



# Personal Financial Statement

CONTACT YOUR REPRESENTATIVE AT THE BANK IF YOU HAVE ANY  
QUESTIONS REGARDING THE COMPLETION OF THIS FORM

YOU MAY APPLY FOR A CREDIT EXTENSION OR FINANCIAL ACCOMMODATION INDIVIDUALLY OR JOINTLY WITH A CO-APPLICANT. THIS STATEMENT AND ANY APPLICABLE SUPPORTING SCHEDULES MAY BE COMPLETED JOINTLY BY BOTH MARRIED AND UNMARRIED CO-APPLICANTS IF THEIR ASSETS AND LIABILITIES ARE SUFFICIENTLY JOINED SO THAT THE STATEMENT CAN BE MEANINGFULLY AND FAIRLY PRESENTED ON A COMBINED BASIS; OTHERWISE SEPARATE STATEMENTS AND SCHEDULES ARE REQUIRED.

<b>CONSUMER APPLICATION</b> <i>(Applicable boxes below are <b>REQUIRED</b> to be checked (✓) and the provided initial boxes <b>MUST</b> be filled out)</i>	
<input type="checkbox"/> INDIVIDUAL CREDIT - Relying on my income or assets	<input type="checkbox"/> UNSECURED
<input type="checkbox"/> INDIVIDUAL CREDIT - Relying on my income or assets as well as income or assets from other sources	<input type="checkbox"/> SECURED
<input type="checkbox"/> JOINT CREDIT	
<b>PLEASE INITIAL IN THE FOLLOWING BOXES:</b> Applicant: _____      Co-Applicant: _____	

PURPOSE OF REQUEST: _____
AMOUNT OF APPLICATION: _____
COLLATERAL: _____

**APPLICANT:**

NAME: _____	SOCIAL SECURITY#: _____
ADDRESS: _____	DATE OF BIRTH: _____
CITY: _____	EMPLOYER: _____
STATE / ZIP: _____	POSITION: _____ Yrs: _____
CELL PHONE: _____	WORK PHONE: _____
EMAIL: _____	HOME PHONE: _____

**CO - APPLICANT:**

NAME: _____	SOCIAL SECURITY#: _____
ADDRESS: _____	DATE OF BIRTH: _____
CITY: _____	EMPLOYER: _____
STATE / ZIP: _____	POSITION: _____ Yrs: _____
CELL PHONE: _____	WORK PHONE: _____
EMAIL: _____	HOME PHONE: _____

**SCHEDULE 1 DUE FROM FRIENDS, RELATIVES & OTHERS**

Name of Debtor	Owed To	Collateral	How Payable	Maturity Date	Unpaid Balance
			/per mo		
			/per		
			/per		
<b>TOTAL</b>					\$0

**SCHEDULE 2 MORTGAGE(S) AND CONTRACT(S) FOR DEED OWNED**

Name of Debtor	Type of Property	1st or 2nd Lien	Owed To	How Payable	Unpaid Balance
				/per	
				/per	
				/per	
<b>TOTAL</b>					\$0

**SCHEDULE 3 SECURITIES OWNED**

No. of Shares or Bond Amt.	L-Listed U-Unlisted	Description	In Whose Names Registered	Cost	Present Market Value	Loans
<b>TOTAL</b>				\$0	\$0	\$0

**SCHEDULE 3 RETIREMENT/401K**

No. of Shares or Bond Amt.	Description	In Whose Names Registered	Cost	Present Market Value	Loans
<b>TOTAL</b>			\$0	\$0	\$0

**SCHEDULE 4 LIFE INSURANCE**

Insured	Insurance Company	Beneficiary	Face Value of Policy	Cash Value	Loans
<b>TOTAL</b>			\$0	\$0	\$0

**SCHEDULE 5 HOMESTEAD & OTHER REAL ESTATE OWNED**

Homestead	Title in Name (s) of		Cost / Year Acquired	Present Value	Market Value	Loans
<b>TOTAL</b>				\$0		\$0

Enter loan detail below on Schedule 6. If there are not enough spaces for all other real estate owned, attach an additional sheet with the detail and include the total present market value and loans above.

