

Personal Financial Statement



PERSONAL FINANCIAL STATEMENT AS OF _____ (date) (DATE)

IMPORTANT: Read these directions before completing this Statement.

- If 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, skip Applicant #2.
- If you are applying for joint credit with another person, complete all Sections providing information in Applicant #2 about the joint applicant. We intend to apply for joint credit. Applicant Signature: _____ Co-Applicant Signature: _____
- If you are applying for individual credit, but are relying on income from alimony, child support or separate maintenance or on the income or assets of another person as a basis for repayment of the credit requested, complete all Sections, providing information in Applicant #2 about the person whose alimony, support, or maintenance payments or income or assets you are relying.
- If this statement is related to your guaranty of the indebtedness of other person(s), firm(s) or corporation(s), skip Applicant #2.

Applicant #1

Name:		Email:		Phone:		Cell:		D/O/B:		Social Security #:	
Home Address:						Are you a US Citizen? (If no what is your country of citizenship?)			Yes <input type="checkbox"/> No <input type="checkbox"/>		
City:			State:		Zip:		If not a US Citizen, are you a Non-Resident Alien or Resident Alien?			NRA <input type="checkbox"/> RA <input type="checkbox"/>	
Own Home Rent:		Time There Years / Months:		Monthly Housing Payment:		Do you derive any personal income from outside the US? (If yes, what is the source and country?)			Yes <input type="checkbox"/> No <input type="checkbox"/>		
Name and Address of Employer:		Position / Title:		Date of Hire:		Do you reside in a foreign country? (If yes, what country)			Yes <input type="checkbox"/> No <input type="checkbox"/>		
		Gross Annual Income:		Other Annual Income:		Are you a US Veteran?			Yes <input type="checkbox"/> No <input type="checkbox"/>		

Applicant #2

Name:		Email:		Phone:		Cell:		D/O/B:		Social Security #:	
Home Address:						Are you a US Citizen? (If no what is your country of citizenship?)			Yes <input type="checkbox"/> No <input type="checkbox"/>		
City:			State:		Zip:		If not a US Citizen, are you a Non-Resident Alien or Resident Alien?			NRA <input type="checkbox"/> RA <input type="checkbox"/>	
Own Home Rent:		Time There Years / Months:		Monthly Housing Payment:		Do you derive any personal income from outside the US? (If yes, what is the source and country?)			Yes <input type="checkbox"/> No <input type="checkbox"/>		
Name and Address of Employer:		Position / Title:		Date of Hire:		Do you reside in a foreign country? (If yes, what country)			Yes <input type="checkbox"/> No <input type="checkbox"/>		
		Gross Annual Income:		Other Annual Income:		Are you a US Veteran?			Yes <input type="checkbox"/> No <input type="checkbox"/>		

Have you or a business you were a major owner of ever declared bankruptcy or made general assignment?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you or a business you are a major owner of a defendant in any lawsuits or legal action?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you owe any past due taxes (real estate, IRS, State, local municipality, etc.)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you have any contingent liabilities (endorser, guarantor, co-maker, pledged assets, liens)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you an executive officer, director, or principal shareholder of a financial institution?	<input type="checkbox"/> Yes <input type="checkbox"/> No

Assets (excluding business)		Liabilities (excluding business)	
Cash on Hand and in Banks (Schedule A)		Notes Payable to Banks - Secured (Schedule D)	
Marketable Securities (Schedule B)		Notes Payable to Banks - Unsecured (Schedule D)	
Other Securities		Other Notes Payable (Schedule D)	
Loans/Notes Receivable		Accounts and Bills Payable (Schedule E)	
Real Estate Owned (Schedule C)		Unpaid Taxes (Income and Real Estate)	
Autos / Other Personal Property		Real Estate Mortgages (Schedule C)	
Cash Value Life Insurance (Schedule B)		Other Liabilities	
Retirement Funds			
Other Assets		Total Liabilities	0
		Net Worth (Total Assets minus Total Liabilities)	0
Total Assets	0	Total Liabilities and Net Worth	0

