

# TEACHERS FEDERAL CREDIT UNION

## PERSONAL FINANCIAL STATEMENT

As of \_\_\_\_\_

**Complete this form for (1) each proprietor owning 20% or more of applying business, or (2) each limited partner who owns 20% or more interest and each general partner, or (3) each stockholder owning 20% or more of voting stock, or (4) any personal or entity providing a guaranty on this loan.**

Name \_\_\_\_\_ Business Phone \_\_\_\_\_

Residence Address \_\_\_\_\_ Residence Phone \_\_\_\_\_

City, State & Zip Code \_\_\_\_\_

Business Name of Applicant \_\_\_\_\_

<b>ASSETS</b>		(Omit Cents)	<b>LIABILITIES</b>		(Omit Cents)
Cash on hand and in Banks.....	\$	_____	Accounts Payable.....	\$	_____
Savings Accounts.....	\$	_____	Notes Payable to Banks and Others.....	\$	_____
IRA or Other Retirement Account.....	\$	_____	(Describe in Section 1)		
Personal Receivables.....	\$	_____	Installment Account (Auto).....	\$	_____
Life Insurance – Cash Surrender Value Only.....	\$	_____	Installment Account (Other).....	\$	_____
(Complete Section 7)			Loan on Life Insurance.....	\$	_____
Stocks and Bonds.....	\$	_____	Mortgages on Real Estate.....	\$	_____
(Describe in Section 2)			(Describe in Section 3)		
Real Estate.....	\$	_____	Unpaid Taxes.....	\$	_____
(Describe in Section 3)			(Describe in Section 5)		
Automobile(s) – Present Value.....	\$	_____	Other Liabilities.....	\$	_____
Other Personal Property.....	\$	_____	(Describe in Section 6)		
(Describe in Section 4)			<b>Total Liabilities</b> .....	\$	_____
Other Assets.....	\$	_____	<b>Net Worth</b> .....	\$	_____
(Describe in Section 4)			(Total Assets minus Total Liabilities)		
<b>Total Assets</b> .....	\$	_____			

### Source of Income

### Contingent Liabilities

(Contingent Liabilities do not reduce net worth.)

Salary.....\$ \_\_\_\_\_ As Endorser or Co-Maker.....\$ \_\_\_\_\_

Net Investment Income.....\$ \_\_\_\_\_ Legal Claims & Judgments.....\$ \_\_\_\_\_

Real Estate Income.....\$ \_\_\_\_\_ Provision for Federal Income Tax.....\$ \_\_\_\_\_

Other Income...(Describe) .....\$ \_\_\_\_\_ Other Special Debt.....\$ \_\_\_\_\_

Section 1. **Personal Notes Payable to Bank and Others** (Use attachments if necessary. Each attachment must be identified as a part Of this statement and signed.)

Name and Address of Noteholder(s)	Original Balance	Current Balance	Payment Amount	Frequency (monthly, etc.)	How Secured or Endorsed Type of Collateral
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

Section 2. **Stocks and Bonds** (Use attachments if necessary. Each attachment must be identified as a part of this statement and signed.)  
Do not include your ownership interest in an applicant or participating DBE firm. Mark value as of date of this statement.

Number of Shares	Name of Securities	Fair Market Value
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Section 3. **Real Estate Owned** (List each parcel separately. Use attachments if necessary. Each attachment must be identified as a part of this statement and signed.)

	Property A	Property B	Property C
Type of Property	_____	_____	_____
Address	_____	_____	_____
Date Purchased	_____	_____	_____
Original Cost	_____	_____	_____
Present Market Value	_____	_____	_____
Name and Address of Mortgage Holder	_____	_____	_____
Mortgage Account Number	_____	_____	_____
Mortgage Balance	_____	_____	_____
Amount of Payment Per Month/Year	_____	_____	_____
Status of Mortgage	_____	_____	_____

Section 4. **Other Personal Property and Other Assets** (Describe, and if any is pledged as Security, state name and address of lien holder, amount of lien, terms of payment, and if delinquent, describe delinquency.)  
Do not include your ownership interest in an applicant or participating DBE firm.

\_\_\_\_\_  
\_\_\_\_\_

Section 5. **Unpaid Taxes** (Describe in detail, as to type, to whom payable, when due, amount and to what property, if any a tax lien attaches.)

\_\_\_\_\_  
\_\_\_\_\_

Section 6. **Other Liabilities** (Describe in detail.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Section 7. **Life Insurance Held** (Give face amount and cash surrender value of policies – name of insurance company and beneficiaries.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I authorize Teachers Federal Credit Union to verify the accuracy of the statements made in this personal financial statement at lenders discretion.  
I swear that the foregoing statements and ensuing attachments are true and accurate.

\_\_\_\_\_  
(SIGNATURE) (DATE)

\_\_\_\_\_  
(PRINTED NAME)

\_\_\_\_\_  
(TITLE)

\_\_\_\_\_  
(SOCIAL SECURITY #)