

# PERSONAL FINANCIAL STATEMENT

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

**Date:** \_\_\_\_\_

**IMPORTANT: Read these directions before completing this financial statement.**

- If you are applying for individual credit in your own name and are relying on your own income, or assets and not the income or assets of another person as the basis for repayment of the credit requested, or if this statement relates to your guaranty of the indebtedness of other person(s), firm(s), or corporation(s), complete Sections 1, 3, and 4.
- If you are applying for individual credit but are relying on income from alimony, child support, or separate maintenance or on the income or assets of another person as a basis for repayment of the credit requested, complete all Sections. Provide information in Section 2 about the person whose alimony, support, or maintenance payments or income or assets you are relying on. 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.

**Section 1 – Individual information**

Name \_\_\_\_\_  
 Address \_\_\_\_\_  
 City, State, ZIP \_\_\_\_\_  
 Social Security # \_\_\_\_\_  
 Position/Occupation \_\_\_\_\_  
 Business Name \_\_\_\_\_  
 Business Address \_\_\_\_\_  
 City, State, ZIP \_\_\_\_\_  
 Length of Employment \_\_\_\_\_

- Have you or any firm in which you were a major owner ever declared bankruptcy, or settled any debts for less than the amounts owed? If yes, please provide details on a separate sheet.  Yes  No
- Are you a defendant in any suit or legal action?  Yes  No
- Are you presently subject to any unsatisfied judgements or tax liens?  Yes  No
- Are you more than 60 days in arrears in your child support payments?  Yes  No
- When, if ever, have you been audited by the IRS? \_\_\_\_\_

**Section 2 – Other Party information**

Name \_\_\_\_\_  
 Address \_\_\_\_\_  
 City, State, ZIP \_\_\_\_\_  
 Social Security # \_\_\_\_\_  
 Position/Occupation \_\_\_\_\_  
 Business Name \_\_\_\_\_  
 Business Address \_\_\_\_\_  
 City, State, ZIP \_\_\_\_\_  
 Length of Employment \_\_\_\_\_

- Have you or any firm in which you were a major owner ever declared bankruptcy, or settled any debts for less than the amounts owed? If yes, please provide details on a separate sheet.  Yes  No
- Are you a defendant in any suit or legal action?  Yes  No
- Are you presently subject to any unsatisfied judgements or tax liens?  Yes  No
- Are you more than 60 days in arrears in your child support payments?  Yes  No
- When, if ever, have you been audited by the IRS? \_\_\_\_\_

**Section 3 – Statement of Financial Position** (round off to whole dollar amounts)

Assets (Do not list assets with doubtful value)	[Individual]	[Joint]	[If joint, with whom]	Liabilities	[Individual]	[Joint]	[If joint, with whom]
Cash, Checking, Savings, etc. – Schedule A				Loans payable to banks, finance co., etc. – Schedule I			
Government and marketable securities – Schedule B				Credit cards and revolving lines of credit			
Securities held by broker in margin accounts				Due to brokers on margin accounts			
Non-marketable securities – Schedule C				Amounts payable to individuals – secured			
Accounts, notes, and loans receivable				Amounts payable to individuals – unsecured			
Cash value of life insurance – Schedule D				Loans against life insurance			
Real estate owned – Schedule E				Real estate/mortgages payable – Sch E and/or Sch I			
Deferred compensation/ profit sharing – Schedule F				Unpaid income taxes			
Automobiles – Schedule G				Accounts and bills due			
Business ventures – Schedule H				Other liabilities (itemize):			
Other assets/personal property (itemize):							
				<b>TOTAL LIABILITIES</b>			
				<b>NET WORTH (Total Assets less Liabilities)</b>			
<b>TOTAL ASSETS</b>				<b>TOTAL LIABILITIES AND NET WORTH</b>			

**Section 4 – Income Information**

Annual Income	[Individual]	[Joint]	Annual Expenses	[Individual]	[Joint]	Contingent Liability Amounts	[Individual]	[Joint]
Salary, bonuses, commission			Mortgage/rental payments			As guarantor, co-maker <input type="checkbox"/> Y <input type="checkbox"/> N		
Dividends/interest			Real estate taxes/assessments			On leases or contracts <input type="checkbox"/> Y <input type="checkbox"/> N		
Rental income			Taxes – federal, state, local			Pending legal actions <input type="checkbox"/> Y <input type="checkbox"/> N		
Other			Insurance payments			Contested income tax <input type="checkbox"/> Y <input type="checkbox"/> N		
Other			Other payments – auto leases, etc.			Capital gains taxes <input type="checkbox"/> Y <input type="checkbox"/> N		
Other			Alimony, child support, maintenance			Other special debt <input type="checkbox"/> Y <input type="checkbox"/> N		
Other			Other living expenses			<b>CONTINGENT LIABILITIES</b>	\$	\$
Other			Other			If “yes” to any of the above, please describe:		
<b>TOTAL INCOME</b>	\$	\$	<b>TOTAL EXPENSES</b>	\$	\$			

**Schedule A - Cash, Checking, Savings, etc.** (use additional sheet if necessary)

Financial Institution	Account Type	Owner	[Joint?]	If Pledged, to Whom?	Balance

**Schedule B - Government and marketable securities** (use additional sheet if necessary)

# Shares/ Face Value	Description of Security	In Name Of	Current Market Value	Where Traded?	Registered, Pledged, or Held By Others?

**Schedule C - Non-marketable securities** (use additional sheet if necessary)

# Shares	Description of Security	In Name Of	Current Market Value	Valuation Method	Registered, Pledged, or Held by Others?

**Schedule D - Life insurance carried** (use additional sheet if necessary)

Name of Insurer	Owner of Policy	Beneficiary and Relationship	Face Amount	Policy Loans	Cash Surrender Value

**Schedule E - Real estate owned** (use additional sheet if necessary)

Location of Real Estate	[Joint?]	Date of Original Investment & Amount	% Owned	Market Value of Your %	Mortgage Owed to	Present Balance	Monthly Payment	Mortgage Maturity

**Schedule F - Deferred compensation/profit sharing** (use additional sheet if necessary)

% Vested	Company Name	Account #	Manner of Payout (Annuity, Lump sum, etc.)	Distribution Date	Beneficiary	Amount

**Schedule G - Automobiles** (use additional sheet if necessary)

Year	Make	Model	Mileage	Titled in Name of	Current Value	Loan Balance	Owed to	Monthly Payment

**Schedule H - Business Ventures** (use additional sheet if necessary)

List name and address of any business venture in which you are a principal or partner	Your Title/Position	Line of Business	Years in Business	Your % Ownership	Net Worth of Business	Net Present Value of Your Investment Listed in Section 3

**Schedule I - Loans Payable** (use additional sheet if necessary)

Owing to	[Joint?]	Date of original Borrowing & Amount	Present Balance	Maturity Date	Monthly Payment	Secured By

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 that: (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.

Date Signed \_\_\_\_\_ Signature (individual) \_\_\_\_\_

Date Signed \_\_\_\_\_ Signature (other party) \_\_\_\_\_