

INDIVIDUAL FINANCIAL STATEMENT

To: _____ (Credit Union)

Member Name: _____ Date of Birth: _____

Address: _____ Zip Code: _____

CHECK AS APPLICABLE:

Applicant is applying for this loan:

- Individually, without a co-signer or guaranty of a person or other legal entity.
- Jointly, with the co-signature or guaranty of one or more persons or legal entities (including existing guarantors).

NAMES OF OTHER PERSON(S) OR LEGAL ENTITY(IES):

If applicant resides in a community property state, please complete the following concerning marital status:

Applicant is: married separated unmarried (includes single, divorced, and widowed)

Co-Applicant, if any, is: married separated unmarried (includes single, divorced, and widowed)

APPLICANT INFORMATION	Social Security No.		Driver's License Number		Visa or MasterCard No.		Home Phone		
	Occupation		Name of Employer			No. of Years	Salary \$ _____ per _____	Business Phone	
	Amount of alimony, child support and separate maintenance payment income. NOTE: Alimony, child support or separate Maintenance payment income need not be revealed if you do not wish to have it considered as a basis for repaying this obligation. \$ _____								
	Name and address of payer of any alimony, child support or separate maintenance payment income disclosed above as a source of repayment: Alimony, child support, or separate maintenance received under: <input type="checkbox"/> court order <input type="checkbox"/> written agreement <input type="checkbox"/> oral agreement <input type="checkbox"/> Other: _____								
	Income (salary, social security, dividend, interest, etc.)								
	Source: _____ \$ _____ per month								
	Have you borrowed from any other branch of this credit union? Branch Name: _____ Date: _____								
	Number of Dependents: _____ Ages: _____								
	Have you established a trust? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, is it: <input type="checkbox"/> Revocable <input type="checkbox"/> Irrevocable Name(s) of Trustee(s): _____								
	Have you made a will? <input type="checkbox"/> Yes <input type="checkbox"/> No Name Personal Representative: _____								
Have you guaranteed or endorsed the notes and/or loans of any other person? <input type="checkbox"/> Yes <input type="checkbox"/> No Do you have any other contingent liabilities? <input type="checkbox"/> Yes <input type="checkbox"/> No									
Have any actions or suits been filed against you or are there any recorded judgments or decrees entered against you or have you been adjudged bankrupt in the last 7 years or made any assignments for the benefit of creditors? <input type="checkbox"/> Yes <input type="checkbox"/> No									
If yes, please explain:									
Name of a Reference					Address/Phone Number				

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CO-APPLICANT INFORMATION	-Applicant's Full Name:		Date of Birth:	Address:		
	Social Security No.		Driver's License Number	Home Phone		
	Occupation		Name of Employer	No. of Years	Salary \$ per	Business Phone
	Amount of alimony, child support and separate maintenance payment income. NOTE: Alimony, child support or separate Maintenance payment income need not be revealed if you do not wish to have it considered as a basis for repaying this obligation. \$					
	Name and address of payer of any alimony, child support or separate maintenance payment income disclosed above as a source of repayment: Alimony, child support, or separate maintenance received under: <input type="checkbox"/> court order <input type="checkbox"/> written agreement <input type="checkbox"/> oral agreement <input type="checkbox"/> Other:					
	Income (salary, social security, dividend, interest, etc.) Source: \$ per month					
	Have you borrowed from any other branch of this credit union? Branch Name: Date:					
	Number of Dependents: _____ Ages: _____					
	Have you established a trust? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, is it: <input type="checkbox"/> Revocable <input type="checkbox"/> Irrevocable Name(s) of Trustee(s): _____					
	Have you made a will? <input type="checkbox"/> Yes <input type="checkbox"/> No Name Personal Representative: _____					
Have you guaranteed or endorsed the notes and/or loans of any other person? <input type="checkbox"/> Yes <input type="checkbox"/> No Do you have any other contingent liabilities? <input type="checkbox"/> Yes <input type="checkbox"/> No						
Have any actions or suits been filed against you or are there any recorded judgments or decrees entered against you or have you been adjudged bankrupt in the last 7 years or made any assignments for the benefit of creditors? <input type="checkbox"/> Yes <input type="checkbox"/> No						
If yes, please explain:						
Name of a Reference			Address/Phone Number			

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PLEASE INDICATE OR PROVIDE AN EXPLANATION AS TO ANY ASSETS OWNED JOINTLY OR BY A TRUST OR LIABILITIES OWED TO OTHERS. ATTACH SCHEDULES AND EXPLANATORY NOTES IF NECESSARY:

STATEMENT OF FINANCIAL CONDITION OF _____

AS OF _____

ASSETS AMOUNT		LIABILITIES AMOUNT		
CASH	SCHEDULE A		SCHEDULE G	
	In this Credit Union		Notes Payable to Credit Unions	
	Other Credit Unions or Banks		Notes & Loans Payable to Others	
STOCKS & BONDS	SCHEDULE B	INSURANCE LOANS	SCHEDULE C	
	Marketable Securities			
	Others			
TAX	Tax Refund Due	TAX	Taxes Payable	
LIFE INSURANCE	SCHEDULE C	ACCOUNTS & BILLS PAYABLE	SCHEDULE H	
	Cash Value		Credit Card Accounts	
RECEIVABLE	SCHEDULE D		Open & Revolving Accounts	
	Accounts & Notes Receivable	Other		
REAL ESTATE	SCHEDULE E	REAL ESTATE	SCHEDULE E	
	Residence(s)		Residence(s)	
	Unimproved Land		Unimproved Land	
	Income Properties		Income Properties	
	Other Real Estate		Other Real Estate	
OTHER ASSETS	SCHEDULE F	OTHER LIABILITIES	SCHEDULE I	
	Other Assets & Personal Property		Other Liabilities	
TOTAL ASSETS:		\$	TOTAL LIABILITIES:	
			\$	
RE-CAP OF INCOME AND EXPENSES		NET WORTH	(DIFFERENCE BETWEEN TOTAL ASSETS & TOTAL LIABILITIES)	
			\$	

* See notice below before completing Other Income.

