

PERSONAL FINANCIAL STATEMENT

LENDER: FARMERS STATE BANK NMLS# 554075

Financial Condition as of: _____

INDIVIDUAL INFORMATION		INDIVIDUAL INFORMATION	
Name:		Name:	
Address:		Address:	
City, State, Zip Code:		City, State, Zip Code:	
Phone Number:		Phone Number:	
SSN:		SSN:	
Date of Birth:		Date of Birth:	
Primary Identification:		Primary Identification:	
Issued by (state/country):	Type: <input type="checkbox"/> Driver License <input type="checkbox"/> State ID Card <input type="checkbox"/> Military ID Card <input type="checkbox"/> Passport <input type="checkbox"/> VISA/ Alien Registration <input type="checkbox"/> Other:	Issued by (state/country):	Type: <input type="checkbox"/> Driver License <input type="checkbox"/> State ID Card <input type="checkbox"/> Military ID Card <input type="checkbox"/> Passport <input type="checkbox"/> VISA/ Alien Registration <input type="checkbox"/> Other:
Number:		Number:	
Issue Date:	Exp Date:	Issue Date:	Exp Date:
Occupation:		Occupation:	
Business Name (if applicable):			
Business Address:			
Business Phone Number:			

ASSETS (What you own currently)	AMOUNT	LIABILITIES (what you owe currently)	AMOUNT
Cash, Checking, and Savings		Loans payable to banks- secured	
CD's, Savings Bonds, Stocks		Loans payable to banks- unsecured	
Retirement Accounts		Real Estate Mortgage payable	
Real Estate Owned		Credit Cards	
Loans Receivable		Credit Cards	
Automobiles			
Recreational Vehicles		Other debts:	
Other Personal Property: Please list below			
US Gov't & Marketable Securities			
Other Assets : Please list below			
TOTAL ASSETS		TOTAL LIABILITIES	
		NET WORTH	

ANNUAL INCOME	CONTINGENT LIABILITIES
Source of Income:	Do you have any contingent liabilities? If yes, please list:
Salary:	
Bonuses & Commission	
Dividends	As endorser, co-maker, or guarantor?
Real Estate Income	On leases or contracts?
Other Income: Please list below	Legal claims
	Other special debt
	Child Support

REAL ESTATE OWNED

Address & Type of Property	Title in Name of	Date Acquired	Cost	Market Value	Mortgage Maturity	Mortgage Amount

LIFE INSURANCE CARRIED, INCLUDING N.S.L.I. AND GROUP INSURANCE

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

RETIREMENT ACCOUNTS

Name of Financial Institution	Amount	Description

BANKS OR FINANCE COMPANIES WHERE CREDIT HAS BEEN OBTAINED

Name & Address of Lender	Credit in the Name of	Secured or Unsecured?	Original Date	High Credit	Current Balance

The information contained in this statement is provided for the purpose of obtaining, or maintaining credit with you on behalf the undersigned ma either severally or jointly with others, execute a guaranty in your favor. Each undersigned understands that you are relying on the information provided herein (including the designation made as to ownership of property) in deciding to grant or continue credit. Each undersigned represents and warrants that the information provided is true and complete and that you may consider this statement as continuing to be true and correct until a written notice of a change is given to you by the undersigned. You are authorized to make all inquiries you deem necessary to verify the accuracy of the statements made herein, and to determine my/our creditworthiness. You are authorized to answer questions about your credit experience with me/us.

Signature: _____

Signature: _____

Date Signed: _____

Date Signed: _____