

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.

CONSUMER APPLICATION (Applicable boxes below are REQUIRED to be checked ($$) and the provided initial boxes MUST be filled out)							
INDIVIDUAL CREDIT - Relying on my income or assets UNSECURED INDIVIDUAL CREDIT - Relying on my income or assets as well as income or assets from other sources SECURED JOINT CREDIT SECURED							
PLEASE INITIAL IN THE FOLLOWING BOXES:	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 mo		
			/per mo		
				TOTAL	

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 mo	
				/per mo	
				/per mo	
				TOTAL	

SCHEDULE 3 SECURITIES OWNED

No. of Shares or Bond Amt.	L-Listed U-Unlisted	Description	In Whose Names Registered	Cost	Present Market Value	Loans
SCHEDULE 3	RETIREMEN	IT/401K	TOTAL			
No. of Shares or Bond Amt.		Description	In Whose Names Registered	Cost	Present Market Value	Loans
			TOTAL			

SCHEDULE 4 LIFE INSURANCE

Insured	Insurance Company	Beneficiary	Face Value of Policy	Cash Value	Loans	
TOTAL						

SCHEDULE 5 HOMESTEAD & OTHER REAL ESTATE OWNED

Homestead	Title in Name(s) of		Cost / Year Acquired	Present Market Value		Loans (1st / 2nd)
					А	
					в	
Other Real Estate Owned	Title in Name(s) of	Monthly Income	Cost / Year Acquired	Present Market Value		Loans
					с	
					D	
					E	
					F	
					G	
			TOTAL			

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 Pa	ayable	How Payable	Interest Rate	Maturity Date	Unpaid Balance	
A		/per mo				
В		/per mo				
с		/per mo				
D		/per mo				
E		/per mo				
F		/per mo				
G		/per mo				
TOTAL						

SCHEDULE 7 NOTES PAYABLE BANKS & OTHERS AND INSTALLMENT CONTRACTS PAYABLE

To Whom Payable	Address	Collateral or Unsecured	How Payable	Unpaid Balance
			/per mo	
			TOTAL	

DATE:

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

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)				
TOTAL INCOME			TOTAL CONTINGENT LIABILITIES	

DECLARATIONS:	APPLICANT		CO-APPLICANT		
Have you ever gone through bankruptcy or had a judgment against you?	YES	NO	YES	NO	
Are any assets pledged or debts secured except shown?	YES	NO	YES	NO	
Have you made a will?	YES	NO	YES	NO	
Number of dependents? (If "None" check None)		NONE		NO	DNE
Marital Status (answer only if this financial statement is provided in connection with a request		MARRIED		MARRIED	
for secured credit or applicant is seeking a joint account with spouse.)		SEPARATED		SEPARATED	1
		UNMARRIED		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.

If you are securing a loan with a 1st lien on a dwelling, we may order an appraisal to determine the property's value and charge you for this appraisal. We will promptly give you a copy of any appraisal, even if your loan does not close. You can pay for an additional appraisal for your own use at your own cost.

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 Signa	ature
			ing the financial accommodation jointly)
	MEMBER FDIC	ſ	EQUAL HOUSING LENDER
		DRAKE BANK NMLS# 466969 Annmarie Becker NMLS #86039 Gino Monico NMLS # 895801 Janet Alland NMLS #721546	95
		www.drake-bank.com	
		FOR BANK USE ONLY	

I OK BANK OSE ONET						
Date Application Received:	Received By:	Face	to Face	🗆 Mail 🗌 Fax 🗌	Email 🗌 Telephone (sign	verification box)
Telephone Application Verification			HMDA (Check Applicable)			
Banker Signature*:		Yes	Not Applicable	GMI Collected: 🗌 Yes	🗆 No	
*By signing, Banker certifies that a signed, full application is on file						

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
Ethnicity			
I do not wish to	furnish this information		
Not Hispanic or	Latino		
Hispanic or Lat	INO (optional expanded origin below)		
Mexican			
Puerto R	lican		
Cuban			
Other His	spanic or Latino (enter origin)		
	ean, Colombian, Dominican, Nicaraguan, Spaniard, etc.		
Race			
I do not wish to	furnish this information		
	n or Alaskan Native d or principal tribe (optional)		
Asian (optional expa	anded race below)		
Asian Ind	dian		
Chinese			
Filipino			
Japanes	e		
Korean			
Vietnam	ese		
	sian (enter race) Laotian, Thai, Pakistani, Cambodian, etc		
Black or Africar			
Native Hawaiia (optional expanded rac	n or Other Pacific Islander		
Native H			
Guaman	ian or Chamorro		
Samoan			
Other Pa	acific Islander (enter race)		
i.e. Fijian, To			
White			
Sex			
I do not wish to	furnish this information		
Male			
Female			
ACE TO FACE APPLICATION:			
The applicant and/or co-applicant does no visual observation and/or surname as req			der has provided this information based on
Applicant Co-Applicant			
	nicity		
Sex			
HONE/VERBAL APPLICATION:			
□ The above disclosure was provided to the	applicant(s) orally. Their responses	s were documented by the Banker.	
Donkor's Cignoture			
Banker's Signature		Last Update	ed: Jan-19
Member		10.000	
FDIG MEMBER FDIC	2	E EQUAL HOU	SING LENDER
	DRAKE BANK N	MLS# 466969	

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