

FINANCIAL STATEMENT - INDIVIDUAL

INDIVIDUAL
 JOINT

DATE OF STATEMENT

TO FINANCIAL INSTITUTION NAMED:		NAME OF INDIVIDUAL:		
HOME ADDRESS		HOME PHONE	SOCIAL SECURITY NUMBER	DATE OF BIRTH
ASSETS <i>(Omit Cents)</i>		LIABILITIES <i>(Omit Cents)</i>		
Cash in this financial institution (Schedule A)		Notes payable to financial institutions (Schedule J)		
Cash in other financial institutions (Schedule A)		Other notes payable (Schedule J)		
Money Market Accounts (Schedule AJ)		Loans secured by real estate (Schedule F)		
Notes and loans receivable (Schedule B)		Life insurance policy loans (Schedule E)		
Other accounts due me (Schedule B)		Taxes (Federal, State, Local) due and unpaid		
Stocks and Bonds – marketable (Schedule C)		Credit Card indebtedness		
Other Stocks and Bonds (Schedule C)		Due to Brokers in Margin Accounts (Schedule K)		
Partnership and Proprietorship interests (Schedule D)		Other accounts and bills payable (Schedule K)		
Cash surrender value life insurance (Schedule E)				
Real Estate owned (Schedule F)				
Oil and Gas Interests (Schedule G)				
Vested Pension and Retirement Funds (Schedule H)				
IRA and Keough Plans (Schedule H)				
Other personal assets (Schedule I)				
			TOTAL LIABILITIES	
			NET WORTH	
	TOTAL ASSETS		TOTAL LIABILITIES AND NET WORTH	

INCOME AND EXPENSE for year ending _____			
Salaries and wages		Interest Paid	
Commissions and bonuses		Rent Paid	
Interest Income		Federal and State Income Taxes	
Dividend Income		Other Taxes	
Business Income		Alimony, Child Support and Separate Maintenance Paid	
Pensions, Annuities, Retirement and Social Security			
Rents			
Alimony, Child Support and Separate Maintenance <i>(Exclude if you do not wish this income to be considered as a basis for repaying any obligation)</i>			
Other income			
	TOTAL ALL INCOME		TOTAL
Federal Income Tax Return has been filed through _____		Any additional assessments? <input type="checkbox"/> No <input type="checkbox"/> Yes	Amount

CONTINGENT LIABILITIES		
NATURE OF LIABILITY	DESCRIPTION	AMOUNT
Liabilities as Endorser, Co-Maker or Guarantor		
Liabilities on leases and contracts		
Liabilities on Letters of Credit		
Contest Tax Liens		
Involvement in pending legal actions, claims, judgements, etc.		

SCHEDULE A: CASH IN FINANCIAL INSTITUTIONS AND MONEY MARKET ACCOUNTS				
NAME OF FINANCIAL INSTITUTION	ACCOUNT IN NAME OF:	TYPE OF ACCOUNT	ACCOUNT NUMBER	CURRENT BALANCE

SCHEDULE B: NOTES AND LOANS RECEIVABLE AND OTHER ACCOUNTS DUE ME					
ORIGINAL AMOUNT	DUE FROM	BALANCE OWING	PAYMENT SCHEDULE	MATURITY	COLLATERAL

SCHEDULE C: STOCKS AND BONDS						
ISSUING COMPANY	REGISTERED IN NAME OF:	NO. OF SHARES OR FACE AMT. OF BONDS*	VALUE		IF PLEDGED, TO WHOM?	WHERE TRADED
			<i>Per Share</i>	<i>Total</i>		

* Indicate whether Stocks are Common or Preferred

SCHEDULE D: PARTNERSHIP and PROPRIETORSHIP INTERESTS				
NAME OF PARTNERSHIP OR PROPRIETORSHIP	PERCENT OWNERSHIP	ORIGINAL COST	PRESENT VALUE	IF PLEDGED, TO WHOM?

