



Financial Intelligence Pays Off

INDIVIDUAL FINANCIAL STATEMENT

| SCHEDULE A | | | CASH LOCATION AND STATUS OF CREDIT UNION AND OTHER ACCOUNTS | | | | | | | |
|------------|------|------|---|---------|---------------|------------------|--------------------------------|-----------------|-----------------------|----|
| Ckng | Sav. | CD's | Credit Union and Branch Where Carried | Balance | Interest Rate | CD Maturity Date | Is account pledged for a loan? | Balance of Loan | Maturity Date of Loan | |
| | | | | | | | | | | |
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| | | | | | | | | | | |
| | | | | | | | | | | |
| TOTAL | | | | \$ | | | | | TOTAL | \$ |

| SCHEDULE B | | STOCKS AND BONDS (Includes Interests In Any Closely Held Business) | | | | | | |
|-------------|------------|--|---------------------|------|-----------------|-------------|--------------------------------|--|
| Description | No. Shares | Registration Number | Source of Valuation | Date | Price Per Share | Total Value | Purchased on Margin or Pledged | |
| | | | | | | | | |
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| | | | | | | | | |
| | | | | | | | | |
| TOTAL | | | | | | \$ | | |

| SCHEDULE C | | LIFE INSURANCE | | | | |
|------------|---------------------|----------------|------------|-----------------|---------------------------|--------------------|
| Insured | Primary Beneficiary | Face Amount | Cash Value | Loans on Policy | Name of Insurance Company | Location of Office |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| TOTALS | | \$ | \$ | \$ | | |

| SCHEDULE D | | ACCOUNTS AND NOTES RECEIVABLE | | | | | |
|------------|----------|-------------------------------|------------|---------------|--------------|-------|-------------|
| Owner(s) | Due From | Address | Collateral | Maturity Date | How Payable? | | Balance Due |
| | | | | | Amount | Per | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| TOTAL | | | | | \$ | TOTAL | \$ |



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| SCHEDULE E | | REAL ESTATE | | | | | | | | | |
|------------|-------------|------------------|----------|---------------|------------------|--------------------------|--------------|----------------|-----------------|---------------|-------------|
| Parcel No. | Description | Location Address | Owner(s) | Date Acquired | Acquisition Cost | Mortgagee or Lien Holder | Annual Taxes | Monthly Income | Monthly Payment | Present Value | Balance Due |
| 1 | | | | | | | | | | | |
| 2 | | | | | | | | | | | |
| 3 | | | | | | | | | | | |
| 4 | | | | | | | | | | | |
| 5 | | | | | | | | | | | |
| 6 | | | | | | | | | | | |
| 7 | | | | | | | | | | | |
| 8 | | | | | | | | | | | |
| 9 | | | | | | | | | | | |
| 10 | | | | | | | | | | | |
| 11 | | | | | | | | | | | |
| 12 | | | | | | | | | | | |
| 13 | | | | | | | | | | | |
| 14 | | | | | | | | | | | |
| 15 | | | | | | | | | | | |
| 16 | | | | | | | | | | | |
| 17 | | | | | | | | | | | |
| 18 | | | | | | | | | | | |
| 19 | | | | | | | | | | | |
| 20 | | | | | | | | | | | |
| 21 | | | | | | | | | | | |
| 22 | | | | | | | | | | | |
| 23 | | | | | | | | | | | |
| 24 | | | | | | | | | | | |
| 25 | | | | | | | | | | | |
| 26 | | | | | | | | | | | |
| 27 | | | | | | | | | | | |
| 28 | | | | | | | | | | | |
| 29 | | | | | | | | | | | |
| 30 | | | | | | | | | | | |
| 31 | | | | | | | | | | | |
| 32 | | | | | | | | | | | |
| 33 | | | | | | | | | | | |
| 34 | | | | | | | | | | | |
| 35 | | | | | | | | | | | |
| TOTALS | | | | | | | \$ | \$ | \$ | \$ | \$ |



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INDIVIDUAL FINANCIAL STATEMENT

| SCHEDULE F | | OTHER ASSETS AND PERSONAL PROPERTY | | | | | | | |
|----------------------|------|------------------------------------|-----------------------|------|-------|----------------------|-------|------------------------------|----------|
| Automobiles | | Value | Rec. Vehicles & Boats | | Value | Personal Property | Value | Subtotal For | Subtotal |
| Year | Make | | Year | Make | | | | | |
| | | | | | | Furniture | | Subtotal – Automobiles | \$ |
| | | | | | | Jewelry | | Subtotal – RV's and Boats | \$ |
| | | | | | | Equipment | | | |
| | | | | | | Other: | | Subtotal - Personal Property | \$ |
| | | | | | | Other: | | | |
| Subtotal Automobiles | | \$ | Subtotal RV's/Boats | | \$ | Subtotal Pers. Prop. | \$ | Total for Other Assets | \$ |

| SCHEDULE G | | NOTES AND LOANS PAYABLE TO CREDIT UNIONS AND OTHERS | | | | | |
|------------|---------|---|------------------|---------------|--------------|-------|-------------|
| Payable To | Address | Collateral | Person(s) Liable | Maturity Date | How Payable? | | Balance Due |
| | | | | | Amount | Per | |
| | | | | | | | |
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| | | | | | | | |
| TOTAL | | | | | | TOTAL | |

| SCHEDULE H | | ACCOUNTS AND BILLS PAYABLE (Including Credit Cards) | | | | |
|------------|----------------|---|--------------|-------|-------------|--|
| Payable To | Account Number | Person(s) Liable | How Payable? | | Balance Due | |
| | | | Amount | Per | | |
| | | | | | | |
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| | | | | | | |
| TOTAL | | | | TOTAL | | |

| SCHEDULE I | | OTHER LIABILITIES | | | |
|------------|------------|-------------------|--------------|-------|-------------|
| Payable To | Collateral | Person(s) Liable | How Payable? | | Balance Due |
| | | | Amount | Per | |
| | | | | | |
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| | | | | | |
| TOTAL | | | | TOTAL | |



