

**Personal Financial Statement
Confidential**

Name (or Names if Joint) _____
 Address _____
 Telephone _____ Date _____ SS# _____
 Employer _____ Position or Occupation _____

The following is submitted for the purpose of procuring, establishing and maintaining credit with you on behalf of the undersigned or persons, firms or corporations in whose behalf the undersigned may either severally or jointly with others execute a guaranty in your favor. The undersigned warrants that this financial statement is true and correct and that you may consider this statement as continuing to be true and correct until written notice of a change is given to you by the undersigned.

PLEASE DO NOT LEAVE ANY QUESTIONS UNANSWERED. USE 'NO' OR 'NONE' WHERE NECESSARY.

Assets			*J	Liabilities			*J
Cash on Hand and in Banks				Notes Payable to banks – Secured			
US Gov. Securities – See Schedule				Notes Payable to Banks – Unsecured			
Listed Securities – See Schedule				Notes Payable to Relatives			
Unlisted Securities – See Schedule				Notes Payable to Others			
Accounts and Notes Receivables – doubtful				Accounts and Bills Due			
Real Estate Owned				Unpaid Income Tax			
Cash Value – Life Insurance				Other Unpaid Taxes or Interest			
Automobiles				Real Estate Mortgages Payable – See Schedule			
Personal Property				Chattel Mortgages and Other Liens Payable			
Other Assets – Itemized				Other Debts - Itemized			
				TOTAL LIABILITIES			
				NET WORTH			
TOTAL ASSETS				TOTAL LIABILITIES AND NET WORTH			
Source of Income:				*J – Please check if jointly owned and list accordingly			
				<input type="checkbox"/> Monthly <input type="checkbox"/> Annually			
Salary	\$			PERSONAL INFORMATION			
Bonus and Commissions	\$			Business Occupation:		Age:	
Dividends	\$			How long at this employment?			
Real Estate Income	\$			Partner or Officer in any other venture?			
Other Income (Income form Child Support, Maintenance or Alimony is not required to be furnished unless undersigned wishes to rely such income for repayment of any loan). Itemize other income	\$			Dependents: Name: _____ Age: _____			
	\$						
	\$						
	\$						
TOTAL	\$			If undersigned relies on Alimony, Child Support, Maintenance, etc. State whether paid by court order, separation agreement or other understanding.			
GENERAL INFORMATION				CONTINGENT LIABILITIES			
Are any assets pledge? – See schedule				As endorser, comaker or guarantor			
Are you a defendant in any law suites or legal actions?				\$			
Personal Bank Account at:				On leases or contracts			
Have you ever transacted business in any other name or had any judgments, attachments, garnishments or legal processings against you?				\$			
<input type="checkbox"/> Monthly				Legal claims			
<input type="checkbox"/> Annually				Provision for Federal Income Taxes			
If yes, Furnish full details in Credit Information Section (2 nd page)				Other special debt			
				\$			

SCHEDULE OF US GOVERNMENTS, STOCKS AND BONDS OWNED						
No. of Shares or Face Value (Bonds)	Description	In Name of			Market Value	
SCHEDULE OF REAL ESTATE OWNED						
Description of Property and Improvements	Date Acquired	Title in Name of	Cost	Market Value	Mortgage	
					Amount	Terms
SCHEDULE OF NOTES PAYABLE						
Name of Creditor	Original Amount	Unpaid Balance	Payment Terms		Collateral Endorser	
SCHEDULE OF LIFE INSURANCE ACCRIED, INCLUDING NSLI AND GROUP INSURANCE						
Name of Company	Amount	Beneficiary	Cash Surrender Value	Loans		
CREDIT INFORMATION						
Name of Company	Amount	Type of Acct/Trans	Credit in Name of	Amount	Type of Acct/Trans	

The undersigned certifies that all pages hereof and information inserted therein has been carefully read and is true and correct.

_____ Signature

Date: _____

_____ Signature

Date: _____