



**Personal Statement**

Name (or names if joint) \_\_\_\_\_

Address \_\_\_\_\_ Zip Code \_\_\_\_\_

Employer(s) \_\_\_\_\_ Position or Occupation \_\_\_\_\_

Telephone Number (H): \_\_\_\_\_ (W): \_\_\_\_\_ Date of Statement \_\_\_\_\_

The following is submitted for the purpose of procuring, establishing and maintaining credit with you in behalf of the undersigned or persons, firms or corporations in whose behalf the undersigned may either severally or jointly with others execute a guaranty in your favor. The undersigned warrants that this financial statement is true and correct and that you may consider this statement as continuing to be true and correct until a written notice of a change is given to you by the undersigned. You understand that we have a current need to review your creditworthiness as an individual. By signing below, you authorize us to check your credit account and employment history and/or have a credit reporting agency prepare a credit report on you.

**Please do not leave any questions unanswered. Use "no" or "none" where necessary.**

Assets	In Even Dollars	Liabilities	In Even Dollars
Cash on hand and in banks		Notes payable to banks	
Marketable securities-see schedule A		Notes payable to others	
Non-marketable securities-see schedule B		Due to brokers	
Securities held by broker in margin accounts		Amounts payable to others-secured	
Restricted or control stocks		Amounts payable to others-unsecured	
Partial interest in real estate equities-see schedule C		Accounts and bills due	
Real estate owned-see schedule D		Unpaid income tax	
Loans receivable		Other unpaid taxes and interest	
Automobiles		Real estate mortgages payable see schedule D	
Personal property		Other debts-itemize:	
Cash value -life insurance-see schedule E			
Retirement account(s)			
Other assets-itemize:			
		Total liabilities	
		Net worth	
Total assets		Total liability and net worth	

Are all bad and doubtful assets excluded from this statement? \_\_\_\_\_ If no, explain: \_\_\_\_\_

Income taxes settled through what date? \_\_\_\_\_ Additional assessments \$ \_\_\_\_\_

Annual Sources of Income	Personal and General Information
Salary \$ _____	Do you have a will? If yes, name of executor _____
Bonus and commissions _____	Are you a partner or officer in any other venture? _____
Dividends & interest _____	Number of dependents: _____
Real estate income _____	Are you obligated to pay alimony, child support, or maintenance payments? If so, describe. _____
Other income _____ <small>(Alimony, child support or separate maintenance income need not be listed unless you choose to have such income considered.)</small>	_____
Total \$ _____	_____
<b>Contingent Liabilities</b>	Social Security No. _____ Age: _____
Do you have any contingent liabilities? _____	Social Security No. _____ Age: _____
If yes, give details: _____	Are any assets pledged? _____
_____	Are you a defendant in any suits or legal actions? _____
As endorser, co-maker or guarantor \$ _____	_____
On leases or contracts \$ _____	Personal bank accounts carried at: _____
Legal claims \$ _____	Have you ever taken bankruptcy? Explain. _____
Other special debt \$ _____	_____
Amount of contested income tax liens \$ _____	_____

**Schedule A - U.S. Governments and Marketable Securities**

No. of Shares or Face Value (Bonds)	Description	In Name Of	Market Value	Source of Value

**Schedule B - Non-Marketable Securities**

Description of Securities	No. of Shares Owned	Book Value Per Financial Statement / Dated:	No. of Shares Outstanding	Total Value

**Schedule C - Partial Interests in Real Estate Equities**

Location of Property	% of Ownership	Type	Yr. of Purch.	Cost (C) or Market (M)	Mortgage	Value of Equity

**Schedule D - Real Estate Owned**

Description of Property and Improvements	Date Acquired	Title in Name of	Cost	Tax Assessed Value	Market Value	Mortgage	
						Balance	Payment

**Schedule E - Life Insurance Carried, Incl. N.S.L.I. and Group Insurance**

Face Amount	Name of Company	Beneficiary	Cash Surrender Value	Loans

**Schedule F- Names of Banks or Finance Companies where credit has been obtained**

Name and Address	Original Date	High Credit	Owe Currently	Collateral (if any)

**Schedule G - Current Notes Payable**

Payee	Original Amount	Current Balance	Monthly Payment	Collateral (if any)

The undersigned certifies that both sides hereof and the information inserted therein has been carefully read and is true, correct and complete.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

(Use additional schedules when necessary)