

INDIVIDUAL FINANCIAL STATEMENT

IMPORTANT: Date and sign statement

Date of Financial Statement \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

To \_\_\_\_\_ ("Lender")

For the purpose of obtaining credit from Lender and any future credit granted by Lender, or to support the extension of credit already given, I make the following statement to Lender of my financial condition on \_\_\_\_\_. This statement is Lender's property.

COMPLETE ALL BLANKS, WRITING "NO" OR "NONE" WHERE NECESSARY

Table with columns ASSETS and LIABILITIES. Rows include Cash on Hand, Gov't and Listed Securities, Unlisted Securities, Notes and Loans Receivable, Homestead and Real Estate Owned, Automobiles, Other Personal Property, Cash Value Life Insurance, Securities Held by Brokers in Margin Accts., Equity in Partnership, Equity in Proprietorship, Vested Pension Benefits or Profit Sharing, Other Assets. Total Liabilities and Assets less Liabilities = Net Worth.

Table with columns SOURCES OF INCOME FOR YEAR ENDED and CONTINGENT LIABILITIES. Rows include Salaries & Bonuses, Commissions, Dividends & Interest, Real Estate, Other. Contingent liabilities include As Endorser, Co-Maker, or Guarantor, On Lease or Contracts, Legal Claims, Other.

\*Income from Alimony, Child Support or Separate Maintenance income and income from medical insurance, disability or wage continuation insurance need not be revealed if you do not wish the Lender to consider this income in determining your creditworthiness.

PERSONAL INFORMATION

Home Telephone \_\_\_\_\_ Social Security No. \_\_\_\_\_ Date of Birth \_\_\_\_\_

Employer(s) of Applicant(s) \_\_\_\_\_

Are any assets pledged or restricted other than indicated on the following schedules? If so, describe. \_\_\_\_\_

Are you a defendant in any legal actions or suits? If so, describe. \_\_\_\_\_

Are you a partner or officer in any other venture? If so, describe. \_\_\_\_\_

Do you have a will?  Yes  No If so, name of Personal Representative. \_\_\_\_\_

Have you ever been declared Bankrupt? If so, describe. \_\_\_\_\_

Driver's License ( or  State ID Card) Name, No., State and Expiration Date \_\_\_\_\_

Changed Name on Driver's License or State ID Card in Past 5 Years  No  Yes, and give Prior Name \_\_\_\_\_

COMPLETE SCHEDULES AND SIGN ON PAGE 2

**Schedule A - Cash, Checking Accounts, Savings Accounts, & Certificates of Deposit**

Type	Name of Financial Institution	Amount	In Name Of:	PLEGGED	
				YES	NO
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

**Schedule B - U.S. Government, Listed & Unlisted Securities (List on separate sheet if necessary)**

No. of Shares or Face Value (Of Bonds)	Description*	Owner	Market Value	PLEGGED	
				YES	NO
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

\*Indicates if Securities are Restricted By Contract or SEC Regulations.

**Schedule C - Life Insurance Carried, Include Group**

Face Amount	Name of Company	Owner	Beneficiary	CASH SURRENDER	
				Value	Loans

**Schedule D - Real Estate Owned**

Address & Type of Property	Date Acquired	Owner	Cost	Mkt. Value	MORTGAGE			Insurance
					Amount	Monthly \$	Maturity	

**Schedule E - Names of Banks or Other Lenders Where Credit Has Been Obtained**

Name & Address of Lender	Borrower	Date Made	Monthly Payment	Due	High Credit	Current Balance	Sec. or Unsec.

**Schedule F - Notes and Loans Receivable**

Unpaid Amount	Name of Maker	Date Made	Security Pledged

**NOTICE:** We may report information about your account to credit bureaus. Late payments, missed payments, or other defaults on your account may be reflected in your credit report.

I certify that this financial statement is true and complete. I authorize Lender or its agents to verify the information obtained in this statement and to obtain additional information concerning my financial condition, including, without limitation, consumer credit reports, although Lender may rely on this financial statement without any further verification. I authorize Lender to furnish such information and any other credit experiences with me to others and to answer any questions about my credit experience and other financial relationships with Lender, to the extent not prohibited by applicable law. I agree to notify Lender, in writing, of any change that materially affects the accuracy of this statement.

The undersigned understand that it may be a federal crime punishable by a fine or imprisonment or both to knowingly make false statements concerning any of the above information, under provisions of applicable federal and state law.

\_\_\_\_\_ X \_\_\_\_\_  
 (Date Signed) Applicant Signature

X \_\_\_\_\_  
 Co-Applicant Signature (joint credit only)