/> N
						<input type="checkbox"/> Y <input type="checkbox"/> N
						<input type="checkbox"/> Y <input type="checkbox"/> N
						<input type="checkbox"/> Y <input type="checkbox"/> N
						<input type="checkbox"/> Y <input type="checkbox"/> N

SCHEDULE D Non-Readily Marketable Securities					
# of Shares	Description	In Name of	Source of Value	Pledged?	Market Value
				<input type="checkbox"/> Y <input type="checkbox"/> N	
				<input type="checkbox"/> Y <input type="checkbox"/> N	
				<input type="checkbox"/> Y <input type="checkbox"/> N	
				<input type="checkbox"/> Y <input type="checkbox"/> N	
				<input type="checkbox"/> Y <input type="checkbox"/> N	
				<input type="checkbox"/> Y <input type="checkbox"/> N	

SCHEDULE E Real Estate Owned		
Property Type: SF:Single Family MF: Multi-Family C: Commercial/Industrial L: Land/Acreage		
Property Address:		Property Type: <input type="checkbox"/> SF <input type="checkbox"/> MF <input type="checkbox"/> C <input type="checkbox"/> L
Title in Name of:	Year Acquired:	Cost:
Market Value:	Mortgage Balance:	
Property Address:		Property Type: <input type="checkbox"/> SF <input type="checkbox"/> MF <input type="checkbox"/> C <input type="checkbox"/> L
Title in Name of:	Year Acquired:	Cost:
Market Value:	Mortgage Balance:	
Property Address:		Property Type: <input type="checkbox"/> SF <input type="checkbox"/> MF <input type="checkbox"/> C <input type="checkbox"/> L
Title in Name of:	Year Acquired:	Cost:
Market Value:	Mortgage Balance:	
Property Address:		Property Type: <input type="checkbox"/> SF <input type="checkbox"/> MF <input type="checkbox"/> C <input type="checkbox"/> L
Title in Name of:	Year Acquired:	Cost:
Market Value:	Mortgage Balance:	
Property Address:		Property Type: <input type="checkbox"/> SF <input type="checkbox"/> MF <input type="checkbox"/> C <input type="checkbox"/> L
Title in Name of:	Year Acquired:	Cost:
Market Value:	Mortgage Balance:	

SCHEDULE F Partial Interests in Real Estate			Recourse: F: Full L: Limited N: None
Property Type: SF:Single Family MF: Multi-Family C: Commercial/Industrial L: Land/Acreage			
Property Address:		Property Type: <input type="checkbox"/> SF <input type="checkbox"/> MF <input type="checkbox"/> C <input type="checkbox"/> L	
Title in Name of:	Cost:	Year Acquired:	% Owned:
Market Value:	Mortgage Balance:	Recourse: <input type="checkbox"/> F <input type="checkbox"/> L <input type="checkbox"/> N	
Property Address:		Property Type: <input type="checkbox"/> SF <input type="checkbox"/> MF <input type="checkbox"/> C <input type="checkbox"/> L	
Title in Name of:	Cost:	Year Acquired:	% Owned:
Market Value:	Mortgage Balance:	Recourse: <input type="checkbox"/> F <input type="checkbox"/> L <input type="checkbox"/> N	
Property Address:		Property Type: <input type="checkbox"/> SF <input type="checkbox"/> MF <input type="checkbox"/> C <input type="checkbox"/> L	
Title in Name of:	Cost:	Year Acquired:	% Owned:
Market Value:	Mortgage Balance:	Recourse: <input type="checkbox"/> F <input type="checkbox"/> L <input type="checkbox"/> N	
Property Address:		Property Type: <input type="checkbox"/> SF <input type="checkbox"/> MF <input type="checkbox"/> C <input type="checkbox"/> L	
Title in Name of:	Cost:	Year Acquired:	% Owned:
Market Value:	Mortgage Balance:	Recourse: <input type="checkbox"/> F <input type="checkbox"/> L <input type="checkbox"/> N	
Property Address:		Property Type: <input type="checkbox"/> SF <input type="checkbox"/> MF <input type="checkbox"/> C <input type="checkbox"/> L	
Title in Name of:	Cost:	Year Acquired:	% Owned:
Market Value:	Mortgage Balance:	Recourse: <input type="checkbox"/> F <input type="checkbox"/> L <input type="checkbox"/> N	

SCHEDULE G Closely Held Businesses		
Name of Business Entity:		Valuation Date:
Ownership in Name of:		% Ownership:
Entity Type:	Total Book Equity Value:	Ownership Value:
Name of Business Entity:		Valuation Date:
Ownership in Name of:		% Ownership:
Entity Type:	Total Book Equity Value:	Ownership Value:
Name of Business Entity:		Valuation Date:
Ownership in Name of:		% Ownership:
Entity Type:	Total Book Equity Value:	Ownership Value:

SCHEDULE H Retirement and Deferred Compensation Accounts				
Owner	Account Type (IRA, 401k, etc)	% Vested	Primary Beneficiary	Account Balance

SCHEDULE I Notes Payable to Banks			
Lender Name:		Credit in the Name of:	
Collateral:	Payment Amount:	Payment Frequency:	Current Balance:
Lender Name:		Credit in the Name of:	
Collateral:	Payment Amount:	Payment Frequency:	Current Balance:
Lender Name:		Credit in the Name of:	
Collateral:	Payment Amount:	Payment Frequency:	Current Balance:
Lender Name:		Credit in the Name of:	
Collateral:	Payment Amount:	Payment Frequency:	Current Balance:

The information contained in this statement is provided for the purpose of obtaining or maintaining credit with you on behalf of the undersigned, or persons, firms or corporations in whose behalf the undersigned may either severally or jointly with others, execute a guaranty in your favor. Each undersigned understands that you are relying on the information provided herein (including the designation made as to ownership of property) in deciding to grant or continue credit. Each undersigned represents and warrants that the information provided is true and complete and that you may consider this statement as continuing to be true and correct until a written notice of change is given to you by the undersigned. You are authorized to make all inquiries you deem necessary and to obtain a consumer credit report from any credit reporting agency to verify the accuracy of the statements made herein, in connection with the Bank's preliminary evaluation of undersigned or during any periodic review of undersigned deemed necessary by the Bank. You are authorized to answer questions about your credit experience with me/us.

TELEPHONE MONITORING AND CALLING: If credit is extended to me/us, I/we agree that Bank may monitor and record telephone calls made or received by Bank or its agents regarding my/our loan/account ("Account") for quality control purposes. In order for Bank to service my Account or to collect any amounts I/we may owe, I agree that Bank or its agents, contractors, debt collectors, successors and assigns, or anyone else who may contact me/us on Bank's behalf ("Authorized Entities") may make calls and send text messages or electronic mail messages to me/us at any number provided by me/us or on my/our behalf, any email address I/we provide to Bank, or to any phone number that Bank or an Authorized Entity may obtain independently. Methods of such contact may also include using automatic telephone dialing systems, pre-recorded/artificial voice messages, or any other forms of communication. I/we agree that the consent and authorizations I/we have provided herein may be revoked only in writing addressed to Bank and any relevant Authorized Entity. I/we agree to immediately notify Bank in the event any of my/our contact information changes.

Signature (individual): _____
 Social Security Number: _____ Date of Birth: _____
 Signature (individual): _____
 Social Security Number: _____ Date of Birth: _____
 Date Signed: _____

Also indicates the "as of" date of the Statement of Financial Condition unless otherwise indicated in Section 3.