

SECURITY Savings Bank

PERSONAL FINANCIAL STATEMENT AS OF: _____
SUBMITTED TO: Security Savings Bank

PERSONAL INFORMATION

APPLICANT

Name:		
Home Address:		
Home Phone:	Social Security No.:	Date of Birth:
Employer:	Address:	
Business Phone No.:	No. of Years with Employer:	Title/Position:
Name of Previous Employer & Position (If With Current Employer Less Than 3 Yrs):		
No. of Years:	Address:	Business Phone No.:
Name of your Accountant:		Business Phone No.:
Name of your Attorney:		Business Phone No.:
Name of your Investment Advisor/Broker:		Business Phone No.:
Name of your Insurance Advisor:		Business Phone No.:

CO-APPLICANT

Name:		
Home Address:		
Home Phone:	Social Security No.:	Date of Birth:
Employer:	Address:	
Business Phone No.:	No. of Years with Employer:	Title/Position:
Name of Previous Employer & Position (If With Current Employer Less Than 3 Yrs):		
No. of Years:	Address:	Business Phone No.:

Cash Income & Expenditures Statement for Year Ended _____ (Omit Cents)

ANNUAL INCOME	AMOUNT (\$)
Salary (applicant)	
Salary (co-applicant)	
Bonuses & Commissions (applicant)	
Bonuses & Commissions (co-applicant)	
Rental Income	
Interest Income	
Dividend Income	
Capital Gains	
Partnership Income	
Other Investment Income	
Other Income (List)**	
Gambling	
TOTAL INCOME	

ANNUAL EXPENDITURES	AMOUNT (\$)
Federal Income and Other Taxes	
State Income and Other Taxes	
Rental Payments, Co-op or Condo Maint	
Mortgage Payments - Residential	
Mortgage Payments - Investment	
Property Taxes - Residential	
Property Taxes - Investment	
Interest & Principal Loan Payments	
Insurance	
Investments	
Homeward	
Tuition	
Other Living Expense	
Medical Expenses	
Other Expenses	
TOTAL 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 obligation.

Balance Sheet

As Of: _____

ASSETS

LIABILITIES

Cash in this Bank (including money market account, CDs)		Notes Payable to this Bank Secured	
		Notes Payable to this Bank unsecured	
Cash in other Financial Institutions (List)(including money market accounts, CD)		Notes Payable to Others (Schedule E)	
		Secured	
		Unsecured	
		Accounts Payable (including credit cards)	
		Margin Accounts	
		Notes Due: Partnership (Schedule D)	
Readily Marketable Securities (Schedule A1)		Taxes Payable	
Non-Readily Marketable Securities (Schedule A2)		Mortgage Debt (Schedule C1)	
Accounts and Notes Receivable		Investment Debt (Schedule C2)	
Net Cash Surrender Value of Life Insurance (Schedule B)		Life Insurance Loans (Schedule B)	
Residential Real Estate (Schedule C1)		Other Liabilities (List)	
Real Estate Investments (Schedule C2)		Student Loan	
Partnerships / PC Interests (Schedule D)			
IRA, Keogh, Profit-Sharing & Other Vested Retirement Accts.			
Deferred Income (number of years deferred)			
Personal Property (including automobiles)			
Other Assets (List) -			
		TOTAL LIABILITIES	
		NET WORTH	
TOTAL ASSETS		TOTAL LIABILITIES & NET WORTH	

CONTINGENT LIABILITIES	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 suits 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"/>	
What would be your total estimated tax liability if you were to sell your major assets?	<input type="checkbox"/>	<input type="checkbox"/>	
If yes for any of the above, give details:	<input type="checkbox"/>	<input type="checkbox"/>	

Schedule A1 - READILY MARKETABLE SECURITIES (including U.S. Governments and Municipals)

No. of Shares (Stock) or Face Value (Bonds)	Description	Owners	Where Held	Cost	Current Market Value	Pledged	
						Yes	No
Total							

