1st Colonial NATIONAL BANK

Personal Financial Statement

OWNER/GUARANTOR FOR _____ As of _____ 20 _____

BUSINESS NAME

PERSONAL INFORMATION					
APPLICANT (NAME)			SPOUSE (IF CO-APPLICANT)		
Home Address			Home Address		
Home Phone #	E-mail Address	Social Security #	Home Phone #	E-mail Address	Social Security #
Date of Birth	# of Dependents	Employer	Date of Birth	# of Dependents	Employer
Address of Employer			Address of Employer		
Business Phone #	# of Years with Employer	Title/Position	Business Phone #	# of Years with Employer	Title/Position

Cash Income & Expenditures Statement For Year Ended _____ **(Omit cents)**

ANNUAL INCOME	AMOUNT ($)
Salary (applicant)	$
Salary (co-applicant)	
Gross Rental Income	
Interest Income &	
Dividend	
Capital Gains/(loss)	
Other Income (List) **	
TOTAL ANNUAL INCOME ➤	$

ANNUAL EXPENDITURES		AMOUNT ($)
Federal Income and Other State Taxes		$
Residences	Mortgage Rent	
Housing	Taxes/Comm Fees	
Second	Mortgage	
Residence	Taxes/Comm Fees	
Investment	Mortgage(s)	
Real Estate	Taxes	
	Operating Expenses	
Other Loans - Principal & Interest		
Credit Card Payments		
Alimony/Child Support		
Tuition/Day-Care		
Investment Obligations		
Other Expenses		
TOTAL ANNUAL EXPENDITURES ➤		$

Any significant changes expected in the next 12 months? ☐ Yes ☐ No (If yes, attach information).

** Income from alimony, child support, or separate maintenance income need not be revealed if the applicant or co-applicant does not wish to have it considered as a basis for repaying this obligations.

Balance Sheet as of _____

ASSETS	AMOUNT (S)	LIABILITIES	AMOUNT (S)
Cash in this Bank		Notes Payable to this Bank	
(including money market accounts, CDs)	$	Secured	$
Cash in Other Financial Institutions (List)		Unsecured	
(including money market accounts, CDs)		Notes Payable to Others (Schedule E)	
Marketable Securities (Attach Schedule)		Secured	
Accounts and Notes Receivable		Unsecured	
Net Cash Surrender Value of LIfe Insurance (Schedule B)		Accounts Payable (including credit cards)	
Residential Real Estate (Schedule C)		Margin Accounts	
Real Estate Investments (Schedule C)		Taxes Payable	
Partnerships/PC Interests (Schedule C)			
IRA, Keogh, Profit-		Mortgage Debt (Schedule C)	
Sharing & Other Vested Retirement Accts.		Life Insurance Loans (Schedule B)	
Personal Property (including automobiles)		Other Liabilities (List):	
Other Assets (List):			
		TOTAL LIABILITIES	
		NET WORTH	
TOTAL ASSETS ➤	$		$

Schedule B - Insurance

Insurance Company	Face Amount of Policy	Type of Policy	Beneficiary	Cash Surrender Value	Amount Borrowed	Ownership

Disability Insurance	Applicant	Co-Applicant
Monthly Distribution if Disabled		

Schedule C - Real Estate Owned

Address & Description of Property	Date of Acquisition	Title in Name of	Cost	Market Value	Mortgages		Name of Lender
					Balance	Mo. Payment	

Schedule E - Loans, Credit Cards & Accounts Payable Not Listed in Schedule C

Payable to:	Type	Balance Owed	Collateral	Monthly Payment	Maturity

Please Answer The Following Questions:

1. Have (either of) you or any firm in which you were a major owner ever declared bankruptcy? ☐ Yes ☐ No

   If yes, please provide details: _____

2. Do (either of) you have a line of credit or unused credit facility at any other institution(s)? ☐ Yes ☐ No

   If so, please indicate where, how much, and name of banker: _____

3. Please list any contingent liabilities (Guarantor, Co-signor for any other debts not directly in your name) — Amount

IMPORTANT: Read these Directions before completing this Application. Check appropropriate box

☐ 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, complete all sections except those that apply to co-applicant.

☐ If this is an application for joint credit with another person, complete all Sections, providing information about the joint applicant.

We intend to apply for joint credit:

Applicant _____ Co-Applicant _____

☐ 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 the basis for repayment of the credit requested, complete all sections to the extent possible, providing information in the Co-Applicant Sections about the person on whose alimony, support, or maintenance payments or income or assets you are relying.

Representations and Warranties: The information contained in this statement is provided to induce you to extend or to continue the extension of credit to me or to others upon my guarantee. I acknowledge and understand that you are relying on the information provided herein in deciding to grant or to continue credit. I represent, warrant and certify that the information provided is true, correct and complete, and agree to promptly notify you of any material changes to this information. If I fail to notify you as required above, or if any of the information should prove to be materially inaccurate or incomplete, you may declare my debt or that which I guarantee immediately payable. You are authorized to make all inquiries you deem necessary to verify accuracy and determine my creditworthiness. I authorize any person or consumer reporting agency to give you any information it may have on me, and authorize you to answer any questions about your credit experience with me. I shall continue to supply you annually with an updated financial statement. Any statement or financial information that I give to you shall be your property.

Signature _____ Signature _____

Date _____ Date _____