



PERSONAL FINANCIAL STATEMENT AS OF _____

SUBMITTED TO:
CONSUMERS CREDIT UNION

PERSONAL INFORMATION					
APPLICANT NAME			CO-APPLICANT NAME		
Home Address			Home Address		
Home Phone No.	Social Security No.	Date of Birth	Home Phone No.	Social Security No.	Date of Birth
Mobile Phone No.	Email Address		Mobile Phone No.	Email Address	
Employer and Address			Employer and Address		
Business Phone No.	No. of Years with Employer	Title/Position	Business Phone No.	No. of Years with Employer	Title/Position
If applicant(s) reside in a community property state, please complete the following concerning marital status:					
Marital Status: <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed			Marital Status: <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed		

Have you established a trust? Yes No If yes, is it: Revocable Irrevocable Name of Trustee _____
 Have you made a will? Yes No Name of Personal Representative _____

CASH INCOME & EXPENDITURE STATEMENT FOR THE YEAR ENDED _____ (omit cents)

ANNUAL INCOME	APPLICANT	CO-APPLICANT	ANNUAL EXPENDITURES	APPLICANT	CO-APPLICANT
Salary			Mortgage/Rent-Residence		
Bonuses & Commissions			All Other Debt Service		
Interest & Dividends			Federal Income/Other Taxes		
Rental Income (Net Expenses)			State Income/Other Taxes		
Partner/Owner Draws/Distributions			Insurance (Home, Health, Auto)		
Other Income (List) gifts, trusts (family trust income)*			Other Expenses (List) property taxes-residence and investments		
			Other Living Expenses		
TOTAL INCOME (\$)			TOTAL EXPENDITURES (\$)		

Balance Sheet as of _____

ASSETS	AMOUNT (\$)	LIABILITIES	AMOUNT (\$)
Cash in this Credit Union		Notes Payable to Banks - Secured (Sch H)	
Cash in Other Financial Institutions (Sch A)		Notes Payable to Banks - Unsecured (Sch H)	
Readily Marketable Securities (Sch B)		Notes Payable to Others - Secured (Sch H)	
Non-Readily Marketable Securities (Sch B)		Notes Payable to Others - Unsecured (Sch H)	
Accounts and Notes Receivable (Sch C)		Accounts Payable including credit cards (Sch I)	
Cash Surrender Value of Life Insurance (Sch D)		Margin Accounts	
Residential Real Estate (Sch F)		Notes Due: Partnerships/Other Entities (Sch G)	
Real Estate Investments (Sch F)		Mortgage Debt (Sch F)	
Partnership/LLC/S Corporation (Sch G)		Loans on Life Insurance Policies (Sch D)	
Personal Property (Including Automobiles) (Sch E)		Taxes Payable	
IRAs, Keoghs and Other Qualified Plans		Other Liabilities (Sch J)	
Sole Proprietorship Assets		TOTAL LIABILITIES (\$)	
Tax Refund Due		Estimated Tax Liability If All Major Assets Sold	
Other Assets (Sch E)		SUBTOTAL (\$)	
		NET WORTH (\$)	
TOTAL ASSETS (\$)		TOTAL LIABILITIES AND NET WORTH (\$)	

*Other Income: Could include gifts, trusts (family trust income). Alimony, child support or separate maintenance income need not be revealed if you do not wish to have it considered as a basis for repaying this obligation.

CONTINGENT LIABILITIES (Must be Completed; If None, Then Write "None" Below.	YES	NO	AMOUNT (\$)
Are you a guarantor, co-maker, 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 surety bonds?	<input type="checkbox"/>	<input type="checkbox"/>	
Are there any lawsuits or legal actions pending against you?	<input type="checkbox"/>	<input type="checkbox"/>	
Are you contingently liable on any lease or contract?	<input type="checkbox"/>	<input type="checkbox"/>	
Are any of your tax obligations past due?	<input type="checkbox"/>	<input type="checkbox"/>	
Are you obligated to pay alimony and/or child support?	<input type="checkbox"/>	<input type="checkbox"/>	
Other contingent liabilities (describe)	<input type="checkbox"/>	<input type="checkbox"/>	

OTHER QUESTIONS	YES	NO
Have you, or any firm in which you were a major owner, ever filed a petition in bankruptcy or has one been filed individually against you? If yes, provide details below:	<input type="checkbox"/>	<input type="checkbox"/>
Are you an executive officer, director or principal shareholder of a credit union? If yes, provide credit union name below:	<input type="checkbox"/>	<input type="checkbox"/>

PLEASE INDICATE OR PROVIDE AN EXPLANATION AS TO ANY ASSETS OWNED JOINTLY OR BY A TRUST OR LIABILITIES OWED TO OTHERS. ATTACH SCHEDULES AND EXPLANATORY NOTES IF NECESSARY.

SCHEDULE A - CASH, SAVINGS AND CERTIFICATE ACCOUNTS					
Financial Institution Name	Type of Account	Owner(s)	Current Balance	PLEGGED	
				YES	NO
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

SCHEDULE B - STOCKS AND BONDS							
# of Shares (Stock) or Face Value (Bonds)	Description	Owner(s)	Where Held	Cost	Current Market Value	PLEGGED	
						YES	NO
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>

SCHEDULE C - ACCOUNTS AND NOTE RECEIVABLE							
Owner(s)	Due From	Address	Collateral	Maturity Date	Repayment Schedule		Balance Due
					Amount	Per	

SCHEDULE D - LIFE INSURANCE							
Insurance Co.	Face Amount	Type of Policy	Beneficiary	Cash Surrender Value	Cost	Amount Borrowed	Ownership

SCHEDULE E - OTHER ASSETS AND PERSONAL PROPERTY							
Automobiles			Rec. Vehicles & Boats			Personal Property	Value
Year	Make	Value	Year	Make	Value		

SCHEDULE F - PERSONAL RESIDENCE & REAL ESTATE INVESTMENTS, MORTGAGE DEBT

Personal Residence Address	Legal Owner	Purchase		Market Value	Present Loan Balance	Lender	Maturity Date	Monthly Payment	Interest Rate
		Price	Year						

SCHEDULE G - PARTNERSHIPS/LLCS/S CORPORATIONS

Type of Investment	Date of Investment	Cost of Investment	% Owned	Current Market Value	Balance Due on Partnership Notes of Cash Calls	Current Year Investments
Business/Professional (indicate name)						
Investments (including tax shelters)						

Note: For investments listed above that represent a material portion of your total assets, please include financial statements or tax returns of the entities, plus any Schedule K-1s provided to you.

SCHEDULE H - NOTES PAYABLE

Due to	Type of Facility	Maximum Amount of Facility	Collateral	Monthly Payment	Interest Rate	Maturity Date	Unpaid Balance

SCHEDULE I - ACCOUNTS AND BILLS PAYABLE (INCLUDING CREDIT CARDS)

Due to	Account Number	Person Liable	Repayment Schedule		Unpaid Balance
			Amount	Per	

SCHEDULE J - OTHER LIABILITIES

Due to	Account Number	Person Liable	Repayment Schedule		Unpaid Balance
			Amount	Per	

SIGNATURES AND AFFIRMATION SECTION

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 the Credit Union is relying on my financial condition in making loan(s) to me. The Credit Union or its designee is authorized to make any investigation of my credit or employment status either directly or through any agency employed by the Credit Union for that purpose now and in the future. The 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 the Credit Union will retain this financial statement whether or not credit is granted.

Applicant's Signature: _____

Date: _____

Co-Applicant's Signature: _____

Date: _____