

## **Personal Financial Statement**

Read directions below and check all appropriate before completing statement

I am applying for individual credit or to act as in not the income or assets of another party as the	-			relying on my own income or assets and
We are applying for joint credit or to act as join dharkapplying for individual credit and will be reanother individual as the basis for repayment of	elying on income from a			
X D	ate:	x		Date:
Applicant		- ^	Co-Applicant	
.,	Section 1 - Indi	vidual Informati		
	Applicant			Spouse
Name:				•
Position or Occupation:				
Employer:				
Social Security Number:				
Date of Birth:				
Phone Number:				
Email Address:				
Home Address:				
	Section 2 -	Annual Income		
Source of Revenue		Applicant	Spouse	
Salary, Bonuses & Commissions		•••		
Interest & Dividends				
Real Estate Income				
Royalties				
Income from Business				
Other Sources of Income*				
1: 2:				
	Totals:			
*Alimony, child support, or separate maintenance income i	need not be revealed if yo	u do not wish to have	it considered as a basis	for repaying this obligation
	Section 4 -	Balance Sheet		
	A	ssets		
Description		Schedule	(Pages 1 - 3)	Amount
Cash, Checking, Savings, & Money Market		Sche	dule A	
quid Investment Accounts			edule B	
Valuation of Owned Business			edule C	
Cash Value of Life Insurance			dule D	
Retirement Accounts		Schedule E		
Automobiles, Boats, & Recreational Vehicles		Schedule F		
Personal Residence[s]			dule G	
			edule H	
Other Assets - List & Detail Below	ther Real Estate Sche		uule K	
1:				
2:				
			Total Assets:	
	Lial	bilities		
Description			(Pages 1 - 3)	Amount
	, ,		edule F	
Loans on Personal Residence[s]			dule G	
Credit Cards			edule I	
tudent Loans			edule J	
			edule K edule L	
Other Liabilities - List & Detail Below		SCITE	Judic E	
1:				
2:				
		7	Total Liabilities:	
	Not Mouth		•	
	NET WORTH	(Total Assets - To	viai Liadiiitiesi:	

	Section 3	- Asset	& Liabilit	ty Deta	ails				
	Schedule A								
Bank or Institution	Type of Account*		In Name Of				Am	ount	
Checking, Saving, Certificate of De	posit, Cash on Hand, etc				Total:				
	Schedule B -	- Liquid I	Investme	nt Acc	ounts				
Account Name	Type (Stock/Bond/etc)		hese Pled		In Name (	Of		Amount	
						Total:			
						•			
	Schedul	e C - Ow	ned Busi	inesses	5*				
	Total Business Value or				My Ownership	My value [Total value *			
Name of Business	Equity	Ir	n Name O	f	Percentage	ow	nership	percentage]	
/alue of real estate holdings shoul	d be recorded on Schedule K o	n the 3rd	page		Total:				
	School	dula D -	Life Insu	rance					
Incurance Company	Policy Holder		Pledged?		nefit Amount	Ca	ch Surro	nder Value*	
Insurance Company	Policy Holder	15 11115 F	rieugeur	Dei	nent Amount	Ca	SII SUITE	iluei value	
Sook Course don Value is the consequent					Total:				
Cash Surrender Value is the amou	nt you can withdraw as of toda	у.			TOTAL.				
	Schedule	e E - Reti	irement /	Accoun	nts				
Account/Servicer Name	Type (IRA/Roth/et	:c)		In Na	me Of		Curren	t Value	
	<del></del>		II .		Total:	1			
	6-11-1 = 4	1.11. 5		\ <del>-</del>					
	Schedule F - Automo								
Year/Make/Model	In Name Of	L	<u>ienholde</u>	•	Current Value	Monthly	Payment	Loan Bala	nce
		1							

Totals:

Totals:

Schedule G - Personal Residence - Primary & Secondary Residences, Home Equity Loans*								
Address	In Name Of Mortgage Holder Current Value Monthly				Payment	Loan Balance		
*Include home equity loan balance &	navment on a sena	rate line		Totals:				
metade nome equity toan balance &	payment on a sepa	irate iirie		101013.				
		chedule l	H - Oth	er Personal Asso	ets			
	Description				-		Cu	rrent Value
					-			
					-			
					-			
						Total:		
		Sche	dule I -	Credit Cards				
Name of Lender	In Name C			otal Limit	Monthly Pay	ment	Current Balance	
				Totals:				
				Student Loans				
Name of Lender	In Name C	Of	D	escription	Monthly Pay	ment	Cur	rent Balance
	<u> </u>							
		ı		Totals:				
	-	`alaadla	V D	I Catata /Dant D	-11			
	3	chedule	r - rea	l Estate/Rent Ro		Mar	***	
Property Address	Market Value	Monthl	v Rent	Mortgage Holder	Mortgage Balance		nthly ment	Occupant
. Topolity Hualicoo	ress Market Value Monthly Rent Holder Balance							
Totals:				Totals:				
	Cala a di			::::::::::::::::::::::::::::::::::::::				
Nome of Landau				ilities/Unsecure			C	wout Balanca
Name of Lender	In Name Of		Description		Monthly Payment		Current Balance	
Totals:								
	Sc	chedule I	VI - Con	tingent Liabiliti	es*			
Description (list liabilities as guarantor or as co-signer on)  Amount								
*Contingent liabilities have no effect	on personal net wo	rth			Total:			

An addendum to any schedule may be attached, if necessary.

- 1. I hereby authorize Main Street Bank to obtain a credit report(s) to be used in connection with this personal financial statement.
- 2. I authorize Main Street Bank to retain all information and reports for its files.
- 3. I certify that the information contained in this personal financial statement is true and correct to the best of my knowledge and belief.
- 4. I agree that if any change occurs that materially reduces the means or ability to pay all claims or demands I will immediately and without delay notify the bank, and unless the bank is so notified it may continue to rely upon this personal financial statement herein given as true and accurate statement of the financial condition

## Disclosures CREDIT DENIAL NOTICE:

If your gross revenues were \$1,000,000 or less in your previous fiscal year and if your application for business credit is denied, you have the right to a written statement of the specific reasons for the denial. To obtain the statement, please contact us at the address below within 60 days from the dated that you were notified of receiving your request. The notice below describes additional protections extend to you.

**NOTICE:** The federal *Equal Credit Opportunity Act (ECOA)* prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, national origin, sex, marital status, age (provided the applicant has the capacity to enter into a binding contract); because all or part of the applicant's income derives from any public assistance program; or because the applicant has good faith exercised any right under the Consumer Credit Protection Act.

The federal Agency that administers compliance with this law concerning the creditor is:

FDIC Consumer Response Center 1100 Walnut St, Box #11 Kansas City, MO 64106

Applicant	X	Date
Co-Applicant	x	Date