

INDIVIDUAL FINANCIAL STATEMENT

Financial condition as of ____ / ____ / ____

APPLICANT INFORMATION

Complete this form for (1) each proprietor, (2) each limited partner who owns 20% of more interest and each general partner, or (3) each stockholder owning 20% or more of voting stock, or (4) any person or entity providing a guaranty on the loan.

Applicant Name	SSN
Business Name (if applicable)	Phone Number <input type="checkbox"/> H <input type="checkbox"/> W <input type="checkbox"/> Cell
Home Address	
If assets are owned jointly with spouse, please provide name of spouse:	

BALANCE SHEET INFORMATION

ASSETS		LIABILITIES	
Cash in hand and in Banks	\$	Accounts Payable	\$
Savings Accounts	\$	Notes Payable to Banks & Others (Describe in Section 2)	\$
IRA of Other Retirement Account	\$	Installment Account (Auto) Monthly payments: \$ _____	\$
Accounts & Notes Receivable	\$	Installment Account (Other) Monthly payments: \$ _____	\$
Cash Value of Life Insurance (Describe in Section 8)	\$	Loan on Life Insurance	\$
Stocks & Bonds (Describe in Section 3)	\$	Mortgages on Real Estate (Describe in Section 4)	\$
Real Estate (Describe in Section 4)	\$	Unpaid Taxes (Describe in Section 6)	\$
Automobile(s) – Present Value	\$	Other Liabilities (Describe in Section 7)	\$
Other Assets (Describe in Section 5)	\$		
Total Assets	\$	Total Liabilities	\$
		Net Worth (Difference between total assets and total liabilities)	\$

Section 1: SOURCE OF INCOME**		CONTINGENT LIABILITIES	
Salary	\$	As Endorser or Co-Maker	\$
Net Investment Income	\$	Legal Claims & Judgments	\$
Real Estate Rental Income	\$	Provision for Federal Income Tax	\$
Other Income (Describe below)	\$	Other Special Debt (Describe below)	\$

Description of Other Income/Debt in Section 1:

**Alimony or child support payments need not be disclosed in "Other Income" unless it is desired to have such payments counted toward total income.

Section 2: NOTES PAYABLE TO BANK AND OTHERS

Name/Address of Noteholder(s)	Original Balance	Current Balance	Payment Amount	How Secured – Type of Collateral

Section 3: STOCKS AND BONDS

Number of Shares	Name of Securities	Cost	Market Value Quotation/Exchange	Date of Quotation/Exchange	Total Value

Section 4: REAL ESTATE OWNED

	Property A	Property B	Property C
Type of Property			
Address			
Date Purchased			
Original Cost			
Present Market Value			
Name/Address of Mortgage Holder			
Mortgage Account Number			
Mortgage Balance			
Payment Amount per Month			

Section 5: OTHER PERSONAL PROPERTY AND OTHER ASSETS
(Describe, and if any is pledged as security, state name and address of lien holder, amount of lien, terms of payment, and delinquency, if applicable)

Section 6: UNPAID TAXES
(Describe in detail as to type, to whom payable, when due, amount, and to what property, if any, a tax lien attaches.)

Section 7: OTHER LIABILITIES
(Describe in detail)

Section 8: LIFE INSURANCE HELD
(Give face amount and cash surrender value of policies, name of insurance company and beneficiaries)

I authorize Lender to make inquiries as necessary to verify the accuracy of the statements made and to determine by creditworthiness. I certify that the above and the statements contained in the attachments are true and accurate as of the stated date(s). These statements are made for the purpose of either obtaining a loan or guaranteeing a loan.

Signature: _____ **Date:** _____ **Social Security Number:** _____

Signature: _____ **Date:** _____ **Social Security Number:** _____