

# Personal

## Financial Statement

Legal Business Name: \_\_\_\_\_ Tax ID: \_\_\_\_\_

Applicant Name: \_\_\_\_\_ SSN: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Spouse Name: \_\_\_\_\_ SSN: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Address, City, State, Zip \_\_\_\_\_

Home Tel#: \_\_\_\_\_ Fax#: \_\_\_\_\_ e-Mail: \_\_\_\_\_

Business Tel#: \_\_\_\_\_ Cell#: \_\_\_\_\_

Have you ever filed for Bankruptcy (within the last 10 years?)  Yes  No | Do you have any tax liens?  Yes  No

Current Employer: \_\_\_\_\_ How long at current position? \_\_\_\_\_ Employer Phone# \_\_\_\_\_

| ASSETS                                     | VALUE |
|--|-------|
| Cash on Hand:                              | \$    |
| Checking (Personal):                       | \$    |
| Checking (Business):                       | \$    |
| Savings (Personal):                        | \$    |
| Savings (Business):                        | \$    |
| Stocks & Bonds (Listed):                   | \$    |
| Value of Business (w/Equipment):           | \$    |
| Life Insurance (Cash Value Only! NO Term): | \$    |
| Other:                                     | \$    |
| Real Estate (Primary Residence):           | \$    |
| Other Real Estate                          | \$    |
| IRA/401K/SEP/KEOGH:                        | \$    |
| Automobiles:                               | \$    |
| Accounts Receivable:                       | \$    |
| Personal Property:                         | \$    |

| LIABILITIES                   | LIABILITIES BALANCE | MONTHLY PAYMENT |
|-------------------------------|---------------------|-----------------|
| Credit Cards:                 | \$                  | \$              |
| Charge Accounts:              | \$                  | \$              |
| Individuals:                  | \$                  | \$              |
| Student Loans:                | \$                  | \$              |
| Bank Loans:                   | \$                  | \$              |
| Contingent Liabilities:       | \$                  | \$              |
| Alimony/Child Support:        | \$                  | \$              |
| Other:                        | \$                  | \$              |
| Mortgage (Primary Residence): | \$                  | \$              |
| Other Mortgages:              | \$                  | \$              |
| Unpaid Taxes:                 | \$                  | \$              |
| Leases (Auto or Others):      | \$                  | \$              |

**TOTAL ASSETS** \$

**TOTAL LIABILITIES / MONTHLY PAYMENTS** \$ \$

**TOTAL NET WORTH**  
= Total Assets (minus) Total Liabilities

\$

x \_\_\_\_\_  
SIGNATURE DATE

x \_\_\_\_\_  
SIGNATURE DATE