



PERSONAL FINANCIAL STATEMENT AS OF \_\_\_\_\_ Date

SUBMITTED TO: \_\_\_\_\_

PERSONAL INFORMATION					
APPLICANT (NAME)			CO-APPLICANT (NAME)		
Employer			Employer		
Address of Employer			Address of Employer		
Business Phone No.	No. of Years with Employer	Title/Position	Business Phone No.	No. of Years with Employer	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		
Date of Birth	Home Phone No.	Social Security No.	Date of Birth	Home Phone No.	Social Security No.
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/Broker			Name, Phone No. of your Investment/Broker		
Name, Phone No. of your Insurance Advisor			Name, Phone No. of your Insurance Advisor		

Cash Income & Expenditures Statement for Year \_\_\_\_\_ (Omit Cents)

ANNUAL INCOME	AMOUNT
Salary (applicant)	\$
Salary (co-applicant)	\$
Bonuses & Commissions (applicant)	\$
Bonuses & Commissions (co-applicant)	\$
Rental Income	\$
Interest Income	\$
Dividend Income	\$
Capital Gains	\$
Partnership Income	\$
Other Investment Income	\$
Other Income (List)**	
	\$
	\$
	\$
<b>TOTAL INCOME</b> <b>➔</b>	<b>\$</b>

ANNUAL EXPENDITURES	AMOUNT	
Federal Income and Other Taxes	\$	
State Income and Other Taxes	\$	
Rental Payments, Co-op, or Condo Maintenance	\$	
Mortgage Payments	Residential	\$
	Investment	\$
Property Taxes	Residential	\$
	Investment	\$
Interest & Principal Payments of Loans	\$	
Investments (including tax shelters)	\$	
Alimony/Child Support	\$	
Tuition	\$	
Other Living Expense	\$	
Medical Expenses	\$	
Other Expense (List)	\$	
<b>TOTAL EXPENDITURES</b> <b>➔</b>	<b>\$</b>	

Any significant changes expected in the next 12 months?    YES    NO (if yes, attach information)

\*\* Income from alimony, child support, or separate maintenance income need not be revealed if the applicant or co-applicant does not wish to have it considered as a basis for repaying this obligation.





Please Answer The Following Questions:

1 Income tax returns filed through (date) \_\_\_\_\_ Are any returns currently being audited or contested YES NO

If yes, what year(s)? \_\_\_\_\_

2 Have (either of) you or any firm in which you were a major owner ever declared bankruptcy? YES NO

If yes, please provide details: \_\_\_\_\_

3 Have drawn a will? YES NO

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 prepare for you? YES NO

6 Did you include two years federal and state tax returns? YES NO

7 Do (either of) you have a line of credit or unsecured credit facility at any other institution(s)? YES NO

If so, please indicate where, how much, and name of banker: \_\_\_\_\_

8 Have you ever been convicted of a criminal offense (felony or misdemeanor)? YES NO

If yes, when, where, and nature of offense? (checking yes does not automatically preclude granting of credit)

**Representatives 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 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 as of the date of my/our signature. 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 false, 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 inquires you deem necessary to verify the accuracy of the information contained herein and to determine the credit-worthiness of the undersigned. The undersigned authorize any person or consumer-reporting agency to give you any information it may have on the undersigned. Each 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. The undersigned have not made a false statement or report on this application, knowing that such statement is false in the purpose of influencing in any way the actions of the Bank and have not withheld any information that if disclosed would influence in any way the actions of the Bank.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Your signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Co-Applicant's signature (if you are requesting the financial accommodation jointly)