

FINANCIAL STATEMENT Personal Form

NOTICE TO APPLICANTS: If you are applying for credit and not relying on the income or separate assets of another person, or on alimony, child support or separate maintenance, as the basis for repayment of the credit requested, do not include any information regarding the income or separate assets of your spouse or any other person. If you are relying on the income or separate assets of another person (including, for example, your spouse) or on alimony, child support or separate maintenance payments, complete all sections of this statement, providing information about the person on whose income, assets, alimony, child support or separate maintenance payments you are relying. You and any person listed in the Spouse/Co-Applicant section must sign any applicable credit documents, unless the other person is listed only because he/she is a source of alimony, child support or separate maintenance.

TO:		OFFICE		NO.		SOCIAL SECURITY NO.	
NAME		ADDRESS		CITY		STATE	
						ZIP CODE	
EMPLOYER NAME & ADDRESS				POSITION HELD		EVENING TELEPHONE NO.	
						BUSINESS PHONE NO.	
SPOUSE/CO-APPLICANT NAME		SOC. SEC. NO.		FINANCIAL CONDITION AS OF 20___			
ASSETS				LIABILITIES			
CASH IN THIS BANK	(CHECKING) DEMAND			NOTES PAYABLE TO THIS BANK (Sch. 4)			
	(SAVINGS) TIME			NOTES PAYABLE TO OTHER BANKS AND OTHER FINANCIAL INSTITUTIONS (Sch. 4)			
CASH IN OTHER FINANCIAL INSTITUTIONS	(CHECKING) DEMAND			CURRENT BILLS PAYABLE (Other than installment Loans)			
	(SAVINGS) TIME						
ACCOUNTS RECEIVABLE				INCOME AND OTHER TAXES PAYABLE			
NOTES OR MORTGAGES RECEIVABLE (Due within one year) (Sch. 1)				DUE TO BROKERS			
STOCKS AND BONDS - LISTED ON MAJOR EXCHANGES (Sch. 2)							
CURRENT ASSETS				CURRENT LIABILITIES			
REAL ESTATE AND BUILDINGS (Sch. 3)				LOANS ON LIFE INSURANCE (Sch. 5)			
AUTOMOBILE AND OTHER VEHICLES - MARKET VALUE (Describe):				OTHER LONG TERM OBLIGATIONS (Due after one year) (Sch. 4)			
HOUSEHOLD GOODS AND OTHER PERSONAL PROPERTY (Describe):							
OTHER SECURITIES (Sch. 2)							
CASH VALUE LIFE INSURANCE (Sch. 5)							
LONG TERM RECEIVABLES (Due after one year) (Sch. 1)							
OTHER				TOTAL LIABILITIES			
				NET WORTH			
TOTAL ASSETS				TOTAL LIABILITIES AND NET WORTH			

GROSS INCOME	MONTHLY		ANNUAL		FIXED EXPENSE	MONTHLY		ANNUAL	
Alimony, child support, or separate maintenance income need not be revealed if you do not wish to have it considered as a basis for repaying this obligation.									
SALARY					INSURANCE PREMIUMS				
SPOUSE'S SALARY					RENTAL				
INCOME FROM SECURITIES (Sch. 2)					R.E. MORTGAGE & INSTALLATION PAYMENTS (Sch. 4)				
RENTAL OR LEASE INCOME (Sch. 3)					INCOME AND OTHER TAXES				
MORTGAGES OR CONTRACT INCOME (Sch. 3)					OTHER				
OTHER									
TOTAL GROSS INCOME					TOTAL FIXED EXPENSE				

SCHEDULE 1. Notes, Contracts, and Mortgages Receivable						
DUE FROM	AMOUNT DUE		DATE OF MATURITY	AMOUNT OF PAYMENT RECEIVED		TYPE OF OBLIGATION AND COLLATERAL IF SECURED
	WITHIN ONE YEAR	AFTER ONE YEAR		MONTHLY	ANNUALLY	
TOTALS						

SCHEDULE 2. Stocks and Bonds (Attach separate sheet if necessary)

No. of Shares or Face Value Bonds	DESCRIPTION	SECURITY IN NAME OF	MARKET PRICE	CURRENT MARKET VALUE		BOND INFORMATION INTEREST RATE & MATURITY DATE	ANNUAL INCOME ON SECURITIES
				Listed	Unlisted		
TOTALS							

ARE ANY OF THESE SECURITIES PLEDGED TO SECURE BROKERS LOANS? IF SO, GIVE DETAILS: _____

SCHEDULE 3. Real Estate And Buildings

Year Pur.	LOCATION AND DESCRIPTION	TITLE IN NAME OF	COST			MARKET VALUE	DEBT (See Sch. 4)	INCOME
			Land	Imp.	Total			
TOTALS								

AMOUNT OF FIRE INSURANCE FOR EACH LOCATION? _____

ARE ANY TAXES DELINQUENT? _____ IF SO, GIVE AMOUNT AND DETAILS _____

HAVE YOU FILED A HOMESTEAD? _____ IF SO, GIVE LOCATION _____

SCHEDULE 4. Notes, Contracts, and Mortgages Payable (Include Real Estate Mortgages)

DUE TO	AMOUNT DUE		DATE OF MATURITY	AMOUNT OF PAYMENT		TYPE OF OBLIGATION AND COLLATERAL IF SECURED
	WITHIN ONE YEAR	AFTER ONE YEAR		MONTHLY	ANNUALLY	
TOTALS						

IF ANY PAYMENTS OF PRINCIPLE OR INTEREST ARE DELINQUENT, PLEASE GIVE DETAILS. _____

SCHEDULE 5. Life Insurance

NAME OF COMPANY	BENEFICIARY	FACE AMT.	CASH VALUE	AMT. OF LOAN	DUE TO
TOTALS					

AUTO INSURANCE _____
PUBLIC LIABILITY \$ _____ PROPERTY DAMAGE \$ _____ HEALTH, ACCIDENT, DISABILITY: YES _____ NO _____

HAVE YOU ANY LIABILITY AS GUARANTOR OR ENDORSER? YES _____ NO _____ IF YES, GIVE DETAILS _____

HAVE YOU EVER DECLARED BANKRUPTCY? YES _____ NO _____ IF SO, GIVE DATE _____

ARE YOU MARRIED? YES _____ NO _____ IF SO, ARE ANY OF THE ABOVE ASSETS YOUR: SPOUSE'S _____ SEPARATE _____ PROPERTY?
DESCRIBE: _____

ARE THERE ANY SUITS, JUDGMENTS, TAX DEFICIENCIES OR OTHER CLAIMS PENDING OR IN PROGRESS AGAINST YOU? YES _____ NO _____
GIVE DETAILS: _____

HAVE YOU MADE A WILL? YES _____ NO _____ IF SO, WHO IS NAMED EXECUTOR OF ESTATE? _____

In submitting the foregoing statement, both the printed and written portions of which I have carefully read, I guarantee its accuracy with the intent that it be reliable upon by the Bank addressed in extending credit to me. I warrant that I have no known obligations, direct or contingent, which have not been set forth hereon and that I have no known obligations, direct or contingent, which have not been set forth hereon and that I have not knowingly withheld any material information of an adverse nature. I agree to notify the said Bank immediately, in writing, of any unfavorable change in my financial condition. I hereby authorize you to investigate my credit record to check statements I have made.

Date Signed

Signature

Date Signed

Signature (Co-Applicant)