

Personal Financial Statement

As of Date: _____, 20__

The following personal financial statement is submitted to Summit Credit Union for the purpose of procuring, establishing, and maintaining credit. You are authorized to make all inquiries you deem necessary to verify the accuracy of the statements made herein and to determine my/our credit worthiness.

For Wisconsin Residents only: I am married unmarried legally separated

NOTICE TO MARRIED APPLICANTS: No provision of any marital property agreement, unilateral statement under § 766.59, Wis. Stats., or court decree under § 766.70, Wis. Stats., adversely affects the interest of the creditor unless the creditor, prior to the time the credit is granted or an open-end credit plan is entered into, is furnished a copy of the agreement, statement or decree or has actual knowledge of the adverse provision.

INSTRUCTIONS FOR INFORMATION TO BE SUPPLIED BELOW:

If married applicants are applying for joint credit, include all assets and all liabilities of both spouses. Both spouses must sign this statement. If a married applicant is applying for separate credit or for joint credit with someone other than his or her spouse, include all marital property and all individual property of the applicant spouse but do not include individual property of the other spouse.

For purposes of this statement:

Marital property means assets acquired with my or my spouse's income on or after 1-1-86; and

Individual property means property owned (whether in joint or sole name) by me prior to marriage, prior to establishing residence in Wisconsin, or

Prior to 1-1-86, however acquired, and property acquired by me by gift or inheritance at any time.

APPLICANT INFORMATION (type or print)		CO-APPLICANT INFORMATION (type or print)	
Full Name:	Birthdate:	Full Name:	Birthdate:
Social Security #:		Social Security #:	
Residence Address:		Residence Address:	
City, State, Zip:		City, State, Zip:	
Position or Occupation:		Position or Occupation:	
Business Name/Employer:		Business Name/Employer:	
Business Address:		Business Address:	
City, State, Zip:		City, State, Zip:	
Res. Phone:	Bus. Phone:	Res. Phone:	Bus. Phone:
ASSETS	DOLLARS	LIABILITIES	DOLLARS
Cash and on Deposit (Schedule A)	\$	Short-Term Notes Due (Schedule F)	\$
Govt. and Listed Securities (Schedule B)		Installment Notes Due (Schedule F)	
Unlisted Securities (Schedule B)			
Accounts and Notes Receivable (Schedule C)			
Cash Value Life Insurance (Schedule D)		Life Insurance Loans (Schedule F)	
Residence (Schedule E)			
Other Real Estate Owned (Schedule E)		Real Estate Mortgages (Schedule E)	
Retirement Funds			
Vehicles Owned			
Other Personal Property (Please Itemize)		Other Debts/Liabilities (Please Itemize)	
Other Assets		Unpaid Taxes	
		TOTAL LIABILITIES	\$
		NET WORTH	\$
TOTAL ASSETS	\$	TOTAL LIABILITIES AND NET WORTH	\$
ANNUAL INCOME*	DOLLARS	CONTINGENT LIABILITIES	
Salary	\$	Endorser:	\$
Other Income (itemize) **		Co-Maker:	
		Guarantor:	
Spouse Salary		Income Tax:	
Other Income (itemize) **		On Leases/Contracts:	
		Other:	
TOTAL	\$	TOTAL	\$

* Married Wisconsin Residents signing individually, include income of spouse

** Income from alimony, child support, or separate maintenance income need not be revealed if you do not wish the credit union to consider the income in determining your credit worthiness.

PERSONAL INFORMATION
Are you a partner or officer in any other venture? If so, describe.
Have you ever declared bankruptcy? If so, describe.
Do you have a will? If so, name of personal representative.
Are you a defendant in any legal actions or suits? If so, describe.

Schedule A (Cash on Hand and Money on Deposit)				
Type	Name of Financial Institution	Amount	In Name of	Pledged Yes/No

Schedule B (US Government, Listed & Unlisted Securities) List on separate sheet if necessary				
No. of Shares of Face Value	Description	Owner(s)	Market Value	Pledged Yes/No

Schedule C (Accounts and Notes Receivable)		
Description	Owed By	Amount Due

Schedule D (Life Insurance Carried - include group)				
Face Amount	Name of Company	Owner(s)	Beneficiary	Cash Surrender Value

Schedule E (Real Estate)							
Address	% Owned	Year Acquired	Market Value	Lender	Loan Balance	Maturity	Monthly Payment

Schedule F (Other Debts) Use additional sheet if necessary						
Lender	Current Balance	Interest Rate	Monthly Payment	Secured Yes/No	Type of Collateral	

The Undersigned certifies that the information contained in this financial statement is true and correct 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. I authorize Lender or its agents to verify the information obtained in this statement and to obtain additional information concerning my financial condition, including, without limitation, consumer credit reports, although Lender may rely on this financial statement without any further verification. I authorize Lender to furnish such information and any other credit experiences with me to others and to answer any questions about my credit experience and other financial relationships with Lender; I agree to notify Lender, in writing, of any change that materially affects the accuracy of this statement. **Lender may share information bearing on my credit worthiness, credit standing, credit capacity, character, general reputation, personal characteristics or mode of living with its affiliates unless I direct Lender at the address above that such information if unrelated to my transactions or experiences with Lender may not be shared by Lender with its affiliates.**

It may be a federal crime punishable by a fine of not more than \$5,000 or imprisonment for not more than two years or both to knowingly make false statements concerning any of the above information, under provisions of Title 18, United States Code, Section 1014.

Date Signed: _____

Applicant Signature

Applicant Signature

For married Wisconsin resident, I understand Lender may be required by law to give notice of any credit transaction to my spouse. The credit applied for, if granted, will be incurred in the interest of my marriage or family.

Applicant Signature

