

# Personal Financial Statement

**IMPORTANT: Please read the directions immediately below before completing this statement, and check (☑) the appropriate box below.**

- If you are applying for individual credit in your own name and are relying on your own income or assets and not the income or assets of another person as the basis for repayment of the credit request, complete all Sections except for "Section B : Other Party Information."
- If you are applying for joint credit with a person with whom you hold all assets jointly, complete all Sections, providing information in "Section B : Other Party Information" about the other applicant. If you do not jointly own assets, please fill out a separate form for each applicant.
- If you are applying for individual credit, but are relying on income from alimony, child support, or separate maintenance, or on the income or assets of another person as a basis for repayment of the credit requested; complete all Sections, providing information in Section B about the person whose alimony, support, or maintenance payments of income or assets you are relying.
- If this statement refers to your guaranty of the indebtedness of other person(s), firm(s) or corporation(s), complete all Sections except for "Section B : Other Party Information"

SECTION A : INDIVIDUAL INFORMATION <i>(Type or Print)</i>			SECTION B : OTHER PARTY INFORMATION <i>(Type or Print)</i>		
Name			Name		
Address (Residence)		Years There	Address (Residence)		Years There
City			City		
State		Zip	State		Zip
Position or Occupation			Position or Occupation		
Business Name		Years There	Business Name		Years There
Address (Business)			Address (Business)		
City			City		
State		Zip	State		Zip
Res. Phone		Bus. Phone	Res. Phone		Bus. Phone
SECTION C : STATEMENT OF FINANCIAL CONDITION					
			as of 20____		
ASSETS <small>(Do not include Assets of doubtful value)</small>	In Dollars <small>(Omit cents)</small>	<small>Check box if jointly held</small>	LIABILITIES	In Dollars <small>(Omit cents)</small>	<small>Check box if jointly held</small>
Cash on hand in banks		<input type="checkbox"/>	Notes payable to banks – secured		<input type="checkbox"/>
U.S./Canadian Gov't. & Marketable Securities – see Schedule A		<input type="checkbox"/>	Notes payable to banks – unsecured		<input type="checkbox"/>
Non-Marketable Securities – see Schedule B		<input type="checkbox"/>	Due to brokers		<input type="checkbox"/>
Securities held by broker in margin accounts		<input type="checkbox"/>	Accounts payable to others – secured		<input type="checkbox"/>
Restricted or controlled stocks		<input type="checkbox"/>	Accounts payable to others – unsecured		<input type="checkbox"/>
Partial interest in Real Estate Equities – see Schedule C		<input type="checkbox"/>	Accounts and bills due		<input type="checkbox"/>
Real Estate Owned – see Schedule D		<input type="checkbox"/>	Unpaid income tax		<input type="checkbox"/>
Loans Receivable		<input type="checkbox"/>	Other unpaid taxes and interest		<input type="checkbox"/>
Automobiles and other personal property		<input type="checkbox"/>	Real estate mortgages payable – see Schedule D		<input type="checkbox"/>
Cash value – Life Insurance – see Schedule E		<input type="checkbox"/>	Other Debts – Itemize:		<input type="checkbox"/>
Other Assets – Itemize:		<input type="checkbox"/>			<input type="checkbox"/>
		<input type="checkbox"/>			<input type="checkbox"/>
		<input type="checkbox"/>	TOTAL LIABILITIES		<input type="checkbox"/>
		<input type="checkbox"/>	NET WORTH		<input type="checkbox"/>
TOTAL ASSETS			TOTAL LIABILITIES AND NET WORTH		
ANNUAL INCOME			PERSONAL INFORMATION		
SOURCES OF INCOME FOR YEAR ENDED, 20____			PLEASE USE SEPARATE SHEET FOR ADDITIONAL DETAILS		
Salaries, bonuses & commissions	\$		Is any income listed likely to be reduced prior to loan being paid off? <input type="checkbox"/> Yes (Explain) <input type="checkbox"/> No		
Dividends	\$		Are you a partner or officer in any other venture? <input type="checkbox"/> Yes (Describe) <input type="checkbox"/> No		
Real Estate Income	\$		Are you obligated to pay alimony, child support or separate maintenance payments? <input type="checkbox"/> Yes (Describe) <input type="checkbox"/> No		
Other Income	\$		Are any assets pledged other than as described on schedules? <input type="checkbox"/> Yes (Describe) <input type="checkbox"/> No		
	\$		Income tax settled through (Date)		
	\$		Have you ever been a defendant in any suits, or legal or criminal complaints? <input type="checkbox"/> Yes <input type="checkbox"/> No		
	\$		Personal bank accounts carried at:		
	\$		Savings Account No.:		
	\$		Checking Account No.:		
	\$		Have you ever filed bankruptcy? <input type="checkbox"/> No <input type="checkbox"/> Yes (Explain) Year?		
TOTAL	\$				
CONTINGENT LIABILITIES					
Do you have any contingent liabilities? <input type="checkbox"/> Yes (Describe) <input type="checkbox"/> No					
As endorser, co-maker or guarantor?	\$				
On leases or contracts?	\$				
Legal claims?	\$				
Other special debt?	\$				
Amount of contested income tax liens	\$				

