



Please contact your banker if you need assistance with completing these schedules. Round all amounts to the nearest \$100.

* ANNUAL INCOME	APPLICANT	CO-APPLICANT	PLEASE ANSWER EACH QUESTION (Yes / No)	APP.	CO-APP
Salary			Are you a Co-Maker, Endorser or Guarantor of any other person's debt?		
Bonuses/Commissions					
Dividends/Interest			Are you a defendant in any suit or legal action?		
Net Real Estate Income					
* Income from alimony, child support, or maintenance payments need not be entered unless you want it considered as a base for repayment.			Have you ever gone through bankruptcy or had a judgment against you?		
Other (List)			Have you made a will?		
<b>Total</b>	<b>0</b>	<b>0</b>			

**SCHEDULE 1 / CASH, SAVINGS, CERTIFICATES AND IRA ACCOUNTS**

Name of Bank or Financial Institution	Type of Account	Acct. Balance
<b>Total \$</b>		<b>0</b>

**SCHEDULE 2 / SECURITIES OWNED**

Par Value or No. of Shares	Description	Registered in Name(s) of	Listed or Unlisted	Current Market Value
<b>Total \$</b>				<b>0</b>

**SCHEDULE 3 / LIFE INSURANCE**

Insurance Company	Insured	Beneficiary	Face Value of Policy	Cash Value of Policy	Loans
<b>Total \$</b>				<b>0</b>	<b>0</b>

**SCHEDULE 4 / RECEIVABLES DUE TO ME ON MORTGAGES AND CONTRACTS I OWN**

Name of Debtor	Description of Property	First Lien or Second Lien	Date of Maturity	Repayment Terms	Balance Due
				per	
				per	
				per	
<b>Total \$</b>					<b>0</b>

**SCHEDULE 5 / REAL ESTATE OWNED**

Property Description	Name of Creditor	Year Acquired	Purchase Price	Mortgage Balance	Date of Maturity	Repayment Terms	Current Market Value
						per	
						per	
						per	
						per	
						per	
						per	
<b>Total \$</b>							<b>0</b>

Insurance Co.: \_\_\_\_\_ Agent: \_\_\_\_\_

**SCHEDULE 6 / PROFIT SHARING AND PENSION**

Name of Institution	Type of Account	Account Balance	Amount Totally Vested	Loans
<b>Total \$</b>		<b>0</b>	<b>0</b>	<b>0</b>

**SCHEDULE 7 / INSTALLMENTS, CREDIT LINES AND NOTES**

Name of Creditor	Collateral	Date of Maturity	Repayment Terms	Balance Due
			per	
<b>Total \$</b>				<b>0</b>

**SCHEDULE 8 / CREDIT ACCOUNTS, BILLS DUE, ALIMONY/CHILD SUPPORT, DAYCARE, ETC.**

Name of Company	Repayment Terms	Balance Due
	per	
<b>Total \$</b>		<b>0</b>

You certify that the information provided in this statement is true and correct. So long as you owe any sums to the bank, you agree to give the bank prompt written notice of any material change in your financial condition and, upon request, you agree to provide the bank with an updated personal financial statement. The bank is authorized to retain this personal financial statement whether or not credit is approved and is further authorized to verify your credit and employment history or any other information in this statement. This application does not obligate the bank to make any loan even if you meet the normal standards the bank considers in determining whether to approve or deny the application.

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

Co-Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_