



## Personal Financial Statement

*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.*

APPLICANT INFORMATION			
Name	SSN/ITIN		
Date of Birth	Email		
Home/Cell Phone	Work Phone		
Address			
Martial Status	Married	Unmarried*	Separated      *includes single, divorced, widowed
Employment Information			
Present Employer			
Job Title	Years Employed		
Annual Income			
Salary			
Commission			
Rentals			
Other			
Alimony, child support or maintenance (only include if you want it considered as income)			
		TOTAL	

Declarations		
Are you a defendant in any legal suits or actions, or have you been convicted of a felony?	Yes	No
Have you ever gone through bankruptcy or had a judgment against you?	Yes	No
Are any assets pledged or debts secured except as shown?	Yes	No
Are any of your assets held in a Trust?	Yes	No
If so, describe and provide a copy of the Trust Declaration Page.		
Do you have a will?	Yes	No
Number of dependents?		None

### CO-APPLICANT INFORMATION

Name	SSN/ITIN
Date of Birth	Email
Home/Cell Phone	Work Phone
Address	
Martial Status	Married      Unmarried*      Separated
*includes single, divorced, widowed	
Employment Information	
Present Employer	
Job Title	Years Employed
Annual Income	
Salary	
Commission	
Rentals	
Other	
Alimony, child support or maintenance (only include if you want it considered as income)	
TOTAL	

### Declarations

Are you a defendant in any legal suits or actions, or have you been convicted of a felony?	Yes	No
Have you ever gone through bankruptcy or had a judgment against you?	Yes	No
Are any assets pledged or debts secured except as shown?	Yes	No
Are any of your assets held in a Trust?	Yes	No
If so, describe and provide a copy of the Trust Declaration Page.		
Do you have a will?	Yes	No
Number of dependents?		None

### SCHEDULE 1 – DUE FROM FRIENDS, RELATIVES & OTHERS

Bank / Debtor	Owed To	Collateral	Monthly Pymt	Maturity Date	Unpaid Balance
TOTAL					

### SCHEDULE 2 – MORTGAGE(S) AND CONTRACT(S) FOR DEED OWNED

Bank / Debtor	Property Type	1st or 2nd Lien	Owed To	Monthly Pymt	Unpaid Balance
TOTAL					

### SCHEDULE 3 – SECURITIES OWNED

# of Shares	Listed / Unlisted	Description	Person Owned By	Cost	Market Value	Loans
TOTAL						

### SCHEDULE 3 – RETIREMENT AND 401K

# of Shares	Description	Person Owned By	Cost	Market Value	Loans
TOTAL					

#### SCHEDULE 4 – LIFE INSURANCE

Person Insured	Insurance Company	Beneficiary	Face Value	Cash Value	Loans
TOTAL					

#### SCHEDULE 5 – REAL ESTATE OWNED

##### HOMESTEAD - PROPERTY 1

Address	Homestead
Title in Name(s) of	Year Acquired
Cost	Present Value
Balance 1st Loan	Balance 2nd Loan

HOMESTEAD TOTAL	Present Value	Unpaid Balance
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##### PROPERTY 2

Address	
Title in Name(s) of	Year Acquired
Cost	Present Value
Monthly Income	Unpaid Balance

##### PROPERTY 3

Address	
Title in Name(s) of	Year Acquired
Cost	Present Value
Monthly Income	Unpaid Balance

##### PROPERTY 4

Address	
Title in Name(s) of	Year Acquired
Cost	Present Value
Monthly Income	Unpaid Balance

PROPERTY 5

Address

Title in Name(s) of		Year Acquired
Cost		Present Value
Monthly Income		Unpaid Balance
PROPERTY 6		
Address		
Title in Name(s) of		Year Acquired
Cost		Present Value
Monthly Income		Unpaid Balance

OTHER REAL ESTATE OWNED TOTAL	Present Value	Unpaid Balance
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SCHEDULE 6 – MORTGAGE(S) OR LIENS ON REAL ESTATE

Enter loan details below for unpaid loans in Schedule 5. If additional lines are needed, attach an additional sheet.

	Bank / Debtor	Monthly Payment	Interest Rate	Maturity Date	Unpaid Balance
1					
2					
3					
4					
5					
6					
TOTAL					

SCHEDULE 7 – NOTES AND INSTALLMENT CONTRACTS PAYABLE TO BANKS & OTHERS

Bank / Debtor	Address	Collateral or Unsecured	Monthly Payment	Unpaid Balance
TOTAL				

Date

ASSETS	AMOUNT	LIABILITIES	AMOUNT
Cash at Drake Bank		SCH 7 - Notes Payable to Others	
Cash at Other Banks (Detail)		Owed to Dept. Stores / Credit Cards	
		Income Taxes Payable	
		Other Taxes Payable	
		SCH 3 - Loans on Securities	
		SCH 3 - Loans on Retirement / 40k Accounts	
		SCH 4 - Loans on Life Insurance	
SCH 1 - Due from Friends & Relatives		SCH 5 - Mortgage(s) on Real Estate Owned	
SCH 2 - Mortgages / Contract for Deed		Automobile Loans (Total)	
SCH 3 - Securities Owned		Other Liabilities (Total)	
SCH 3 - Retirement / 401k		Child Support	
SCH 4 - Cash Value of Life Insurance			
SCH 5 - Homestead & Real Estate Owned			
Automobiles (Total)			
Personal Property (Total)			
Other Assets (Detail)			
<b>TOTAL ASSETS</b>		<b>TOTAL LIABILITIES</b>	
<b>NET WORTH</b> (Total Assets Minus Total Liabilities)			
<b>TOTAL</b>			

CONTINGENT LIABILITIES	
Description	Amount
	<b>TOTAL</b>

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

THE UNDERSIGNED CERTIFIES THAT THE INFORMATION CONTAINED ON THIS FORM AND ANY ATTACHMENTS HAVE BEEN CAREFULLY REVIEWED AND THAT IT IS TRUE AND CORRECT IN ALL RESPECTS. We certify that everything I/we have stated in this form and on any attachments is true and correct, and fairly represents my/our financial condition. You may keep this application whether or not it is approved. By signing below, I/we authorize you to check my/our credit, employment history, or any other information contained herein. I/we understand that I/we must update this credit information at your request and if my/our financial condition changes.

**Important Information about Procedures for Opening a New Account**

To help the government fight the funding of terrorism and money laundering activities, Federal law requires all financial institutions to obtain, verify, and record information that identifies each person who opens an account. What this means for you: When you open an account, we will ask for your name, address, date of birth, and other information that will allow us to identify you. We may also ask to see your driver's license and other identifying documents.

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Applicant Signature

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Date

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Co-Applicant Signature

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Date

BANK USE ONLY			
Date Application Received	Received By		
Received via	<input type="checkbox"/> Phone (sign verification box) <input type="checkbox"/> Fax <input type="checkbox"/> Email <input type="checkbox"/> In Person <input type="checkbox"/> Mail		
Phone Application Verification Signature* <small>(by signing, Banker certifies that a signed, full application is on file.)</small>			
HDMA	<input type="checkbox"/> Yes <input type="checkbox"/> Not Applicable	GMI Collected	<input type="checkbox"/> Yes <input type="checkbox"/> No