

**PERSONAL FINANCIAL STATEMENT**

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Position or Occupation \_\_\_\_\_

Employer Name &amp; Address \_\_\_\_\_

Residence Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Business Phone: \_\_\_\_\_

Social Security #: \_\_\_\_\_ Spouse name: \_\_\_\_\_ Spouse SSN: \_\_\_\_\_

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 a written notice of a change is given to you by the undersigned.

ASSETS	In Even Dollars	LIABILITIES	In Even Dollars
Cash on hand and in banks		Notes payable to banks (secured)	
Marketable securities (schedule A)		Notes payable to banks (unsecured)	
Non-marketable securities (schedule B)		Due to Brokers	
Securities with broker in margin account		Amounts payable to others (secured)	
Restricted or control stocks		Amounts payable to others (unsecured)	
Partial interests in real estate (schedule C)		Accounts and bills due	
Real Estate owned (schedule D)		Real estate mortgages payable (schedule D)	
Loans receivable		Other unpaid taxes and interest	
Automobiles and other personal property		Unpaid income taxes	
Businesses owned - market value (schedule B)		Owed against business / business assets	
Cash value of life insurance (schedule E)		Other Debts (itemize)	
		<b>TOTAL LIABILITIES</b>	
		<b>NET WORTH</b>	
<b>TOTAL ASSETS</b>		<b>TOTAL LIABILITIES + NET WORTH</b>	

Are all bad and doubtful assets excluded from this statement (Yes) (No) If No, explain: \_\_\_\_\_

Income taxes settled through what date? \_\_\_\_\_ Additional assessments due: \$ \_\_\_\_\_

ANNUAL SOURCES OF INCOME		PERSONAL INFORMATION
Salary, bonus & commissions:	\$	Do you have a will? If yes, name of executor:
Dividends:	\$	
Real Estate income:	\$	Are you a partner in any other venture?
Retirement & pensions:	\$	
Other income (Alimony, child support or separate maintenance need not be revealed if you do not wish to have it considered as a basis for repaying this obligation.)	\$	<b>GENERAL INFORMATION</b> Are you a defendant in any suits or legal actions?
	\$	
<b>CONTINGENT LIABILITIES</b>	<b>Do you have any contingent liabilities? Give details.</b>	
As endorser, co-maker or guarantor:	\$	Are any assets pledged?
Legal claims	\$	
Other special debt	\$	Have you ever taken bankruptcy? Explain:
Amount of contested income tax liens	\$	

**(COMPLETE SCHEDULES AND SIGN ON PAGE 2)**

# CONFIDENTIAL

## SCHEDULE A — U.S. GOVERNMENTS AND MARKETABLE SECURITIES

Nº of shares or face value of bonds	Description	In name of:	Current market value

## SCHEDULE B — NON-MARKETABLE SECURITIES AND BUSINESS INTERESTS

Description of securities	Nº of shares owned	Book value as per financial statement Dated: MM/YY \$ Book value equity	Nº of shares outstanding	Total value
		Dated: \$		
		Dated: \$		
		Dated: \$		
		Dated: \$		

## SCHEDULE C — PARTIAL INTERESTS IN REAL ESTATE EQUITIES, PARTNERSHIPS, ETC.

Location of property	% of ownership	Type	Year of purchase	\$Cost (C) or \$Market value (M)	Mortgage balance	Value of equity

## SCHEDULE D — REAL ESTATE OWNED

Description of property and improvements	Date acquired	Title in name of	Cost	Market value	Mortgage Amount	Mortgage Maturity Date

## SCHEDULE E — LIFE INSURANCE CARRIED, INCL. N.S.L.I. AND GROUP INSURANCE

Face amount	Name of company	Beneficiary	Cash surrender value	Loans

## SCHEDULE F — NAMES OF BANKS OR FINANCE COMPANIES WHERE CREDIT HAS BEEN OBTAINED

Name of bank or finance company	Date	High credit	Owe currently	Secured or unsecured

(USE ADDITIONAL SCHEDULES WHEN NECESSARY)

THE UNDERSIGNED CERTIFIES THAT BOTH PAGES HEREOF AND THE INFORMATION INSERTED THEREIN HAS BEEN CAREFULLY READ AND IS TRUE, CORRECT AND COMPLETE, AND MAY BE VERIFIED WHERE THE CREDITOR DEEMS NECESSARY.

SIGNATURE: **X** \_\_\_\_\_

\_\_\_\_\_, 20\_\_\_\_ SIGNATURE: **X** \_\_\_\_\_

DATE SIGNED

For best results, please type/fill in fields highlighted above, then print the completed form, sign and send to us by scan/email or hi-res fax.