

PERSONAL FINANCIAL STATEMENT AS OF _____
Submitted to: _____

PERSONAL INFORMATION

APPLICANT (NAME)				CO-APPLICANT (NAME) (if any)			
Employer				Employer			
Address of Employer		City	State	Address of Employer		City	State
Business Phone No.	No. of Year with Employer	Title/Position		Business Phone No.	No. of Years with Employer	Title/Position	
Name of previous employer & position (if with current employer less than 3 yrs.)			No. of Years	Name of previous employer & position (if with current employer less than 3 yrs.)			No. of Years
Home Address		City	State	Home Address		City	State
Home Phone No.	Social Security No.	Date of Birth		Home Phone No.	Social Security No.	Date of Birth	
Name, Phone No. of your Accountant				Name, Phone No. of your Accountant			
Name, Phone No. of your Attorney				Name, Phone No. of your Attorney			

Annual Cash Income & Expenditures Statement (Omit cents) For the Year of _____

ANNUAL INCOME	AMOUNT (\$)
Salary (applicant)	
Salary (co-applicant)	
Bonuses & Commissions (applicant)	
Bonuses & Commissions (co-applicant)	
Rental Income	
Interest Income	
Dividend Income	
Capital Gains	
Partnership Income	
Other Investment Income	
Other Income** (List)	
TOTAL INCOME ▶	\$

ANNUAL EXPENDITURES	AMOUNT (\$)
Income and Other Taxes	
Rental Payments, Co-op or Condo Maintenance	
Mortgage Payments residential investment	
Property Taxes residential investment	
Interest & Principal Payments on Loans	
Insurance	
Investments (including tax shelters)	
Alimony Child Support	
Medical Expense	
Other Major Expenses: List (e.g. Savings, Contributions to Pension Plans, Professional Insurance, etc.)	
TOTAL EXPENDITURES ▶	\$

Any significant changes expected in the next 12 months? Yes No (if yes, attach information)

** Income from alimony, child support or separate maintenance income need not be revealed if the applicant or co-applicant does not wish to have it considered as a basis for repaying this obligation.

PLEASE ANSWER THE FOLLOWING QUESTIONS

- 1. Do you have a line of credit or unused credit facility at any other institution(s)? Yes No
If so, please indicate where, how much and name of banker: _____

- 2. Income tax returns filed through (date) _____ Are any returns currently being audited or contested? Yes No
If yes, what years? _____

- 3. Have you, or any firm in which you held a significant interest declared bankruptcy in the last 10 years? Yes No
If yes, please provide details: _____

- 4. Have you ever been convicted of a felony? Yes No
If yes, please provide details: _____

- 5. Have you drawn a will? Yes No Please provide name of Executor(s) and year will was drawn: _____

- 6. Number of dependants (excluding self) and relationship to applicant: _____

- 7. Have you ever had a financial plan prepared for you? Yes No
If yes, by whom and when? _____

- 8. Did you include two years Federal and State tax returns? Yes No

I understand that **PeopleFirstBank** to whom I submit this financial statement is relying on the information contained herein (including the designation of my property as individually or jointly held) in deciding whether to give or continue the financial accommodation or extension of credit I have requested or received. I represent that this is a true statement of my financial condition as of the date of valuations. You may rely on it as being true and correct until I otherwise notify you in writing. You may retain and verify this statement. I understand and agree that from time to time you may receive information about me from third parties and may answer questions and requests from third parties seeking credit and experience information about me and my relationship with you. I further understand and agree that you may share with your affiliates the information contained herein and information received from third parties about me, as well as any financial records arising from the banking relationship between us and authorize such sharing. If this is a joint financial statement, these representations are from each of us.

I / WE HAVE READ, UNDERSTAND AND AGREE TO MAKE THE ABOVE REPRESENTATIONS.

Date

Your Signature

Date

Co-Applicant's Signature
(if you are requesting the financial accomodation jointly)