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

## SUBMITTED TO:

Employer Employer   Address of Employer Address of Employer   Ausiness Phone No: Business Phone No.   Number of Years Title/Position     Number of Years Title/Position     Name of previous employer & position (if with current employer less than 3 yrs.) No of Yrs     Name of previous employer & position (if with current employer less than 3 yrs.) No of Yrs     Name of previous employer & position (if with current employer less than 3 yrs.) No of Yrs     Name of previous employer & position (if with current employer less than 3 yrs.) No of Yrs     Name of previous employer & position (if with current employer less than 3 yrs.) No of Yrs     Name of previous employer & position (if with current employer less than 3 yrs.) No of Yrs     Name of previous employer & position (if with current employer less than 3 yrs.) No of Yrs     Name of previous employer & position (if with current employer less than 3 yrs.) No of Yrs     Nome Phone No: Social Security No: Date of Birth   Home Phone No. of your Accountant Name, Phone No. of your Accountant     Name, Phone No of your Attorney Name, Phone No. of your Attorney				
APPLICANT (NAME)	CO-APPLICANT (NAME)			
Employer	Employer			
Address of Employer	Address of Employer			
Business Phone No:	Business Phone No.			
Number of Years Title/Position	Number of Years Title/Position			
Name of previous employer & position (if with current employer less than 3 yrs.) No of Yrs	Name of previous employer & position (if with current employer less than 3 yrs.) No of Yrs			
Home Address	Home Address			
Home Phone No: Social Security No: Date of Birth	Home Phone No. Social Security No. Date of Birth			
Name, Phone No of your Accountant	Name, Phone No. of your Accountant			
Name, Phone No of your Attorney	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			

## Cash Income & Expenditures Statement For Year Ended:

ANNUAL INCOME	AMOUNT (\$)	ANNUAL EXPEN	IDITURES	AMOUNT (\$)
Salary (applicant)		Federal Income and Other Taxe	S	
Salary (co-applicant)		State Income and Other Taxes		
Bonuses & Commissions (applicant)		Rental Payments, Co-op, or Condo Maintenance		
Bonuses & Commissions (co-applicant)		Mortgage Payments	Residential Investment	
Rental Income		Property Taxes	Residential	
Interest Income		Interest & Principal	invesument	
Dividend Income		Payments on Loans		
Capital Gains		Investments (including tax shelt	ers) IRA	
Partnership Income		Alimony/Child Support		
Other Investment Income		Tuition		
Other Income (List)**		Other Living Expense		
Corporation Distributions		Medical Expenses		
Corporation Distributions		Other Expense (List)		
TOTAL INCOME >		TOTAL E	EXPENDITURES >	

ASSETS	AMOUNT (\$)	LIABILITIES	AMOUNT (\$)
Cash in this Bank		Notes Payable to this Bank	
(including money market accounts, CDs)		Secured	
Cash in Other Financial Institutions		Unsecured	
(including money market accounts, CDs)		Notes Payable to Others (Schedule E)	
		Secured	
		Unsecured	
		Accounts Payable (Including credit cards)	
		Margin Accounts	
Readily Marketable Securities (Schedule A)		Notes Due: Partnership (Schedule)	
Non-Readily Marketable Securities (Schedule A)		Taxes Payable	
Accounts and Notes Receivable		Mortgage Debt (Schedule C)	
Net Cash Surrender Value of Life Insurance (Schedule B)		Life Insurance Loans (Schedule B)	
Residential Real Estate (Schedule C)		Other Liabilities (List):	
Real Estate Investments (Schedule C)			
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	
			L

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 Securities (including non-money market mutual funds)

No. of Shares (Stock) or Face Value (Bonds)	DESCRIPTION	OWNER(S)	WHERE HELD	COST	CURRENT MARKET VALUE	PLED	DGED
READILY MARKE	TABLE SECURITIES (including U.S. Gove	ernments and Municipals)	•			YES	NO
NON-READILY MA	ARKETABLE SECURITIES (closely held, f	thinly traded, or restricted stock)					

If not enough space, attach a separate schedule or brokerage statement and enter totals only.

Schedule B - Insurance						
Life Insurance (use additional she	eet if necessary)					
Insurance Company	Face Amount of Policy	Type of Policy	Beneficiary	Cash Surrender Value	Amount Borrowed	Ownership

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

Schedule C - Personal Residence	e & Real Estate Investme	nts Mortg	age Debt (ı	najority owners	hip only)				
Personal Residence Property Address	Legal Owner	Purc Year	hase Price	Market Value	Present Loan Balance	Inter- est Rate	Loan Maturity Date	Monthly Payment	Lender
Investment Property Address	legal Owner	Purc Year	hase Price	Market Value	Present Loan Balance	Inter- est Rate	Loan Maturity Date	Monthly Payment	Lender
	Uwilei	Tear	FILCE	Value	Dalarice	Nale	Dale	Fayment	Lender

Schedule D – Partnerships (less than majority of	ownership for I	eal –estate partnerships	)			
Type of Investment	Date of Initial Investment	Cost	Percent Owned	Current Market Value	Balance Due on Partnership: Notes, Cash Call	Final Contribution Date
Business/Professional (Indicate name):						
Investments (Including Tax Shelters):						

Note: For investments which 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	Turne of Facility	Amount of line	Sec	ured	Colleteral	Interest	Moturity	Unpaid
	Type of Facillty	Amount of line	Yes	No	Collateral	Rate	Maturity	Balance

Please Answer The Following Questions:	Yes	No
1. Income tax returns filed through (date): Are any returns currently being audited or contested?		
If yes, what year(s)?		
2. Have (either of) you or any firm in which you were a major owner ever declared bankruptcy?		
If yes, please provide details:		
3. Have you drawn a will?		
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?		
6. Did you include two years federal and state returns?		
7. Do (either of) you have a line of credit or unused credit facility at any other insitution(s)?		
If so, please indicate where, how much, and name of banker:		
8. Do you anticipate any substantial inheritances?		
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. In the absence of such notice or a new and full written statement, this should be considered as a continuing statement and substantially correct. 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 contained herein and to determine the credit-worthiness 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

**Co-Applicant's Signature** 

Date