

**Personal Financial Statement**  
**Submitted to: SOUND BANKING COMPANY**  
**As of Date \_\_\_\_\_**

Check one  Individual Statement  
 Joint Statement

\_\_\_\_\_  
 (applicant/borrower initials)

**PERSONAL INFORMATION (Please Print)**

Name of First Individual		Name of Second Individual	
Social Security Number		Social Security Number	
Home Address	Birth date	Home Address	Birth date
City, State, Zip	Yrs. At Address	City, State, Zip	Yrs. At Address
Employer	Yrs. At Employer	Employer	Yrs. At Employer
Home Phone ( )	Work Phone ( )	Home Phone ( )	Work Phone ( )
Drivers License # & State	Issue Date / Expiration Date /	Drivers License # & State	Issue Date / Expiration Date /

Check this space if you are providing a current year income tax return complete with all schedules in lieu of completing the below section, "Annual Income". By doing so, you certify, that the tax return information is correct and that the bank may rely upon it as stated below. Note: The Annual Expenditures and Contingent Liabilities Sections must still be completed.

**ANNUAL INCOME AND EXPENDITURES FOR YEAR ENDED \_\_\_\_\_, 20\_\_\_\_\_**

GROSS ANNUAL INCOME	Amount	ANNUAL EXPENDITURES	Amount
Salary, Bonuses & Commissions		Mortgage/Rental Payment	
Dividends, Interest		Real Estate Taxes & Assessments	
Real Estate Income		Taxes- Federal, State, Local	
Other Income (List)		Insurance Payments	
		Interest and Principal Payments on Loans	
Any significant changes expected in the next 12 months? <input type="checkbox"/> Yes <input type="checkbox"/> No (If yes, attach info)		Alimony, Child Support Maintenance	
<b>TOTAL INCOME</b>	\$	Other Expenses (List)	
**Alimony, Child Support, or Separate Maintenance Income need to be revealed if you do not wish you have it considered as a basis for repaying this obligation.**			
		<b>TOTAL EXPENDITURES</b>	\$

**STATEMENT OF FINANCIAL CONDITION AS OF \_\_\_\_\_, 20\_\_\_\_\_**

ASSETS	Amount	LIABILITIES	Amount
Cash (Sch A)		Notes Payable to this Bank	
Deposits in the Bank (Sch A)		Secured	
Deposits in other Banks (Sch A)		Unsecured	
Readily Mrktble Securities (Sch A)		Notes Payable to Others (Sch G)	
Non-Readily Mrktble Securities (Sch C & Sch F)		Secured	
Accounts & Notes Receivable		Unsecured	
Residential Real Estate (Sch D)		Accounts Payable (Inc. Ch Cards) (Sch G)	
Real Estate Investments (Sch D)		Margin Accounts	
Cash Value of Life Insurance (Sch E)		Notes Due: Business Ventures (Sch F)	
IRA, Keogh (Number of Years Deferred )		Taxes Payable	
Automobiles (List)		Mortgage Debt (Sch D)	
		Life Insurance Loans (Sch E)	
Personal Property/Other Assets (List)		Other Liabilities (List)	
		<b>TOTAL LIABILITIES</b>	
		<b>NET WORTH</b>	
<b>TOTAL ASSETS</b>	\$	<b>TOTAL LIABILITIES &amp; NET WORTH</b>	\$

**SCHEDULE A- Cash, Checking and Savings Accounts, Certificates of Deposits, Money Market Funds, Ect.**

Financial Institution	Account Type	Owner	(J)	If Pledged, To Whom?	Balance

**SCHEDULE B& C- US Government & Marketable Securities or Non-Marketable Securities (Please indicate if Non-Marketable)**

No. of Shares or Value of Bonds	Description	In Name(s) of	Are these Registered, Pledged of Held by Other?	Market Value	Exchanges Where Traded
				\$	
				\$	
				\$	

**SCHEDULE D- Personal Residence & Real Estate Investments, Mortgage Debt. (Attach Additional Schedule if Necessary) \*Including Taxes & Insurance**

Type of Property	Legal Owner	Purchase Year/Price	Market Value	Present Loan Balance	Interest Rate	Loan Maturity Date	Monthly Payment	% Owned	Lender

**SCHEDULE E- Life Insurance Carried, Including Group Insurance.**

Name of Insurance Company	Owner of Policy	Beneficiary/Relationship	Type of Policy	Face Amount	Policy Loans	Cash Surrender Value

**SCHEDULE F- Business Ventures (Use additional sheets if necessary)**

List Name & Address of Any Business Venture, In which you are a Principal or Partner	Your Position/Title in the Business	Line of Business	Years In Business	Current Market Value	Your % of Ownership	Balance due on Partnership Notes, Cash Call	Final Contribution Date

**SCHEDULE G- Loans Owing Banks, Broker, Finance Companies, and Others (MasterCard, Visa, and Ect.)**

Owing to (Account Number)	(J)	Line/Original Amount & Date	Present Balance	Type of Loan	Monthly Payment	Date of Final Payment	Secured By
			\$		\$		
			\$		\$		
			\$		\$		

CONTINGENT LIABILITIES	Yes	No	Income Tax Returns files through (date):____  Are any tax obligations past due? <input type="checkbox"/> Yes <input type="checkbox"/> No	Have (either of) you or any firm in which you were a major owner ever declared bankruptcy? <input type="checkbox"/> Yes <input type="checkbox"/> No  If yes, please provide details: _____
Are you a Guarantor, co-makers, or endorser for any debt of an individual, corporation, or partnership?	<input type="checkbox"/>	<input type="checkbox"/>		
Do you have any outstanding letters of credit or security bonds?	<input type="checkbox"/>	<input type="checkbox"/>		
Are there any suits or legal actions pending against you?	<input type="checkbox"/>	<input type="checkbox"/>		
Are you contingently liable for any leases or contracts?	<input type="checkbox"/>	<input type="checkbox"/>		
What would be your total estimated tax liability if you were to sell all your major assets?	\$			

If yes for any above, give detail:

This financial statement is given to Sound Banking Company (the "Bank") by person(s) signing this statement in connection with an application for credit or extension of credits such person(s) or to another based upon the guarantee of such person(s). Every person signing this statement agrees that the Bank is entitles to rely upon the information in this statement in its credit decision relating to such person or to another based upon the guarantee of such person.

Every person who signs this financial statement certifies and agrees that (1) the information provided in this statement is true and complete and gives an accurate description of such person's financial condition; except as listed on this statement, (2) such person has no undisclosed direct of contingent liabilities; and (3) title to all listed assets is solely on the name of such person and no other person or entity has an interest in such assets; unless otherwise listed in this statement. In the event of any change in such person's name, address, or employment, such person agrees to send written notice to Bank within five (5) business days after such a change. Every person who signs this statement further agrees to send written notice to the Bank within five (5) days after the occurrence of any material and adverse change. (A) In any of the information contained in this statement, or (B) in the ability of such person to perform his or her obligation which are owed to the Bank or (C) In the financial condition of such person. If no such written notice is given, the Bank shall be authorized to consider this statement as a continuing statement, substantially correct in all respects

The Bank is hereby authorized to request a consumer report on any person signing this statement in connection with the present application for credit or any update, renewal, or extension of such credit. Upon this request, the Bank will tell any such person whether or not a consumer report was requested, the name and address of the consumer reporting agency that furnished the report. Every person signing this statement further authorizes the Bank to make all necessary inquiries to verify the Information in this statement and also authorize all such persons or entities the Bank contacts to completely respond to such inquiries.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature (First Individual)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature (Second Individual)