

**Personal Financial Statement --- Confidential**



Principal's Exact Legal Name: \_\_\_\_\_

Spouse's Exact Legal Name: \_\_\_\_\_

Financial Information as of: \_\_\_\_\_

**Personal Financial Statement Required for Each Principal**

**Please do not leave any questions unanswered. Use "no" or "none" where necessary.**

<b>Assets</b>	<b>Dollars</b>	<b>Liabilities and Net Worth</b>	<b>Dollars</b>
Cash on hand and in Banks (Schedule A)	\$	Credit Card Balances	\$
Retirement Accounts (IRA, 401K, etc.) (Schedule B)		Automobile Loans	
Stocks & Bonds not held in Retirement Accounts (Schedule C)		Notes Payable—Businesses Owned (Schedule F)	
Accounts and Notes Receivable		Notes Payable to Others (Schedule G)	
Real Estate Owned (Schedule D)		Unpaid Taxes	
Cash Surrender Value of Life Insurance		Real Estate Mortgages Payable (Schedule E)	
Businesses Owned (Market Value) Schedule F)		Other Liabilities: Please Itemize	
Automobiles (Year, Make, Model)			
1.			
2.			
Other Assets: Please Itemize			
		<b>TOTAL LIABILITIES</b>	<b>\$</b>
		<b>NET WORTH = Assets-Liabilities</b>	<b>\$</b>
<b>TOTAL ASSETS</b>	<b>\$</b>	<b>TOTAL LIABILITIES AND NET WORTH</b>	<b>\$</b>

**Personal Financial Statement --- Continued**

Annual Income	Dollars		Contingent Liabilities (Debts you are obligated to pay if the borrower does not pay or debts contingent on the outcome of an event)	Dollars
	Principal	Spouse		
Salary			As endorser, co-maker or guarantor	
Net Investment Income			Legal claims and judgments	
Real Estate Income			Provision for federal income tax	
Other Income			Other special debt (i.e. recourse or repurchase liability)	
<b>Total Annual Income</b>	\$	\$	<b>Total Contingent Liabilities</b>	\$

General Information	Principal	Spouse
Employer		
Position & length of employment		
Employer's Phone No.		
Partner, Officer in any other Venture? If so, explain below.	<input type="checkbox"/> No <input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> Yes
Are you a Defendant in any suits or legal action? If so, explain below.	<input type="checkbox"/> No <input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> Yes
Have you ever filed for bankruptcy or settled any debts for less than the amount owed? If so, explain below.	<input type="checkbox"/> No <input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> Yes
Have you ever had a judgment or lien against you? If so, explain below.	<input type="checkbox"/> No <input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> Yes
Have you ever had any repossessions? If so, explain below.	<input type="checkbox"/> No <input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> Yes

Explanations for above (if needed): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## Personal Financial Statement --- Continued

### Schedule A: Banks, Brokers, Savings & Loan Association, Finance Companies or Credit Unions

Name of Institution	Name on Account	Account #	Balance on Deposit
<b>TOTAL</b>			

### Schedule B: Retirement Accounts (IRA, 401K, etc.)

Account Description	Account Owner	Market Value
<b>TOTAL</b>		

### Schedule C: Stocks & Bonds not held in Retirement Accounts

# of Shares	Description	Registered Owner	L-Listed U-Unlisted	Cost	Market Value
<b>TOTAL</b>					

### Schedule D: Real Estate Owned

Property #	Address	Title In Name of	Monthly Income	Year Acquired	Cost	Market Value
1	Homestead		N/A			
<b>TOTAL</b>						

## Personal Financial Statement --- Continued

### Schedule E: Real Estate Mortgages Payable

Property #	To Whom Payable	Monthly Payment	Unpaid Balance
1			
2			
<b>TOTAL</b>			

### Schedule F: Businesses Owned - Market Value & Notes Payable

Business Name	Nature of Business	Business Structure	% Owned	Owned By	Market Value	Notes Payable
<b>TOTALS</b>						

### Schedule G: Notes Payable to Others

To Whom Payable	Address	Secured By	Monthly Payment	Maturity Date	Unpaid Balance
<b>TOTAL</b>					

I/we have carefully read and submitted the foregoing information provided on this statement to Dexter Financial Services, Inc. (DFS). The information is presented as a true and accurate statement of my/our financial condition on the date indicated. This statement is provided for the purpose of obtaining and maintaining credit with DFS. I/we agree that if any material change(s) occur(s) in my/our financial condition that I/we will immediately notify DFS of said change(s) and unless DFS is so notified it may continue to rely upon this financial statement and the representations made herein as a true and accurate statement of my/our financial condition.

I/we authorize DFS to make whatever credit inquiries it deems necessary in connection with this financial statement. I/we authorize and instruct any person or consumer reporting agency to furnish to DFS any information that it may have or obtain in response to such credit inquiries. I/we also hereby certify that no payment requirements listed herein are delinquent or in default except as follows; if "NONE" so state. \_\_\_\_\_

**US Applicants:** I/we fully understand that it is a federal crime punishable by fine or imprisonment or both to knowingly make any false statements concerning any of the above facts, pursuant to 18 U.S.C. Section 1014.

**Canadian Applicants:** I/we do solemnly affirm that all facts stated herein are true and correct, that this solemn affirmation is made as if under oath per the terms of the Evidence Act of Canada and that it is a criminal offence under said Evidence Act to knowingly make any false statements concerning any of the facts stated herein.

Applicant's/Principal's Signature \_\_\_\_\_ Date Signed \_\_\_\_\_ Social Security No. \_\_\_\_\_ Date of Birth \_\_\_\_\_

Spouse's Signature \_\_\_\_\_ Date Signed \_\_\_\_\_ Social Security No. \_\_\_\_\_ Date of Birth \_\_\_\_\_