



PERSONAL FINANCIAL STATEMENT

tel: 503.220.2592
TF: 800.942.9408

fax: 503.228.6770
www.trailheadcu.org

STATEMENT OF FINANCIAL CONDITION OF _____ AS OF _____, 20__

Applicant Name:		Social Security Number:	
Residence Address:		Residence Phone:	
City, State, & Zip Code:		Business Phone:	
Business Name of Applicant/Borrower:			

Please check the one that applies to you:

Applicant is applying for this loan: Individually Jointly

If you are applying for an 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 applicable sections.

If this is an application for joint credit with another person, complete applicant and co-applicant sections and indicate or provide explanation relating to any assets owned jointly or by a trust or liabilities owed with others. (Attach schedules and explanatory notes if necessary.)

We intend to apply for joint credit. _____ _____
Applicant Co-Applicant

If you are applying for an 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 applicant section about the person on whose alimony, support, or maintenance payments or income or assets you are relying. (Attach schedules and explanatory notes if necessary.)

Please Initial Here: _____

ASSETS	(Omit Cents)	LIABILITIES	(Omit Cents)
Cash (Schedule A)		Notes & Loans Payable - Other than Real Estate (Schedule G)	
Trailhead FCU	\$ _____	Notes Payable to Banks	\$ _____
Other Banks, Credit Unions or Savings & Loans	\$ _____	Notes & Loans Payable (Other)	\$ _____
_____		_____	
Stocks and Bonds (Schedule B)		Taxes Owed	\$ _____
Marketable Securities	\$ _____	_____	
Others	\$ _____	Insurance Loans (Schedule C)	\$ _____
_____		_____	
Tax Refund Due	\$ _____	Accounts and Bills Payable (Schedule H)	
_____		Bank Cards	\$ _____
Insurance-Cash Surrender Value (Schedule C)	\$ _____	Open & Revolving Accounts	\$ _____
_____		Other	\$ _____
Accounts & Notes Receivable (Schedule D)	\$ _____	_____	
_____		Real Estate Notes & Contracts Payable (Schedule E)	\$ _____
Real Estate (Schedule E)		Residence(s)	\$ _____
Residence(s)	\$ _____	Unimproved Land	\$ _____
Unimproved Land Income Property(ies)	\$ _____	Income Property(ies)	\$ _____
Other	\$ _____	Other	\$ _____
_____		_____	
Other Assets (Schedule F)		Other Liabilities (Schedule I)	\$ _____
Other Assets & Personal Property	\$ _____	_____	

Total Assets	\$ _____	Total Liabilities	\$ _____
		Net Worth (ASSETS - LIABILITIES)	\$ _____
		(Difference Between Total Assets & Total Liabilities)	\$ _____
ANNUAL INCOME FOR YEAR:		CONTINGENT LIABILITIES	
Salary or Wages	\$ _____	Endorser - Notes/Contracts	\$ _____
Dividends or Interest	\$ _____	Guarantor - Notes/Contracts	\$ _____
Rental (Gross Income)	\$ _____	Taxes	\$ _____
Business (Net income)	\$ _____	Other (Describe)	\$ _____
Other Income	\$ _____		
* See notice below before completing Other Income			
TOTAL	\$ _____	TOTAL	\$ _____

* Alimony, child support or separate maintenance payment income need not be revealed if you do not wish to have it considered as a basis for repaying this obligation.
Please Initial Here: _____

ANNUAL EXPENSES FOR YEAR:

Property Tax & Assessments	\$ _____
Federal & State Income Tax	\$ _____
Real Estate Loan Payments	\$ _____
Payments on Contracts/Notes	\$ _____
Estimated Living Expenses	\$ _____
Other	\$ _____
TOTAL EXPENSES	\$ _____

SCHEDULE A | CASH LOCATION AND STATUS OF BANK ACCOUNTS

BANK	FINANCIAL INSTRUMENT (CHECKING/SAVINGS/CD)	BALANCE	INTEREST RATE PAID TO YOU	DATE OF MATURITY FOR CD	IS THIS ACCOUNT PLEDGED FOR A LOAN?
TOTAL:		\$ _____			