**SCHEDULE A : U.S. GOVERNMENT & MARKETABLE SECURITIES**

Number of Shares or Face Value (Bonds)	Description	In Name Of	Are These Pledged?	Market Value

**SCHEDULE B : NON-MARKETABLE SECURITIES - ENTER SECTION C LINE 2**

# of Shares	Description	In Name Of	Are These Pledged?	Source of Value	Value

**SCHEDULE C : PARTIAL INTEREST IN REAL ESTATE EQUITIES - ENTER SECTION C LINE 3**

Address & Type of Property	Title in Name Of	% Of Ownership	Date Acquired	Cost	Market Value	Mortgage Maturity	Mortgage Amount

**SCHEDULE D : REAL ESTATE OWNED – ENTER SECTION C LINE 6**

Address & Type of Property	Title in Name Of	Date Acquired	Cost	Market Value	Mortgage Maturity	Mortgage Amount

**SCHEDULE E : LIFE INSURANCE CARRIED, INCLUDING N, S, L, I, AND GROUP INSURANCE**

Name Of Insurance Company	Owner Of Policy	Beneficiary	Face Amount	Policy Loans	Cash Surrender Value

**SCHEDULE F : BANKS OR FINANCE COMPANIES WHERE CREDIT HAS BEEN OBTAINED – ENTER SECTION C LINE 10**

Name & Address Of Lender	Credit In The Name Of	Secured Or Unsecured?	Original Date	High Credit	Current Balance

**SECTION D : SECURED CREDIT** (Complete only if credit is to be secured.)

Briefly describe the property to be given as security:

List names and addresses of all co-owners of the property:

Name & Address:

Name & Address:

If the security is real estate, give the full name of the co-owner (if any):

The information contained in this statement is provided for the purpose of obtaining, or maintaining credit with you on behalf of the undersigned, or persons, firms or corporations in whose behalf the undersigned may either severally or jointly with another or others, execute a guaranty in your favor. Each undersigned understands that you are relying on the information provided herein (including the designation made as to ownership of property) in deciding to grant or continue credit. Each undersigned represents and warrants that the information provided is true and complete 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 are authorized to make all inquiries you deem necessary to verify the accuracy of the statements made herein, and to determine my/our creditworthiness. You are authorized to answer any questions about your credit experience with me/us. Each undersigned authorizes Crestmark, its subsidiaries, agents and assigns to use, collect and disclose the foregoing information for the purposes stated herein. Crestmark will take reasonable precaution to safeguard such information to prevent it from theft, loss or unauthorized disclosure. Crestmark will keep such information for as long as necessary to provide the financing contemplated herein and in accordance with its privacy policy. For any questions regarding Crestmark's Privacy Policy or if any of the undersigned wishes to rectify any information provided to Crestmark, the undersigned may contact Crestmark at any telephone number appearing herein.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
 Social Security Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Social Security Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_



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