

PERSONAL FINANCIAL STATEMENT

You are not required to give information as to your spouse or marital status. The availability of credit will be based on the information provided.

Check Appropriate Box:					
☐ If you are applying for another person as the basis for re		•	r own name and are relying on your own income o , complete entire form.	r assets and not the income or assets of	
	pplicant or user is		t that you and another person will use, complete al , please fill out a separate Personal Financial States		
We intend to apply for joint cred	lit.				
Applicant Signature Co-			Co-Applicant Signature		
of another person as the basis for	r repayment of the	credit requ	ying on income from alimony, child support, or sejested, complete all Sections to the extent possible, ance payments or income or assets you are relying	providing information on a separate sheet of	
Please Complete All Information,	Sign and Date Forn	n.			
Applicant					
			Email Address	Date of Birth	
Applicant's Name			Social Security No.	Home Telephone	
				Own Rent	
Street Address			How Long?		
City	State	Zip Code	Monthly Payment	Cell Phone	
Current Employer			Position	Business Telephone	
Address			How Long?	Annual Salary (verifiable)	
Previous Employer			Position	_	
Address			How Long?	Annual Salary (verifiable)	
Joint Applicant					
			Email Address	Date of Birth	
Applicant's Name			Social Security No.	Home Telephone	
Street Address			How Long?	Own Rent	
City	State	Zip Code	Monthly Payment	Cell Phone	
Current Employer			Position	Business Telephone	
Address			How Long?	Annual Salary (verifiable)	
Previous Employer			Position		
Address			How Long?	Annual Salary (verifiable)	

Financial Condition a	as of: (DATE)		•		
Assets:		<u>Liabil</u>	lities:		
Cash on Hand and in Bank	(A)	Notes Pag	yable Bank		
Marketable Securities	(B)	Notes Pay	yable Others		
Accounts and Notes Receivable	(C)	Real Esta	nte Mortgages – Reside	nce	
Real Estate Owned – Residence	(<u>D)</u>	Real Esta	ate Mortgages – Others		
Real Estate Owned – Others	<u>(D)</u>	Home Eq	luity Loans		
Partial Interest in Real Estate	(<u>E)</u>	Auto Loa	nns		
Closely-Held Businesses		Credit Ca	ard Accounts (aggregat	e balance)	
Automobiles		Other De	bts		
Cash Value – Life Insurance	(F)	TOTAL I	LIABILITIES:		
Retirement Account – IRA, 401K	·	Continger	nt Liabilities:	Complete section (G)	
Personal Property		NET WO			
Other Assets		(= Total A	Assets – Total Liabiliti	es)	
TOTAL ASSETS:		TOTAL I	LIABILITIES AND N	ET WORTH:	
Annual Income: (veri	fiable)	Annual Expe	enses:		
Applicant Salary		Income Taxes (State	and Federal)		
Commissions/Bonuses		Rent or Mortgage Pa	nyment		
Joint Applicant Salary		Auto Loan Payment			
Commission/Bonuses		Credit Card Paymen	ts		
Dividend and Interest		Other Loan Payment			
Business Income		Medical and Dental	Expenses		
Gross Rental Income		Living Expenses			
Other Income*		All Other Expenses ((Alimony, tuition, child	d support)	
TOTAL INCOME:		TOTAL EXPENSES	S:		
*Alimony, child support or mainte	enance payments need not be indicated if the	ne applicant does not cl	hoose to disclose such	income.	
Please complete Schedules below	• •				
(A) Banking Informa	ation _				
Bank/Credit Union	Address	Account Type	Account No.	Current Balance	Maturity

(B) Marketable Se	<u>curities/Mutua</u>	l Funds				
Description	Legal Owner		No. of Shares	Cost	Market Value	Pledged? Y/N
(C) Accounts and	Notes Receivab	<u>le</u>				
Borrower	Address		Original Amount	Current Balance	When Due	<u>Collateral</u>
(D) Real Estate Ov	vned – Residen	ce and Other	<u> </u>			
Description & Location	Legal Owner		Date of Purchase	Market Value	Mortgage Balance	Monthly Payment
(E) Dantial Internal	t in Dool Estate	(State Dergar	otaga of Owner	eghin)		
(E) Partial Interes Description & Location	Legal Owner	(State Percer	% Interest Cost	Market Valu	e Mortgage Balanc	Monthly Payment
(F) Life Insurance						_
Insurance Company's Name		Beneficiary		Face Value	Loans	Cash Value
(G) Contingent Lia Please provide the details of an		including guarantor (or co-maker on loans,	leases or contracts; lega	I claims pending; and ou	tstanding federal and
state tax obligations. Description			Amour	nt of Contingent Liabilit	Y	

The undersigned certifies that the information inserted in this document and any attachment has been carefully read and is true and correct. If any change occurs that materially reduces the means or ability of the undersigned to pay all claims or demands, the undersigned will immediately and without delay notify the said Bank, and unless the Bank is so notified it may continue to rely upon the statement herein given as a true and accurate statement of the financial condition of the undersigned as of the close of business.

I/We authorize you, and any duly authorized agents, to obtain and use credit reports and to exchange credit information in connection with my/our application and any update, renewal, account review, extension or as part of the bank's quality control program. It is understood that a photocopy of this form will serve as authorization.

I/We understand that I/We must update this credit information at your request and/or if my/our financial condition changes.

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I/We acknowledge that the credit being applied for will be used for business purposes.		
Dated Signed	Signature	
Dated Signed	Signature	