

Personal Financial Statement

Date: _____

If you are applying for a joint account that you and another person will use, complete all sections, providing information about the joint applicant or user.

We intend to apply for joint credit.

Applicant

Co-Applicant

Personal Information

Name		Date of Birth
Street Address		Social Security Number
City, State	Zip	Home Phone
e-mail address		Alt. Phone
Present Employer		Current Position
Street Address		Years in Position
City, State	Zip	Business Phone

Name of Co-Applicant		Date of Birth
Street Address		Social Security Number
City, State	Zip	Home Phone
e-mail address		Alt. Phone
Present Employer		Current Position
Street Address		Years in Position
City, State	Zip	Business Phone

Family Information

Children/ Dependents Number:	Ages:	Do you have a Will?	Date of Will:	Name of Personal Representative:
Do you have a Trust?	Date of Trust:	Type of Trust:	Please attach a separate list of assets held in trust.	
		<input type="checkbox"/> Revocable <input type="checkbox"/> Irrevocable		

General Information

Are you a defendant in any suits or legal actions?	No	Yes	If you answered yes, please explain on a separate sheet.
Do you have or have you had a judgment, tax levy or garnishment against you?	No	Yes	
Have you or any firm in which you were a owner ever filed for bankruptcy or settled any debts for less than the amount owed?	No	Yes	

Do you pay child support, alimony or separate maintenance?	Yes	No	Monthly Payment Amount \$	
Have you ever been audited by the IRS?	Yes	No	Tax Year Audited	Year Audit Completed
Do you carry life insurance?	Yes	No	Carrier	Coverage Amount
Do you carry disability insurance?	Yes	No	Carrier	% of Salary Covered
Do you carry malpractice insurance?	Yes	No	Carrier	Aggregate Amount
			Amount Per Occurrence	Deductible

Financial Information

Assets	Amount	Liabilities	Amount
Cash and Cash Equivalents		Mortgage Loans (Total from section B2 , right) B2	
Institution Owner(s) Pledged to Whom		Loans Payable (Total from section C at right) C	
		Revolving Accounts / Credit Cards	
		Due to Brokers	
		Due to Limited Partnership	
		Partnership Due Date	
Stocks, Bonds and other Securities			
(Total from section A at right) A			
Cash Value of Life Insurance			
Bonuses, Accounts & Notes Receivable			
Due From Payable To Due Date			
		Partnership Cash Calls	
		Taxes Payable	
		Federal	
		State	
Limited Partnerships (List at Cost)		Local	
Partnership Owners % Owned		Property	
		Loans against cash value of Life Insurance	
		Other Liabilities	
Net worth of Companies in which you own stock (Include General Partnerships)			
Company Owners % Owned			
		Total Liabilities F	\$ -
		Contingent Liabilities (not otherwise included on Personal Financial Statement)	Y N Amount
Real Estate (total from section B1, right) B1		As endorser, co-maker or guarantor of loans, leases or contracts?	
Pension & Profit Sharing % Vested			
Company Plan			
IRA		As general partner?	
		Involvement in pending legal actions?	
		Contested income tax liens?	
Automobiles (Total value of all owned)			
Personal Property (please specify)		Any estimated capital gains tax on unrealized asset appreciation?	
		Other special debt or circumstances?	
		Any loans or liens held available with no current outstandings?	
		Total Contingent Liabilities (total from section D, right) D	\$
Total Assets E	\$ -	Total Net Worth (E-F)	\$ -

Other Assets

Equity in Unexercised Stock Options	Name of Stock(s)	Exercise Date(s)	Number of Shares

Section A - Stocks Bonds and other Securities

# of Shares or Bond Face Value	Description	Exchange where traded	Owner(s)	Registered / Restricted / Pledged	Held Where	Current Market Value	
Transfer A total to Personal Financial Statement at left.						\$	A

Section B - List all Real Estate Owned and Mortgage Loans

Type of Property	City/ State	Owner(s)	Year Purchased	Purchase Price	Current Market Value	Amount Owed	Monthly Payment	Interest Rate	Name of Creditor
Transfer B totals to Personal Financial Statement at Left					\$	B1	\$	B2	

Section C List all Loans and Leases Payable (excluding Mortgage Loans in Section B)

Name of Creditor	Original Loan or Line Amount	Date of Loan	Maturity Date	Secured by (List Collateral)	Amount Owed	Monthly Payment	Interest Rate
Transfer C Total to Personal Financial Statement at Left.					\$	C	

Section D List all Contingent Liabilities

Business Entity	Name of Creditor	Amount Owed	Interest Rate	Monthly Payment	% Guaranty
			\$ D		

Transfer D Total to Personal Financial Statement at Left.

Cash Flow Statement Box

Estimated Year End Annual Receipts	Amount	Estimated Annual Expenses	Amount
Salary	\$	Mortgage or Rental Payments	\$
Bonuses and Commissions		Real Estate Taxes and Assessments	
Excess proceeds from sale of real estate		Tuition	
Other Income * (Specify Source)		Legal Fees	
		Fees associated with investment activity	
		Other Living Expenses	
		Interest-only loan payments not included above	
Total Estimated Income	\$	Total Estimated Expenses	\$

* Income from alimony, child support or separate maintenance payments need not be revealed if you do not wish to have it considered as a basis for repaying the credit extension that you have requested.

Additional Information and Comments

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 guaranty of the undersigned. The undersigned acknowledges and understands that you are relying on the information provided herein in deciding to grant or continue credit or to accept a guaranty thereof. Each of the undersigned represents, warrants, and certifies that (1) the information provided herein is true, correct and complete and gives a correct and complete showing of the financial condition of the undersigned, (2) the undersigned has no liabilities direct, indirect or contingent except as set forth in this statement, and (3) legal and equitable title to all assets listed herein is in the undersigned's sole name, except as may be herein otherwise noted.

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 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. 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 and the undersigned hereby authorizes all persons of whom you make such inquiries to respond thereto in full. Each of the undersigned authorizes you to answer questions about your credit experience with the undersigned.

Applicant Signature	Date	Co-Applicant Signature	Date
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