

Financial Statements for Individuals

DATE _____

Customer Information

Customer #1: _____ Customer #1 Occupation: _____
 Date of Birth: _____ Customer #1 Income: _____
 SS #: _____ Phone #: _____
 Address: _____ Number of Dependents: _____

Customer #2: _____ Customer #2 Occupation: _____
 Date of Birth: _____ Customer #2 Income: _____
 SS #: _____ Phone #: _____
 Address: _____ Number of Dependents: _____

ASSETS

CURRENT ASSETS

Cash and Bank Deposits	
Accounts Receivable	
TOTAL CURRENT ASSETS	

INTERMEDIATE ASSETS

Schedule B - Securities Owned	
Schedule C - Cash Value Life Insurance	
Schedule D - Autos, Boats, Equipment & Etc.	
TOTAL INTERMEDIATE ASSETS	

FIXED ASSETS

Schedule A - Real Estate	
Household Property	
TOTAL FIXED ASSETS	

TOTAL ASSETS

LIABILITIES

CURRENT LIABILITIES

Notes Payable (Due within 1yr)	
Others	
RE Taxes Payable	
Schedule E - Credit Cards, Medical, & Personal	
TOTAL CURRENT LIABILITIES	

INTERMEDIATE LIABILITIES

Schedule C - Life Insurance	
Schedule D - Autos, Boats, Etc.	
TOTAL INTERMEDIATE LIABILITIES	

LONG TERM LIABILITIES

Schedule A - Real Estate Mtgs	
TOTAL LONG TERM LIABILITIES	

TOTAL LONG TERM LIABILITIES

TOTAL LIABILITIES

PRESENT NET WORTH

TOTAL LIABILITIES & NET WORTH

Are you a defendant in any Suits or Legal Action?	YES / NO	If yes, explain	
Have you ever been declared Bankrupt in the last 10 years?	YES / NO	If yes, explain	
Are you Obligated to pay Alimony, Child Support, or Separate Maintenance?	YES / NO	If yes, explain	
Are any Assets Pledged?	YES / NO	If yes, explain	
Are there any unsatisfied judgements against you?	YES / NO	If yes, explain	
Are you a co-maker, endorser, or guarantor on any loan or contract?	YES / NO	If yes, explain	

Signatures- For the purpose of procuring credit from time to time. I/We furnish the foregoing as a true and accurated statement of my/our financial condition. Authorization is hereby given to the Lender to verify in any manner deems appropriate any and all items indicated on this statement. The undersigned also agrees to notify the Lender immediately in writing of any significant adverse change in such financial condition.

_____ DATE _____

CURRENT RATIO = _____
 WORKING CAPITAL = _____
 DEBT/ASSET RATIO = _____

_____ DATE _____

Schedule A - Real Estate Owned and Mortgages Payable

Location and Description	Market Value	Payment Amount	Liens	Lien Holder	Improvements
Total:					

Schedule B - Securities Owned - (Including U.S. Gov't Bonds and all other Stocks and Bonds)

Face Value or # of shares	Face Value or Per Share Value	Description	Market Value	Registered Name	Amount Pledged to Secure Loan
Total:					

Schedule C - Life Insurance

Company	Face Amount of Policy	Pynt. Amount	Cash Value of Policy	Beneficiary of Policy	Amount Borrowed on Policy
Total:					

Schedule D - Autos, Boats, Campers, Equipment & Etc.

Description	Value	Pynt. Amount	Balance of Loan	Lien Holder
Total:				

Schedule E - Credit Card, Medical, & Personal Debt

Creditor	Account Number	Account Ownership	Pynt. Amount	Account Balance	Credit Limit	Comments
Total:						