

# 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)	\$		
<b>Total Assets</b>	<b>\$</b>	<b>Total Liabilities</b>	<b>\$</b>

	Net Worth (Difference between total assets and total liabilities)	\$
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Section 1: SOURCE OF INCOME**	CONTINGENT LIABILITIES
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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:** \_\_\_\_\_