## **Personal Financial Statement**



Please complete all information, sign and date form

Applicant								
Applicant Name:	Social Security Number:							
Street Address:	Date of Birth:							
City, State, Zip:	Current Employer:							
Home Phone:	Position:							
Email Address:	Number of Years:							
Business Phone:	Annual Salary (verifiable):							
Joint Applicant								
Applicant Name:	Social Security Number:							
Street Address:	Date of Birth:							
City, State, Zip:	Current Employer:							
Home Phone:	Position:							
Email Address:	Number of Years:							
Business Phone:	Annual Salary (verifiable):							
Personal Assets and Liabilities are Stated as of Date:								
ASSETS:	LIABILITIES:							
Cash in this Credit Union	Notes Payable to Credit Union							
Cash in other Financial Institutions	Notes Payable to Others							
Marketable/Non-Marketable Securities(A)	Accounts Payable (incl. credit cards)							
Cash Value of Life Insurance (B)	Life Insurance Loans (B)							
Residential Real Estate Owned (C)	Residential Mortgage Debt (C)							
Investment Real Estate Owned (D)	Investment Real Estate Mortgage Debt (D)							
Closely-Held Businesses (E)	Notes Due: Closely-Held Businesses (E)							
Individual Retirement Accounts	Taxes Payable							
Accounts and Notes Receivable	Other Liabilities (please list)							
Personal Property	Due to:							
Other Assets	Due to:							
TOTAL ASSETS:	TOTAL LIABILITIES:							
ANNUAL INCOME: (Verifiable)	NET WORTH ( = ASSETS – LIABILITIES):							
Applicant's Salary	ANNUAL EXPENSES:							
Commissions/Bonuses	Income Taxes (State and Federal)							
Co-Applicants Salary	Rent or Mortgage Payment							
Commissions/Bonuses	Auto Loan Payments							
Dividend & Interest	Credit Card Payments							
Business Income	Other Loan Payments							
Gross Rental Income	Living Expenses							
Other Income	Other							
TOTAL INCOME:	TOTAL EXPENSES:							

Schedule A: Marketable / Non Marketable Securities								
Description	Legal Owner	# of 9	Shares Co	ost	Market Value	Pledged (yes / no)		
Schodulo B: Cash	Value of Life Insurance	co / Lifo Insur	anco Loans					
Scriedule B. Casii	value of Life insurant	te / the msura	ince Loans					
Insurance Company	Legal Owner	Bene	Beneficiary Face Value		Loans	Cash Value		
Schedule C: Residential Real Estate Owned / Residential Mortgage Debt								
Address	Legal Owner	Cost	Cost Market Value		Mortgage Balance	Monthly Payment		
Schedule D: Inves	tment Real Estate Ov	vned / Investr	nent Mortga	ge Debt				
Schedule F: Close	Legal Owner  Legal Owner	Cost		Businesses	Mortgage Balance	Monthly Payment		
Business Name	Position	% Interest	Total Assets	Present Value	Balances Owed	Monthly Payments		
Representations a	nd Warranties							
others upon the guarantee provided herein in deciding information provided herein changes in name, address, condition of any of the undof such notice or a new and authorized to make all inquindersigned. The undersigned the undersigned to the undersigned the undersigned.	in this statement is provided to it of the undersigned. The undersigned to grant or continue credit or to in its true, correct and complete. For employment and of any mater ersigned or (3) in the ability of an if ull written statement, this should iries they deem necessary to veried authorizes any person or condersigned authorizes Vermont For of the undersigned to Vermont	gned acknowledges a accept a guarantee to each of the undersign rial adverse change (2 my of the undersigned ald be considered as ify the accuracy of the sumer reporting age	and understands that thereof. Each of the led agrees to notify 1) in any of the infor 1 to perform its (or in 1 a continuing statem 1 e information contain 1 not to give Vermon 1 to answer questions 1 is outstanding, the	at Vermont Federa e undersigned repro Vermont Federal ( rmation contained their) obligations to nent and substantia ained herein and to t Federal Credit Ur s about their credit	Credit Union is relying esents, warrants and coredit Union immediate in this statement or (2 to Vermont Federal Creally correct. Vermont For determine the credit ion any information it experience with the use	g on the information ertifies that the ely in writing of any the financial dit Union. In the absence ederal Credit Union is worthiness of the may have on the undersigned. As long as		