



PERSONAL FINANCIAL STATEMENT

APPLICANT

CO-APPLICANT

Name		SS#	
Date of Birth		Telephone	
Address			
City/State/Zip+4			
Do you:	<input type="checkbox"/> Own Home	<input type="checkbox"/> Rent Home	Monthly Payment
Name of employer		Years there	
Employer address			
City/State/Zip+4			
Position/Title		Business Telephone	

Name		SS#	
Date of Birth		Telephone	
Address			
City/State/Zip+4			
Do You:	<input type="checkbox"/> Own Home	<input type="checkbox"/> Rent Home	Monthly Payment
Name of Employer		Years There	
Employer Address			
City/State/Zip+4			
Position/Title		Business Telephone	

STATEMENT OF FINANCIAL CONDITION AS OF (DATE):

Assets	Amount	Liabilities	Amount
Funds on deposit in banks	\$	Notes payable to banks (see Sch. D)	\$
Marketable securities (see Sch. B)	\$	Installment contracts/other payables (see Sch. D)	\$
IRA, Pension & Keough	\$	Credit card debt (see Sch. E)	\$
Loans Receivable	\$	Unpaid income tax	\$
Cash value- life insurance (see Sch. C)	\$	Other unpaid taxes & interest	\$
Real estate owned (see Sch. A)	\$	Real estate mortgages payable (see Sch. A)	\$
Automobiles	\$	Other debts (itemize)	\$
Other personal property	\$		
Other assets (itemize)	\$		
		Total Liabilities	\$
		Net Worth (Assets less Liabilities)	\$
Total Assets	\$	Total Liabilities & Net Worth	\$

Note: Alimony, child support or separate maintenance need not be revealed if you do not wish to hve it considered as a basis for repaying for this obligation.

Annual Income		Annual Expenses		Contingent Liabilities	
Salaries	\$	Mortgage payments	\$	As Endorser	\$
Commissions	\$	Real estate taxes	\$	As Co-maker	\$
Bonuses	\$	Federal, state & local taxes	\$	As Guarantor	\$
Interest	\$	Insurance premiums	\$	Legal claims	\$
Dividends	\$	Credit card & loan payments	\$	On leases	\$
Real estate income	\$	Alimony, child support, maint.	\$	Letters of credit	\$
Other income (list)	\$	Tuition	\$	Other (list)	\$
		Other expenses	\$	<input type="checkbox"/> Check here if "none"	
Total	\$	Total	\$	Total	\$
Please indicate the date through which your income taxes are settled:					
At this time are you in default under any loans, leases or any other instruments to which you are a party or legally bound?				<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are you a partner in any other business venture?				<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have you or your business ever declared bankruptcy?				<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are any assets held in trust?				<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are any assets pledged other than those listed on schedules?				<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are any tax returns under audit?				<input type="checkbox"/> Yes	<input type="checkbox"/> No
If you have answered yes to any of the above, please explain on a separate sheet					

SCHEDULE A: REAL ESTATE OWNED- MORTGAGES OR LIENS

Property Address	a. Mkt. Value b. Cost	a. Date Purchased b. % Owned	Name of Lenders	a. 1 st Mtg. Bal. b. 2 nd Mtg. Bal.	Monthly Payment
	a.	a.	1 st	a.	
	b.	b.	2 nd	b.	
	a.	a.	1 st	a.	
	b.	b.	2 nd	b.	
	a.	a.	1 st	a.	
	b.	b.	2 nd	b.	
	a.	a.	1 st	a.	
	b.	b.	2 nd	b.	

SCHEDULE B: MARKETABLE SECURITIES

Are any of your securities restricted?

Yes No

No. of Shares (stocks) or Face Value (bonds)	Description of Securities	Pledged- Yes or No	In Name of	Traded at	Current Mkt. Value

SCHEDULE C: LIFE INSURANCE CARRIED

Name of Insurance Company	Owner of Policy	Beneficiary	Face Amount	Policy Loans	Cash Surrender Value

SCHEDULE D: INSTALLMENT CONTRACTS AND NOTES PAYABLE

Creditor's Name	Account Number	Monthly Payment	Present Balance

SCHEDULE E: CREDIT CARD DEBT

Creditor's Name	Account Number	Monthly Payment	Present Balance

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 guaranty of the undersigned. The undersigned acknowledges and understands that you are relying on the information provided herein in deciding to grant or continue credit or to accept a guaranty thereof. Each of the undersigned represents, warrants, and certifies (1) the information provided herein is true, correct and complete and gives a correct and complete showing of the financial condition of the undersigned, (2) the undersigned has no liabilities direct, indirect or contingent except as set forth in this statement, and (3) legal and equitable title to all assets listed herein is in the undersigned's sole name, except as may be herein otherwise noted. 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. You are authorized to make all inquiries you deem necessary to verify the accuracy of the information contained herein, and to determine the credit-worthiness of the undersigned and the undersigned hereby authorizes all persons of whom you make such inquiries to respond thereto in full. Each of the undersigned authorizes you to answer questions about your credit experience with the undersigned.

Signature	Date
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Signature	Date
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