SCHEDULE E: LIFE INSURANCE							
INSURANCE COMPANY	POLICY NUMBER	POLICY OWNER	BENEFICIARY	TYPE OF POLICY	FACE AMOUNT	CASH VALUE	LOANS AGAINST POLICY

SCHEDULE F: REAL ESTATE OWNED (✓Indicates Homestead)								
PARCEL NUMBER	LOCATION AND DESCRIPTION OF IMPROVEMENTS	✓	YEARS ACQUIRED	COST	APPRAISAL			NAME OF TITLE HOLDER
					By Whom	Date	Amount	
1.								
2.								
3.								
4.								
5.								

PARCEL NUMBER	MORTGAGE OR OTHER LIEN	PAYABLE TO:	ORIGINAL AMOUNT	PRESENT BALANCE	INTEREST RATE	AMT. PAYABLE PER MONTH	AMT. OF INSURANCE
1.	1 ST 2 ND						
2.	1 ST 2 ND						
3.	1 ST 2 ND						
4.	1 ST 2 ND						
5.	1 ST 2 ND						

SCHEDULE G: OIL and GAS INTERESTS							
LEGAL DESCRIPTION	WI OR RI	NET REVENUE INTEREST	MONTHLY INCOME	MONTHLY EXPENSE	PRESENT VALUE	PURCHASER OF PRODUCT	

SCHEDULE H: VESTED PENSIONS, RETIREMENT FUNDS, IRA KEOUGH		SCHEDULE I: OTHER PERSONAL ASSETS	
DESCRIPTION	AMOUNT	DESCRIPTION	AMOUNT

SCHEDULE J: NOTES PAYABLE TO FINANCIAL INSTITUTIONS <i>and</i> OTHERS				
DUE TO WHOM	AMOUNT	HOW PAYABLE	MATURITY	COLLATERAL PLEDGED

SCHEDULE K: OTHER ACCOUNTS <i>and</i> BILLS PAYABLE, INCLUDING AMOUNTS DUE BROKERS			
DESCRIPTION	AMOUNT	DESCRIPTION	AMOUNT
		TOTAL	

SCHEDULE L: BUSINESSES IN WHICH UNDERSIGNED IS A PRINCIPAL <i>or</i> PARTNER				
NAME AND ADDRESS OF BUSINESS	TYPE OF BUSINESS	% OF OWNERSHIP	POSITION/TITLE	FINANCIAL INSTITUTION OF ACCOUNT

Has Undersigned executed a will disposing of estate in event of death: Yes No If yes, name of Executor _____

Has Undersigned made an assignment for benefit of creditors or been involved in bankruptcy proceedings during the past ten years? Yes No

If yes, please state details: _____

Marital Status (Do not complete if applying for individual unsecured credit):

Married Separated Unmarried (Including single, divorced or widowed) Number of Dependents _____

EMPLOYER NAME AND ADDRESS	POSITION/TITLE	YEARS EMPLOYED

SIGNATURES

This Financial Statement, supporting schedules and information are submitted by the Undersigned to the herein-named Financial Institution for the purpose of establishing, obtaining, or maintaining credit. It is a true, complete and correct representation of the Undersigned's financial condition as of the date shown above. The Financial Institution is authorized by the Undersigned to check credit and employment history, to verify the accuracy of the information contained herein, and to answer questions about its credit experience with the Undersigned.

_____ SIGNATURE	_____ DATE SIGNED	_____ WITNESS
_____ SIGNATURE	_____ DATE SIGNED	_____ WITNESS

FEDERAL CREDIT APPLICATION INSURANCE DISCLOSURE

I have applied for an extension of credit with you. You are soliciting, offering, or selling me an insurance product or annuity in connection with this extension of credit. **FEDERAL LAW PROHIBITS YOU FROM CONDITIONING THE EXTENSION OF CREDIT ON EITHER:**

1. My purchase of an insurance product or annuity from you or from any of your affiliates; or
2. My agreement not to obtain, or a prohibition on me from obtaining, an insurance product or annuity from an unaffiliated entity.

By signing, I acknowledge that I have received a copy of this form on today's date. Unless this disclosure is provided electronically or I have applied for credit by mail, I also acknowledge that you have provided this disclosure to me orally.

Consumer _____ Date _____

Consumer _____ Date _____