ANNUAL INCOME FOR YEAR 20		ANNUAL EXPENSES FOR YEAR 20		CONTINGENT LIABILITIES	
Salary or Wages		Property Taxes & Assessments		As Endorser on Notes/Contracts	
Dividends and/or Interest		Federal & State Income Taxes		As Guarantor on Notes/Contracts	
Rentals (Gross Income)		Real Estate Loan Payments		For Taxes	
Business (Net Income)		Contract/Note Payments		Other Contingent Liabilities:	
Other Income (Describe)		Living Expenses (Estimated)			
		Other Expenses			
TOTAL INCOME	\$	TOTAL EXPENSES	\$	TOTAL CONTINGENT LIAB.	\$

* Alimony, child support or separate maintenance payment income need not be revealed if you do not wish to have it considered as a basis for repaying this obligation.

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SCHEDULE A			CASH LOCATION AND STATUS OF CREDIT UNION AND OTHER ACCOUNTS						
Ckng	Sav.	CD's	Credit Union and Branch Where Carried	Balance	Interest Rate	CD Maturity Date	Is account pledged for a loan?	Balance of Loan	Maturity Date of Loan
TOTAL					TOTAL				

SCHEDULE B		STOCKS AND BONDS (Includes Interests In Any Closely Held Business)					
Description	No. Shares	Registration Number	Source of Valuation	Date	Price Per Share	Total Value	Purchased on Margin or Pledged
TOTAL							

SCHEDULE C		LIFE INSURANCE				
Insured	Primary Beneficiary	Face Amount	Cash Value	Loans on Policy	Name of Insurance Company	Location of Office
TOTALS						

SCHEDULE D		ACCOUNTS AND NOTES RECEIVABLE					
Owner(s)	Due From	Address	Collateral	Maturity Date	How Payable?		Balance Due
					Amount	Per	
TOTAL						TOTAL	

SCHEDULE E: REAL ESTATE IS ON THE PAGE 6 OF THIS FORM.

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SCHEDULE F		OTHER ASSETS AND PERSONAL PROPERTY							
Automobiles		Value	Rec. Vehicles & Boats		Value	Personal Property	Value	Subtotal For	Subtotal
Year	Make		Year	Make					
						Furniture		Subtotal - Automobiles	\$
						Jewelry		Subtotal - RVs and Boats	\$
						Equipment			
						Other:		Subtotal - Personal Property	\$
						Other:			
Subtotal Automobiles			Subtotal RVs/Boats			Subtotal Pers. Prop.		Total for Other Assets	

SCHEDULE G		NOTES AND LOANS PAYABLE TO CREDIT UNIONS AND OTHERS					
Payable To	Address	Collateral	Person(s) Liable	Maturity Date	How Payable?		Balance Due
					Amount	Per	
TOTAL						TOTAL	

SCHEDULE H		ACCOUNTS AND BILLS PAYABLE (Including Credit Cards)				
Payable To	Collateral	Person(s) Liable	How Payable?		Balance Due	
			Amount	Per		

SCHEDULE I		OTHER LIABILITIES			
Payable To	Collateral	Person(s) Liable	How Payable?		Balance Due
			Amount	Per	

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SCHEDULE E		REAL ESTATE									
Parcel No.	Description	Location Address	Owner(s)	Date Acquired	Acquisition Cost	Mortgagee or Lien Holder	Annual Taxes	Monthly Income	Monthly Payment	Present Value	Balance Due
1											
2											
3											
4											
5											
6											
7											
8											
9											
10											
TOTALS							\$	\$	\$	\$	\$

INDIVIDUAL FINANCIAL STATEMENT

SIGNATURES AND AFFIRMATION SECTION:

SIGNATURES	<p>I (we) hereby affirm that the foregoing information contained in this financial statement is presented for the purpose of obtaining credit as of the date indicated and is true, complete and correct. I understand Credit Union is relying on this statement of my financial condition in making loan(s) to me. Credit Union or its designee is authorized to make any investigation of my credit or employment status either directly or through any agency employed by Credit Union for that purpose now and in the future. Credit Union may disclose to any other interested parties Credit Union's experience with this account. I agree to inform the Credit Union immediately of any matter which will cause any material change to my financial condition. I understand that Credit Union will retain this financial statement whether or not credit is granted.</p>	
	Applicant's Signature: _____	Date: _____
	Co-Applicant's Signature: _____	Date: _____
	Co-Applicant's Signature: _____	Date: _____
	Co-Applicant's Signature: _____	Date: _____
	Co-Applicant's Signature: _____	Date: _____
	Co-Applicant's Signature: _____	Date: _____
<p>Consent (If you are relying on income from a person who is not an applicant above, please have that person complete this section so we can verify their credit.) I authorize Credit Union to make any investigation of my credit either directly or through any agency employed by Credit Union for that purpose in connection with credit application now and in the future.</p>		
Signature: _____	Date: _____	
SSN: _____		