

Personal Financial Statement

as submitted to



DATED:

IMPORTANT: Read these directions before completing this Statement

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 requested.

(PLEASE TYPE OR PRINT)

SECTION 1 - INDIVIDUAL INFORMATION		SECTION 2 - OTHER PARTY INFORMATION	
Name :		Name:	
Address:		Address:	
City, State & Zip:		City, State & Zip:	
Position & Occupation:		Position & Occupation:	
Business Name:		Business Name:	
Business Address:		Business Address:	
City, State & Zip:		City, State & Zip:	
Length of Employment:		Length of Employment:	
Res. Phone:		Res. Phone:	
Bus. Phone:		Bus. Phone:	
email address:		email address:	

SECTION 3 - STATEMENT OF FINANCIAL CONDITION

Assets (Do not include asset of doubtful value.)	In Dollars (Omit cents)	Liabilities	In Dollars (Omit cents)
Cash on hand - see Schedule A		Notes payable to Institutions or individuals - see Schedule I	
U.S. Gov't & Marketable Securities - see Schedule B		Credit Cards	
Non-Marketable Securities - see Schedule C		Accounts and Bills due	
Real estate owned - see Schedule D		Real estate mortgages payable - see Schedule D	
Automobiles and other vehicles - see Schedule E		Unpaid income tax	
Accounts, loans and other notes receivable - see Sched. F		Other unpaid taxes and interest	
Cash value - life insurance - see Schedule G		Life insurance loans - see Schedule G	
Book value of business ventures - see Schedule H		Other debts - itemize	
Other personal property			
Other assets - itemize			
		TOTAL LIABILITIES	
		NET WORTH	
TOTAL ASSETS:		TOTAL LIABILITIES AND NET WORTH	

SECTION 4 - ANNUAL INCOME & EXPENSES **SECTION 5 - CONTINGENT LIABILITIES**

For year ended	Amount	Annual Expenditures	Amount	Contingent Liabilities			Amounts
Salary	\$	Mortgage/rental payments		Borrower Yes / No	CoBorrower Yes / No		
Bonuses & Commissions		Utility payments					
Dividends & interest		Real estate taxes & assessments		DO YOU HAVE ANY... Contingent liabilities as a co-maker or guarantor? Involvement in pending legal actions? Other special debt or circumstance? Contested income tax liens? If "yes" to any question, describe your liability. Attach extra papers as needed.	No	No	\$
Net real estate income (before debt service)		Taxes: federal, state & local					
Other income (specify)		Insurance payments					
		Other contracts payments (car payments, charge cards, etc.)					
(Alimony, child support or separate maintenance income need not be revealed if you do not wish to have it considered as a basis for repaying this obligation.)		Alimony, child support, maintenance		No	No	\$	
		Other expenses					
Total Income		Total Expenditures		Total Contingent Liabilities			

Income tax settled through (date) _____ Have you ever been declared bankrupt? Yes___ No___
If Yes, describe on separate sheet

SCHEDULE A - BANKS, SAVINGS & LOANS, CREDIT UNIONS (ETC.) WHERE FUNDS ARE ON DEPOSIT

Name of Institution	Location	Type of Deposit	Name(s) of Owner(s)	Amount on Deposit

SCHEDULE B - U.S. GOVERNMENT & MARKETABLE SECURITIES

Number of Shares or Face Value (Bonds)	Description	In Name Of	Market Value	Loans against Securities	
				Original	Current

SCHEDULE C - NON-MARKETABLE SECURITIES

Number of Shares	Name of Corporation	Location and Nature of Business	In Name Of	% Ownership	Market Value	Source of Value	Loans against Securities

SCHEDULE D - REAL ESTATE (WHOLLY OR PARTIALLY OWNED)

Address & Type of Property	Title in Name of	% of Ownership	Date Acquired	Cost	Market Value	Annual Payment	Mortgage Balance	Mortgage Maturity
ADDITIONAL REAL ESTATE TOTALS PER SCHEDULE D1				0	0	0	0	

SCHEDULE E - AUTOMOBILES

Year, Make, Model of Vehicle	Mileage	Value

SCHEDULE F - ACCOUNTS, LOANS, NOTES RECEIVABLE

Type of Account	Original Amount	Name of Borrower	Current Value

SCHEDULE G - LIFE INSURANCE CARRIED, INCLUDING N.S.L.I. AND GROUP INSURANCE

Name of Insurance Company	Owner of Policy	Beneficiary	Face Amount	Policy Loans		Surrender Value (Cash)
				Original Amt	Balance	

SCHEDULE H - BUSINESS VENTURES

List Name of Business Ventures in Which You Are a Principal or Partner	Business Net Worth	Your % of Ownership	Your Position/Title In the Business	Total Assets of Business	Line of Business	Years in Business

SCHEDULE I - NOTES PAYABLE

Name of Creditor	Purpose	Rate	Original Loan Amount	Date of Loan	Maturity Date	If Secured list collateral	Current Balance	Payment Schedule

The information contained in this statement is provided for the purpose of obtaining or maintaining credit with Alliance Bank on behalf of the undersigned, or persons, firms, or corporations in whose behalf the undersigned may either separately, or jointly with others, execute a guaranty in favor of Alliance Bank. Each undersigned understands that Alliance Bank is 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 Alliance Bank may consider this statement as continuing to be true and correct until a written notice of a change is given to Alliance Bank by the undersigned. As long as a loan or commitment to lend is outstanding, the undersigned agree to update this financial statement for Alliance Bank annually. Alliance Bank is authorized to make all inquiries it deems necessary to verify the accuracy of the statements made herein, and to determine my/our credit worthiness. Alliance Bank is authorized to answer questions about its credit experience with me/us.

Signature _____
 Date Signed _____ Date of Birth _____
 S.S. No. _____

Signature _____
 Date Signed _____ Date of Birth _____
 S.S. No. _____