

## PERSONAL FINANCIAL STATEMENT

**Please Check Appropriate Circle**

- Individual - relying on your own income and assets, and not the income and assets of spouse or another person. Do not provide information about spouse or another person.
- Joint - We intend to apply for joint credit relying upon jointly owned assets, and income and assets of spouse or another person. Include information about income, assets and liabilities of spouse or other person.

Name: \_\_\_\_\_ Social Security No: \_\_\_\_\_  
 Address: \_\_\_\_\_ Business Phone: \_\_\_\_\_  
 City, State & Zip Code: \_\_\_\_\_ Residence Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Social Security No: \_\_\_\_\_  
 Address: \_\_\_\_\_ Business Phone: \_\_\_\_\_  
 City, State & Zip Code: \_\_\_\_\_ Residence Phone: \_\_\_\_\_

<b>ASSETS</b>	(Omit Cents)	<b>LIABILITIES</b>	(Omit Cents)
Cash & Checking Accounts	\$ _____	Account Payable	\$ _____
Savings Accounts & CD's	\$ _____	(Including Credit Cards)	\$ _____
IRA or Other Retirement Accounts	\$ _____	Notes Payable to Banks	\$ _____
(Describe in Section 2)		(Describe in Section 2)	
Accounts & Notes Receivable	\$ _____	Installment Account (Auto)	\$ _____
(Describe in Section 3)		Mo. Payments \$ _____	
Life Insurance-Cash Surrender		Installment Account (Other)	\$ _____
Value Only (Complete Section 7)	\$ _____	Mo. Payments \$ _____	
Stocks & Bonds	\$ _____	Installment Account (Other)	\$ _____
(Describe in Section 4)		Mo. Payments \$ _____	
Real Estate	\$ _____	Mortgages on Real Estate	\$ _____
(Describe in Section 4)		(Describe in Section 4)	
Closely Held Companies	\$ _____	Unpaid Taxes	\$ _____
(Net Worth)		(Describe in Section 6)	
Other Personal Property -		Other Liabilities	\$ _____
Include Automobile	\$ _____	(Describe in Section 8)	
(Describe in Section 5)		<b>Total Liabilities</b>	\$ _____
Other Assets	\$ _____	<b>Net Worth</b>	\$ _____
(Describe in Section 5)			
<b>TOTAL</b>	<b>\$ _____</b>	<b>TOTAL</b>	<b>\$ _____</b>

<b>Section 1. Source of Income</b>	<b>Contingent Liabilities</b>
Salary	\$ _____
Net Investment Income	\$ _____
Real Estate Income	\$ _____
Other Income (Describe below)	\$ _____
Total Income	\$ _____
<b>Description of Other Income Section 1.</b>	

\*You do not have to include information about income from alimony, child support or separate maintenance payments unless you want us to consider this income in connection with this application for credit.

**Section 2.** Notes Payable to Credit Unions, Banks and Others (Use attachments if necessary. Each attachment must be identified as a part of this statement and signed)

CREDITOR	ORIGINAL DATE	ORIGINAL AMOUNT	PRESENT BALANCE	INTEREST RATE	MONTHLY PAYMENT	MATURITY DATE	COLLATERAL/SECURITY
Grand Totals							

**Section 3. Stocks and Bonds** (Use attachments if necessary. Each attachment must be identified as a part of this statement and signed)

Number of Shares, Face Value (Bonds), or % of Ownership	Indicate: <i>Agency or name of company issuing security or name of partnership</i>	Stock Ticker Symbol, If Applicable	Pledged		
			Market Value	Yes ( <input type="checkbox"/> )	No ( <input type="checkbox"/> )

**Section 4. Real Estate Owned** (List each parcel separately. Use attachment if necessary. Each attachment must be identified as a part of this statement and signed).

Property	Property A	Property B	Property C
Address			
Date Purchased			
Original Cost			
Present Market Value			
Name of Mortgage Holder(s)			
Mortgage Account Number(s)			
Mortgage Balance			
Amount of Payment per Month (PITI and Condo/TH Fee)			
Gross Rental Income, If Any			

**Section 5. Other Personal Property and Others Assets** (Describe, and if any is pledged as security, state name and address of lien holder, amount of lien, terms of payment and if delinquent, describe delinquency).


**Section 6. Unpaid Taxes** (Describe in detail, as to type, to whom payable, when due amount, and to what property, if any, a tax lien attaches).


**Section 7. Life Insurance Held.** (Give face amount and cash surrender value of policies-name of insurance company and beneficiaries).


**Section 8. Other Liabilities** (Describe in detail as to type, to whom payable, terms, etc.)


## Section 9. Other Information

Have you, or any entity in which you were an owner or part owner, ever gone through bankruptcy?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Have you ever settled any debts for less than the amount owed?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Have you ever had a judgment against you?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Are any assets pledged or debts secured except as shown?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Are you a defendant in any suits or legal actions?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
<b>If answered "yes" to any questions above, please explain in "Comments" section below</b>		
Do you have Disability Insurance?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If so, coverage per month \$_____		

### Comments:

I/We authorize Northwest Federal Credit Union, or its designee, to make inquiries as necessary to verify the accuracy of the statements made and to determine my creditworthiness. I/We certify the above and the statements contained in the attachments are true and accurate of the stated date (s). These statements are made for the purpose of either obtaining a loan or guaranteeing a loan. I/We understand FALSE statements may result in forfeiture and possible prosecution by the U.S. Attorney General. (Ref. 18 U.S.C. 1001).

Signature:	Date:
Signature:	Date: