

I am completing this form as an individual and/or applying for individual credit in my name and I am relying on my own income and assets and not the income or assets of any other person.

I am completing this form as an individual and/or applying for individual credit in my name and I am relying on my own income and assets, as well as the income or assets from other sources as noted within.

We are completing this form jointly and/or applying for joint credit.

Note: Any willful misrepresentation could result in a violation of Federal Law (Sec. 18 U.S.C. 1014)

PERSONAL INFORMATION			
Name of Applicant	U.S. Citizen? Yes No	Name of Co-Applicant	U.S. Citizen? Yes No
Social Security Number	Date of Birth	Social Security Number	Date of Birth
Employer	Title / Position	Employer	Title / Position
	Number of Years		Number of Years
Name of previous employer & title/position (if current employer less than 3 years)	Number of Years	Name of previous employer & title/position (if current employer less than 3 years)	Number of Years
Home Address	City / State	Home Address	City / State
ZIP Code	Primary Phone Number	ZIP Code	Primary Phone Number
	Secondary Phone Number		Secondary Phone Number
Email Address	Marital Status	Email Address	Marital Status

ANNUAL INCOME AND EXPENDITURES FOR YEAR ENDING:

(YEAR)

ANNUAL INCOME	AMOUNT (\$)	ANNUAL EXPENDITURES	AMOUNT (\$)
Salary, Bonuses & Commissions (Applicant)		Mortgage, Rental Payment	
Salary, Bonuses & Commissions (Co-Applicant)		Real Estate Taxes & Assessments	
Dividend & Interest Income		Federal & State Income Taxes	
Real Estate Income		Insurance	
Business Income		Alimony/Child Support	
Other Income (List Below)**		Other Expenditures (List Below)	
Total Income		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.

STATEMENT OF FINANCIAL CONDITIONS AS OF:

(DATE)

ASSETS	AMOUNT (\$)	LIABILITIES	AMOUNT (\$)
Cash (Schedule A)		Credit Cards & Accounts Payable	
Cash Value of Life Insurance (Schedule B)		Taxes Payable	
US Govt. & Readily Marketable Securities (Schedule C)		Mortgage Debt (Schedule D)	
Real Estate (Schedule D)		Notes Payable from Business Ventures (Schedule E)	
Business Ventures (Schedule E)		Notes Payable (Schedule F)	
IRA & Other Tax Deferred Accounts		Other Debts/Liabilities: (List)	
Notes/Accounts Receivable			
Vehicles			
Personal Property & Other Assets: (List)			
		Total Liabilities	
Total Assets		Net Worth (Total Assets Less Total Liabilities)	

SCHEDULE A - Cash in Financial Institutions

Name of Account Owner(s)	Name of Bank	Type of Account	Amount (\$) on Deposit
Total:			

SCHEDULE B - Life Insurance (List only those Policies that you own)

Insurance Company	Owner of Policy	Beneficiary	Face Value of Policy	Cash Surrender Value
Total:				

SCHEDULE C - Securities Owned (including U.S. Gov't Bonds and all other Marketable Stocks and Bonds)

Face Value of Bonds / No. of Shares Stock	Description	Type of Ownership	Cost	Market Value	Amount Pledged	To Whom Pledged
Total:						

SCHEDULE D - Real Estate Owned

					MORTGAGE		
Address	Legal Owner	Year Purchased	Purchase Price	Current Market Value	Loan Balance	Monthly Payment	Lender
Total:							

SCHEDULE E - Business Ventures

Entity Name	Position / Title	Type of Business	% of Ownership	Current Market Value	Balance Due on Notes	Net Market Value	Net Balance Due on Notes
Total:							

SCHEDULE F - Notes Payable

Lender	Type of Debt	Balance	Monthly Payment	Date of Loan (mo/yr)	Estimated Payoff Date (mo/yr)	Secured by
Total:						