Schedule A2 - NON-READILY MARKETABLE SECURITIES (closely held, thinly traded, or restricted stock)

No. of Shares (Stock) or Face Value (Bonds)	Description	Owners	Where Held	Cost	Current Market Value	Pledged	
						Yes	No
Total							

Schedule B - Life Insurance (use additional sheet if necessary)

Insurance Company	Face Amount of Policy	Type of Policy	Beneficiary	Cash Surrender Value	Amount Borrowed	Beneficiary
Asset Total						Liability Total

Personal Residence & Real Estate Investments, Mortgage Debt (Majority Ownership only)

Schedule C1 - Personal Residence

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

Schedule C2 - Investment

Property Address	Legal Owner	Purchase		Market Value	Present Loan Balance	Interest Rate	Loan Maturity Date	Monthly Payment	Lender
		Year	Price						
Total Investment						Total Investment Debt			

Schedule D - Partnerships (less than majority ownership for real estate partnership)*

Type of Investment	Date of Initial Investment	Cost	Percent Owned	Current Market Value	Balance Due on Partnerships: Notes, Cash Call	Final Contribution Date
Business/Professional (Indicate name):						
Investments (Including Tax Shelters):						
Total Current Market Value						Total Due

* Note: For investments which represent a material portion of your total assets, please include the relevant financial statements or tax returns, or in the case of partnership investments or S-corporations, schedule K-1s.

Schedule E - Notes Payable

Due To	Type of Facility	Amount of Line	Secured		Collateral	Interest Rate	Maturity	Unpaid Balance
			Yes	No				

Please Answer The Following Questions:

1 Income tax returns filed through (date): _____ Are any returns currently being audited or contested? Yes No

If yes, what year(s)? _____

2 Have (either of) you or any firm in which you were a major owner ever declared bankruptcy? Yes No
If yes, please provide details: _____

3 Have you drawn a will? Yes No
If yes, please furnish the name of the executor(s) and year will was drawn: _____

4 Number of dependents (excluding self) and relationship to applicant: _____

5 Did you include two years federal and state tax returns? Yes No

6 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 bank: _____

7 Do you anticipate any substantial inheritances? Yes No
If yes, please explain: _____

Representations and Warranties

The information contained in this statement is provided to induce you to extend or to continue the extension of credit to the undersigned or to others upon the guarantee of the undersigned. The undersigned acknowledge and understand that you are relying on the information provided herein in deciding to grant or continue credit or to accept a guarantee thereof. Each of the undersigned agrees to notify you immediately and in writing of any change in name, address, or employment and of any material adverse change (1) in any of the information contained in this statement or (2) in the financial condition of any of the undersigned or (3) in the ability of any of the undersigned to perform its (or their) obligations to you. In the absence of such notice or a new and full written statement, this should be considered as a continuing statement and substantially correct. If the undersigned fail to notify you as required above, or if any of the information herein should prove to be inaccurate or incomplete in any material respect, you may declare the indebtedness of the undersigned or the indebtedness guaranteed by the undersigned, as the case may be, immediately due and payable. You are authorized to make all inquires you deem necessary to verify the accuracy of the information contained herein and to determine the credit worthiness of the undersigned. The undersigned authorize any person or consumer reporting agency to give you any information it may have on the undersigned. Each of the undersigned authorizes you to answer questions about your credit experience with the undersigned. As long as any obligation or guarantee of the undersigned to you is outstanding, the undersigned shall supply annually an updated financial statement. This personal financial statement and any other financial or other information that the undersigned give you shall be your property.

Signature

Signature

Submission of this financial statement and information contained herein constitutes a request for credit in the amount of \$ _____ for the purpose of _____

I intend to apply for individual credit

Your Signature

Date

We intend to apply for joint credit

Date

Your Signature

Date

Joint Applicant's Signature