**SCHEDULE 6 MORTGAGE(S) OR LIENS ON REAL ESTATE**

	To Whom Payable	How Payable	Interest Rate	Maturity Date	Unpaid Balance
A		/per			\$0
B		/per			\$0
C		/per			\$0
D		/per			\$0
E		/per			\$0
F		/per			\$0
<b>TOTAL</b>					\$0

**SCHEDULE 7 NOTES PAYABLE BANKS & OTHERS AND INSTALLMENT CONTRACTS PAYABLE**

To Whom Payable	Address	Collateral or Unsecured	How Payable	Unpaid Balance
			/per	
			/per	
			/per	
			/per	
			/per	
<b>TOTAL</b>				\$0

DATE: \_\_\_\_\_

ASSETS		AMOUNT	LIABILITIES		AMOUNT
Cash in this Bank			Notes Payable Banks, Others, & Installments	Sch. 7	\$0
Cash in Other Banks (Detail)					
			Due Dept. Stores, Credit Cards & Others		
Due from Friends, Relatives & Others	Sch. 1	\$0	Income Taxes Payable		
Mortgage(s) & Contracts for Deed Owned	Sch. 2	\$0	Other Taxes Payable		
Securities Owned	Sch. 3	\$0	Loans on Securities	Sch. 3	\$0
Retirement/401k Accounts	Sch. 3	\$0	Loans on Retirement/401k Accounts	Sch. 3	\$0
Cash Surrender Value of Life Insurance	Sch. 4	\$0	Loans on Life Insurance	Sch. 4	\$0
Homestead	Sch. 5	\$0	Mortgage(s) on Homestead	Sch. 6	\$0
Other Real Estate Owned	Sch. 6	\$0	Mortgage(s) or Liens on other Real Estate	Sch. 6	\$0
Automobiles					
			Other Liabilities		
Personal Property			Child Support		
Other Assets (Detail)					
			TOTAL LIABILITIES		\$0
			Net Worth (Total Assets Less Total Liabilities)		\$0
<b>TOTAL</b>		\$0	<b>TOTAL</b>		\$0

ANNUAL INCOME	APPLICANT	CO-APPLICANT	CONTINGENT LIABILITIES	AMOUNT
Salary				
Commission				
Rentals				
Other				
Other				
Alimony, child support or maintenance (you need not show this unless you wish us to consider it)				
<b>TOTAL INCOME</b>	\$0	\$0	<b>TOTAL CONTINGENT LIABILITIES</b>	\$0

**DECLARATIONS:**

Have you ever gone through bankruptcy or had a judgment against you?

Are any assets pledged or debts secured except shown?

Have you made a will?

Number of dependents?

(If "None" check None)

Marital Status (answer only if this financial statement is provided in connection with a request for secured credit or applicant is seeking a joint account with spouse.)

APPLICANT		CO-APPLICANT	
<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO
<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO
<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> YES	<input type="checkbox"/> NO
_____ <input type="checkbox"/> NONE		_____ <input type="checkbox"/> NONE	
<input type="checkbox"/> MARRIED		<input type="checkbox"/> MARRIED	
<input type="checkbox"/> SEPARATED		<input type="checkbox"/> SEPARATED	
<input type="checkbox"/> UNMARRIED		<input type="checkbox"/> UNMARRIED	

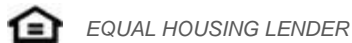
(Unmarried includes single, divorced, widowed)

The foregoing statement, submitted for the purpose of obtaining credit, is true and correct in every detail and fairly shows my/our financial condition at the time indicated. I/we will give you prompt written notice of any subsequent substantial change in such financial condition occurring before discharge of my/our obligations to you. I/we understand that you will retain this personal financial statement whether or not you approve the credit in connection with which it is submitted. You are authorized to check my/our credit report and employment history or any other information contained herein.

Accountant / CPA	_____	Firm	_____
Lawyer	_____	Firm	_____
Financial Planner / Broker	_____	Firm	_____

**THE UNDERSIGNED CERTIFY THAT THE INFORMATION CONTAINED ON THIS FORM HAS BEEN CAREFULLY REVIEWED AND THAT IT IS TRUE AND CORRECT IN ALL RESPECTS.**

_____	_____
Date	Your Signature
_____	_____
Date	Co-Applicant Signature <i>(if you are requesting the financial accommodation jointly)</i>



DRAKE BANK NMLS# 466969;  
Annamarie Becker NMLS #860395, Rhonda Norman NMLS #716909, Gino Monico NMLS # 895801, Ronke Oyinloye NMLS #1697401

[www.drake-bank.com](http://www.drake-bank.com)

FOR BANK USE ONLY			
Date Application Received:	Received By:	<input type="checkbox"/> Face to Face	<input type="checkbox"/> Mail <input type="checkbox"/> Fax <input type="checkbox"/> Email <input type="checkbox"/> Telephone (sign verification box)
Telephone Application Verification		HMDA (Check Applicable)	
Banker Signature*: *By signing, Banker certifies that a signed, full application is on file		<input type="checkbox"/> Yes <input type="checkbox"/> Not Applicable	GMI Collected: <input type="checkbox"/> Yes <input type="checkbox"/> No