SCHEDULE B | STOCKS AND BONDS

DESCRIPTION	NUMBER OF SHARES	PRICE PER SHARE	TOTAL VALUE	DATE OF ACQUISITION	DATE & SOURCE OF VALUATION
TOTAL			\$ _____		

SCHEDULE C | LIFE INSURANCE

INSURED	PRIMARY BENEFICIARY	FACE AMOUNT	ACTUAL CASH VALUE	LOANS ON POLICY	NAME & LOCATION OF INSURANCE COMPANY

Please Initial Here: _____

TOTAL		\$	\$	\$	

SCHEDULE D ACCOUNTS AND NOTES RECEIVABLE					
OWNER(S)	DUE FROM AND ADDRESS	COLLATERAL	MATURITY DATE	PAYABLE AMOUNT & METHOD (MONTHLY/ANNUALLY)	BALANCEDUE
TOTAL				\$	\$

SCHEDULE E REAL ESTATE					
DESCRIPTION	ADDRESS	OWNER(S)	DATE ACQUIRED	COST	BALANCEDUE
TOTAL				\$	\$

SCHEDULE F OTHER ASSETS AND PERSONAL PROPERTY					
AUTOMOBILE(S)	VALUE	RECREATION VEHICLE(S) AND BOAT (S)	VALUE	PERSONAL PROPERTY	VALUE
YR. MAKE		YR. MAKE FT.			
YR. MAKE		YR. MAKE FT.			
YR. MAKE		YR. MAKE FT.			
YR. MAKE		YR. MAKE FT.			
SUBTOTALAUTO(S)	\$	SUBTOTALR/V(S)	\$	SUBTOTAL PERSONAL PROPERTY	\$

SCHEDULE G NOTES AND LOANS PAYABLE TO BANKS AND OTHERS					
PAYABLE TO AND ADDRESS	COLLATERAL	PERSONS LIABLE	MATURITY DATE	PAYABLE AMOUNT & METHOD (MONTHLY/ANNUALLY)	BALANCEDUE
				\$	\$
				\$	\$
TOTAL				\$	\$

Please Initial Here: _____

SCHEDULE H ACCOUNTS AND BILLS PAYABLE (INCLUDING BANK CARDS)					
PAYABLE TO	ACCOUNT NUMBER	PERSONS LIABLE	PAYABLE AMOUNT	PAYABLE METHOD (MONTHLY/ANNUALLY)	BALANCE DUE
TOTAL			\$		\$

SCHEDULE I OTHER LIABILITIES					
PAYABLE TO	PERSONS LIABLE	COLLATERAL	PAYABLE AMOUNT	PAYABLE METHOD (MONTHLY/ANNUALLY)	BALANCE DUE
			\$		\$
			\$		\$
			\$		\$
			\$		\$
TOTAL			\$		\$

SCHEDULE J NOTES, CONTRACTS, ACCOUNTS PAYABLE (INCLUDE MORTGAGES ON PROPERTY LISTED IN SCH. E)					
MORTGAGE OR LIEN HOLDER	ANNUAL TAXES	MONTHLY INCOME	MONTHLY PAYMENTS	PRESENT VALUE	BALANCE DUE
TOTAL	\$	\$	\$	\$	\$

If applicant resides in a community property state, please complete the following concerning the marital status: **(please check)**

- Applicant is: Married Separated Unmarried (Includes single, divorced and widowed)
- Co-Applicant is: Married Separated Unmarried (Includes single, divorced and widowed)

Please Initial Here: _____

APPLICANT'S SIGNATURE(S)

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 Trailhead FCU is relying on this statement of my financial condition in making loan(s) to me. Trailhead FCU is authorized to make any investigation of my credit or employment status either directly or through any agency employed by Lender for that purpose. I agree to inform Trailhead FCU immediately of any matter which will cause any significant change in my/our financial condition. I understand that Trailhead FCU will retain this financial statement whether or not credit is granted.

Applicant's Signature

Date

Co-Applicant's/Joint Credit Signature

Date

CONSENT

Trailhead FCU may be relying on: 1) income from an individual who is not an applicant for the consumer loan, or 2) an individual co-borrower, owner, partner, officer or guarantor, for the business loan. Because of your relationship to the loan applicant or your role in the accommodation for the loan, your personal creditworthiness is a factor in the evaluation of the application or accommodation for the loan. By signing below, I authorize the financial institution to obtain a consumer credit report on me for that purpose to evaluate the loan application.

Date:_____ Signature_____ Social Security Number _____

Date:_____ Signature_____ Social Security Number _____