Financial Intelligence Pays Off

INDIVIDUAL FINANCIAL STATEMENT

If applicant resides in a community property state, please complete the following concerning marital status:

Applicant is: married separated unmarried (includes single, divorced and widowed)

Co-Applicant, if any, is: married separated unmarried (includes single, divorced and widowed)

| | | | | | | | | | |
|----------------------------|---|--|--------------------------|--|-----------------------------|-----------------------------|-----------------------|----------------|--|
| APPLICANT INFORMATION | Social Security No. | | Driver's Licensee Number | | Visa or MasterCard No. | | Home Phone | | |
| | Occupation | | Name of Employer | | | No. of Years | Salary \$ per | Business Phone | |
| | Amount of alimony, child support and separate maintenance payment income. NOTE: Alimony, child support or separate Maintenance payment income need not be revealed if you do not wish to have it considered as a basis for repaying this obligation. \$ | | | | | | | | |
| | Name and address of payer of any alimony, child support or separate maintenance payment income disclosed above as a source of repayment: | | | | | | | | |
| | Alimony, child support, or separate maintenance received under: <input type="checkbox"/> court order <input type="checkbox"/> written agreement <input type="checkbox"/> oral agreement <input type="checkbox"/> Other: | | | | | | | | |
| | Income (salary, social security, dividend, interest, etc.) | | | | | | | | |
| | Source: \$ per month | | | | | | | | |
| | Have you borrowed from any other branch of this credit union? Branch Name: Date: | | | | | | | | |
| | Number of Dependents: Ages: Have you established a trust? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, is it: <input type="checkbox"/> Revocable <input type="checkbox"/> Irrevocable Name(s) of Trustee(s): Have you made a will? <input type="checkbox"/> Yes <input type="checkbox"/> No Name of Personal Representative: Have you guaranteed or endorsed the notes and/or loans of any other person? <input type="checkbox"/> Yes <input type="checkbox"/> No Do you have any other contingent liabilities? <input type="checkbox"/> Yes <input type="checkbox"/> No Have any actions or suits been filed against you or are there any recorded judgments or decree entered against you or have you been adjudged bankrupt in the last 7 years or made any assignments for the benefit of creditors? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please explain: | | | | | | | | |
| | Name of a Reference | | | | | Address/Phone Number | | | |
| CO-APPLICANT INFORMATION | Co-Applicant's Full Name: | | | | Age: | Address: | | | |
| | Social Security No. | | Driver's Licensee Number | | Visa or MasterCard No. | | Home Phone | | |
| | Occupation | | Name of Employer | | | No. of Years | Salary \$ per | Business Phone | |
| | Amount of alimony, child support and separate maintenance payment income. NOTE: Alimony, child support or separate Maintenance payment income need not be revealed if you do not wish to have it considered as a basis for repaying this obligation. \$ | | | | | | | | |
| | Name and address of payer of any alimony, child support or separate maintenance payment income disclosed above as a source of repayment: | | | | | | | | |
| | Alimony, child support, or separate maintenance received under: <input type="checkbox"/> court order <input type="checkbox"/> written agreement <input type="checkbox"/> oral agreement <input type="checkbox"/> Other: | | | | | | | | |
| | Income (salary, social security, dividend, interest, etc.) | | | | | | | | |
| | Source: \$ per month | | | | | | | | |
| | Have you borrowed from any other branch of this credit union? Branch Name: Date: | | | | | | | | |
| | Number of Dependents: Ages: Have you established a trust? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, is it: <input type="checkbox"/> Revocable <input type="checkbox"/> Irrevocable Name(s) of Trustee(s): Have you made a will? <input type="checkbox"/> Yes <input type="checkbox"/> No Name of Personal Representative: Have you guaranteed or endorsed the notes and/or loans of any other person? <input type="checkbox"/> Yes <input type="checkbox"/> No Do you have any other contingent liabilities? <input type="checkbox"/> Yes <input type="checkbox"/> No Have any actions or suits been filed against you or are there any recorded judgments or decree entered against you or have you been adjudged bankrupt in the last 7 years or made any assignments for the benefit of creditors? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please explain: | | | | | | | | |
| Name of a Reference | | | | | Address/Phone Number | | | | |



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INDIVIDUAL FINANCIAL STATEMENT

SIGNAUTTRES

I (we) hereby affirm that the foregoing information contained in this financial statement is presented for the purpose of obtaining credit as of the date indicated and is true, complete and correct. I understand Credit Union is relying on this statement of my financial condition in making loan(s) to me. Credit Union is authorized to make any investigation of my credit or employment status either directly or through any agency employed by Credit Union for that purpose now and in the future. Credit Union may disclose to any other interested parties Credit Union's experience with this account. I agree to inform the Credit Union immediately of any matter which will cause any material change to my financial condition. I understand that Credit Union will retain this financial statement whether or not credit is granted.

Applicant's Signature: _____ Date: _____

Co-Applicant's Signature: _____ Date: _____

Consent (If you are relying on income from a person who is not an applicant above, please have that person complete this section so we can verify their credit.)

I authorize Credit Union to make any investigation of my credit either directly or through any agency employed by Credit Union for that purpose in connection with credit application now and in the future.

Signature: _____ Date: _____

Social Security Number: _____