**IMPORTANT NOTICE:**

COMPLETE THIS SECTION ONLY IF THE LOAN PURPOSE IS FOR HOME PURCHASE, HOME IMPROVEMENT OR REFINANCE

**REQUEST FOR INFORMATION FOR GOVERNMENT MONITORING PURPOSES**

The following information is requested by the federal government for certain types of loans related to a dwelling in order to monitor the lender's compliance with equal credit opportunity, fair housing, and home mortgage disclosure laws. You are not required to furnish this information, but are encouraged to do so. You may select one or more designations for "Race" and/or "Ethnicity." The law provides that a lender may not discriminate on the basis of this information or on whether you choose to furnish it. However, if you choose not to furnish the information and you have made this application in person, under federal regulations the lender is required to note ethnicity, race or national origin and sex on the basis of visual observation or surname. If you do not wish to furnish this information, please mark this indication below.

	APPLICANT	CO-APPLICANT
<b>Ethnicity</b>		
I do not wish to furnish this information	<input type="checkbox"/>	<input type="checkbox"/>
Not Hispanic or Latino	<input type="checkbox"/>	<input type="checkbox"/>
Hispanic or Latino (optional expanded origin below)	<input type="checkbox"/>	<input type="checkbox"/>
Mexican	<input type="checkbox"/>	<input type="checkbox"/>
Puerto Rican	<input type="checkbox"/>	<input type="checkbox"/>
Cuban	<input type="checkbox"/>	<input type="checkbox"/>
Other Hispanic or Latino (enter origin) <small>i.e. Argentinean, Colombian, Dominican, Nicaraguan, Salvadoran, Spaniard, etc.</small>	<input type="checkbox"/> _____	<input type="checkbox"/> _____
<b>Race</b>		
I do not wish to furnish this information	<input type="checkbox"/>	<input type="checkbox"/>
American Indian or Alaskan Native <small>Enter name of enrolled or principal tribe (optional)</small>	<input type="checkbox"/> _____	<input type="checkbox"/> _____
Asian (optional expanded race below)	<input type="checkbox"/>	<input type="checkbox"/>
Asian Indian	<input type="checkbox"/>	<input type="checkbox"/>
Chinese	<input type="checkbox"/>	<input type="checkbox"/>
Filipino	<input type="checkbox"/>	<input type="checkbox"/>
Japanese	<input type="checkbox"/>	<input type="checkbox"/>
Korean	<input type="checkbox"/>	<input type="checkbox"/>
Vietnamese	<input type="checkbox"/>	<input type="checkbox"/>
Other Asian (enter race) <small>i.e. Hmong, Laotian, Thai, Pakistani, Cambodian, etc</small>	<input type="checkbox"/> _____	<input type="checkbox"/> _____
Black or African American	<input type="checkbox"/>	<input type="checkbox"/>
Native Hawaiian or Other Pacific Islander <small>(optional expanded race below)</small>	<input type="checkbox"/>	<input type="checkbox"/>
Native Hawaiian	<input type="checkbox"/>	<input type="checkbox"/>
Guamanian or Chamorro	<input type="checkbox"/>	<input type="checkbox"/>
Samoaan	<input type="checkbox"/>	<input type="checkbox"/>
Other Pacific Islander (enter race) <small>i.e. Fijian, Tongan, etc</small>	<input type="checkbox"/> _____	<input type="checkbox"/> _____
White	<input type="checkbox"/>	<input type="checkbox"/>
<b>Sex</b>		
I do not wish to furnish this information	<input type="checkbox"/>	<input type="checkbox"/>
Male	<input type="checkbox"/>	<input type="checkbox"/>
Female	<input type="checkbox"/>	<input type="checkbox"/>

**FACE TO FACE APPLICATION:**

The applicant and/or co-applicant does not wish to furnish information for monitoring purposes. Therefore, the lender has provided this information based on visual observation and/or surname as required by the Home Mortgage Disclosure Act for the following sections;

<i>Applicant</i>	<i>Co-Applicant</i>	
<input type="checkbox"/>	<input type="checkbox"/>	Ethnicity
<input type="checkbox"/>	<input type="checkbox"/>	Race
<input type="checkbox"/>	<input type="checkbox"/>	Sex

**PHONE/VERBAL APPLICATION:**

The above disclosure was provided to the applicant(s) orally. Their responses were documented by the Banker.

\_\_\_\_\_  
Banker's Signature

Last Updated: Jan-19



DRAKE BANK NMLS# 466969  
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