CONTINGENT AND OTHER LIABILITIES		Applicant	Co-Applicant
1) Are you a Guarantor, Co-Signor, or Endorser for any debt of an individual, corporation or partnership?		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, Aggregate Amount of Debt: <input type="checkbox"/> \$0-\$99,999 <input type="checkbox"/> \$100,000-\$249,999 <input type="checkbox"/> \$250,000-\$499,999 <input type="checkbox"/> \$500,000+			
2) Do you have any outstanding Letters of Credit or Security Bonds?		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
3) Are you contingently liable for any Leases or Contracts?		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
4) Are there any suits or legal actions pending against you?		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
5) Do you owe, or are you past due on any Federal or State Income Taxes?		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
GENERAL INFORMATION			
1) Have you or any company with which you are or were associated:			
a) Declared Bankruptcy within the last 10 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
b) Defaulted on a loan or financial obligation of any sort, whether as obligor, cosigner, or guarantor?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
c) Forfeited property in full or partial satisfaction of any financial obligation or had a lien placed against property for failure to pay taxes or other debts?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
d) Had wages or income garnished for any reason?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
e) Failed or refused to pay any outstanding judgments?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
2) Have you or any company with which you are or were associated been involved in any lawsuit, formal or informal investigation, examination, or administrative proceeding that may result in, or resulted in, any penalty (including, but not limited to, any sanction, fine, order to pay damages, loss of right or benefit, forfeiture of property interest or revocation of license), agreement, undertaking, consent, judgment, or order imposed by or entered into with any of the following entities:			
a) Any federal or state court?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
b) Any department, agency, or commission of the United States Government?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
c) Any state, municipal, or foreign governmental entity?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
d) Any self-regulatory organization (for example, NASD, FASB, state bar)?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
3) Have you or any company with which you are or were associated with been arrested for, charged with, indicted for, or convicted of (including a conviction where the record was expunged), or ever pleaded <i>nolo contendere</i> to, any criminal matter (other than minor traffic violations)?		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
<p>If you answer "yes" to any questions in #1 through #3 above, attach your explanation(s) by identifying the number of the question, describing the situation in</p> <ul style="list-style-type: none"> ▪Name and location of any company, party, court, regulatory agency, or self-regulatory organization involved. ▪Nature of your association with any company (for example, officer, director, organizer, principal shareholder, or owner). ▪Type of any application, notice, or other regulatory or administrative request. ▪Nature of any supervisory, enforcement, or administrative action. ▪Direct and indirect debt terms, defaulted amount, and creditor regarding any financial obligation. ▪Date of any relevant event. ▪Nature of any lawsuit, charge or proceeding. ▪Jurisdiction in which any legal proceeding occurred. ▪Resolution or disposition of the matter. 			
NOTICE: We may report information about your account to credit bureaus. Late payments, missed payments, or other defaults on your account may be reflected in your credit report.			
I certify that this financial statement is true and complete. I authorize Lender or its agents to verify the information obtained in this statement and to obtain additional information concerning my financial condition, including, without limitation, consumer credit reports, although Lender may rely on this financial statement without any further verification. I authorize Lender to furnish such information and any other credit experiences with me to others and to answer any questions about my credit experience and other financial relationships with Lender, to the extent not prohibited by applicable law. I agree to notify Lender, in writing, of any change that materially affects the accuracy of this statement.			
<input type="checkbox"/> Electronic Signature(s). If checked, I further agree that I have signed this <i>Personal Financial Statement</i> with one or more electronic signatures. I intend my electronic signature to have the effect of my written ink signature. I viewed and read the entire <i>Personal Financial Statement</i> before I signed it. I understand that this <i>Personal Financial Statement</i> will be placed in my file with Silver Lake Bank. Silver Lake Bank may rely on, and enforce, this <i>Personal Financial Statement</i> in the electronic form or as a paper version of the electronic form.			
Applicant Signature	Date Signed	Co-Applicant Signature	Date Signed