Cash Income & Expenditures Statement for Year Ended			
Annual Income	Amount (\$)	Annual Expenditures	Amount (\$)
Salary (applicant)		Federal Income and Other Taxes	
Salary (co-applicant)		State Income and Other Taxes	
Bonuses & Commissions (applicant)		Rental Payments, Co-op or Condo Maintenance	
Bonuses & Commissions (co-applicant)		Mortgage Payments (Residential)	
Rental Income		Mortgage Payments (Investment)	
Interest Income		Property Taxes (Residential)	
Dividend Income		Property Taxes (Investment)	
Capital Gains		Interest & Principal Payments on Loans	
Partnership Income		Insurance	
Other Investment Income		Investments (Including tax shelters)	
Other Income		Alimony / Child Support	
		Tuition	
		Other Living Expenses	
		Other Expenses	
Total Income	0	Total Liabilities	0

Schedule A – Cash on Hand and in Banks					
	1	2	3	4	5
Bank Name					
Account #					
Balance					
Pledged (Y/N)					
Checking / Savings					
Name on Account					

Schedule B – Marketable Securities / Life Insurance				
Number of Shares / Face Values of Bonds	Description of Security (Name, Type)	In the Name(s) of	Cost	Present Value
Life Insurance Carried	Name of Company	Owner of Policy	Face Amount	Cash Surrender Value

Schedule C – Real Estate owned							
Property Address	Legal Owner	1 st / 2 nd Mortgage Holder	Mortgage Balance	Interest Rate	Date Acquired	Market Value	Monthly Payment

Schedule D – Loans Payable (Include Investor Notes Payable & Loans against Cash Surrender Value of Life Insurance)					
Payee Information		Purpose of Loan	Repayment	Maturity Date	Current Balance
		Secured By	Monthly Payment		
Payee #1			# of months		
Address					
Payee #2			# of months		
Address					
Payee # 3			# of months		
Address					

Schedule E – Accounts / Bills Payable			
Name and Address of Creditor	Credit Line	Monthly Payment	Current Balance

I (we) acknowledge and represent that the information in this Personal Financial Statement is provided for purposes of obtaining and/or maintaining credit with or loans from BankNewport (“Bank”) on behalf of myself (or ourselves) or as guarantor(s) of the obligation of another person or business entity. I (we) certify that this statement is a true, accurate and complete statement of my (our) financial condition. The Bank may rely upon this statement without verification of any of the information contained therein and without obtaining any further information and may continue to rely on this statement, and there has been no materially adverse change in my (our) financial condition, until I (we) notify you otherwise, in writing. I (we) agree to update this statement periodically if requested to do so and to obtain and verify such information from time to time in the future, to verify the continuing accuracy of the representations herein and in the loan or guaranty signed by me (us). I (we) also authorize the Bank to obtain or share credit information with affiliates of the Bank and any third party creditors, unless I (we) send written notice to the Bank that such sharing of credit information is not permitted. Such notice(s) shall be sent to the Bank at PO Box 450, Newport, RI, 02840 Attention: Commercial Lending.

The undersigned acknowledges that it is a Federal crime, reportable to appropriate law enforcement officials, to make false statements or material omissions in order to conceal pertinent facts regarding his (their) financial condition. The undersigned agree(s) to notify the Bank immediately of any change in name or address and any material change in the information in this financial statement or the financial condition of the undersigned. This financial statement becomes the property of the Bank, whether or not the Bank grants credit.

X _____ X _____
 Signature (please print, sign and return) Date Signature (please print, sign and return) Date

The applicant(s) agree(s) that if the Bank elects to include the Applicant in the Bank’s SBA (US Small Business Administration) loan program, the Bank may submit an SBA loan application on behalf of the Applicant(s) using the information contained in this financial statement and other information obtained from the Applicant(s).