

Personal Financial Statement

As of Date: _____, 20____

APPLICANT INFORMATION (type or print)		CO-APPLICANT INFORMATION (type or print)	
Full Name:	Birthdate:	Full Name:	Birthdate:
Social Security #:		Social Security #:	
Residence Address:		Residence Address:	
City, State, Zip		City, State, Zip	
Position/Occupation:		Position/Occupation:	
Business Name/Employer:		Business Name/Employer:	
Business Address:		Business Address:	
City, State, Zip:		City, State, Zip:	
Res. Phone:	Bus. Phone:	Res. Phone:	Bus. Phone:
ASSETS	DOLLARS	LIABILITIES	DOLLARS
Cash and on Deposit (Schedule A)	\$	Short-Term Notes Due (Schedule F)	\$
Govn't and Listed Securities (Schedule B)		Installment Notes Due (Schedule F)	
Unlisted Securities (Schedule B)			
Accounts and Notes Receivable (Schedule C)			
Cash Value Life Insurance (Schedule D)		Life Insurance Loans (Schedule F)	
Residence (Schedule E)			
Other Real Estate Owned (Schedule E)		Real Estate Mortgages (Schedule E)	
Retirement Funds			
Vehicles Owned			
Other Personal Property (Please Itemize)		Other Debts/Liabilities (Please Itemize)	
Other Assets		Unpaid Taxes	
		Total Liabilities	\$
		Net Worth	\$
TOTAL ASSETS		TOTAL LIABILITIES AND NET WORTH	\$
ANNUAL INCOME	DOLLARS	CONTINGENT LIABILITIES	DOLLARS
Salary	\$	Endorser:	\$
Other Income (Itemize)**		Co-maker:	
		Guarantor:	
Spouse Salary		Income Tax:	
Other Income (Itemize)**		On Leases/Contracts:	
		Other:	
TOTAL	\$	TOTAL	\$

**Income from alimony, child support, or separate maintenance income need not be revealed if you do not wish Lenders to consider the income in determining you credit worthiness.

PERSONAL INFORMATION
Are you a partner or officer in any other venture? If so, describe:
Have you ever declared bankruptcy? If so, describe:
Do you have a will? If so, name of personal representative:
Are you a defendant in any legal actions or suits? If so, describe:

Schedule A (Cash on Hand and Money on Deposit)							
Type	Name of Financial Institution	Amount	In Name of	Pledged Yes/No			
Schedule B (US Government, Listed & Unlisted Securities) List on separate sheet if necessary							
No of Shares of Face Value	Description	Owner(s)	Market Value	Pledged Yes/No			
Schedule C (Accounts and Notes Receivable)							
Description	Owned By	Amount Due					
Schedule D (Life Insurance Carried-include group)							
Face Amount	Name of Company	Owner(s)	Beneficiary	Cash Surrender Value			
Schedule E (Real Estate)							
Address	% Owned	Year Acquired	Market Value	Lender	Loan Balance	Maturity	Monthly Payment
Schedule F (Other Debts) Use additional sheets if necessary							
Lender	Current Balance	Interest Rate	Monthly Payment	Secured Yes/No	Type of Collateral		

The undersigned certifies that the information contained in this financial statement is true and correct and that you may consider this statement as continuing to be true and correct until a written notice of a change is given to you by the undersigned. It may be a federal crime punishable by a fine of not more than \$5,000 or imprisonment for not more than two years or both knowingly make false statements concerning any of the above information, under provisions of Title 18, United States Code, Section 1014.

Date Signed _____

Signature _____

Signature of Spouse (if Joint) _____