



Waverly Office
609 Pacific Ave • Waverly
MN 55390
763-658-4417

Mailing Address
PO Box 68
Waverly MN 55390

Montrose Office
145 Nelson Blvd • Montrose
MN 55363
763-675-2265

bankwaverly.com • bankmontrose.com

PERSONAL FINANCIAL STATEMENT

**Contact your representative at the Bank
if you have any questions regarding
the completion of this form.**

Check appropriate box concerning credit request:

- You are applying for individual credit in your name and are relying only on your own income or assets and not the income of another person as a basis of repayment of the credit requested.
- You are applying for individual credit in your name and are relying on the income or assets of another person as the basis for repayment of the credit requested.
- This is an application for joint credit with another person.

We intend to apply for joint credit. Please initial here:

Applicant _____

Co-Applicant _____

Applicant:

Name _____ Social Security # _____

Address _____

City/State/Zip _____

Telephone # _____ Date of Birth _____ Email _____

Present Employer _____ Position _____

Address _____

City/State/Zip _____

Co-Applicant:

Name _____ Social Security # _____

Address _____

City/State/Zip _____

Telephone # _____ Date of Birth _____ Email _____

Present Employer _____ Position _____

Address _____

City/State/Zip _____

• Round all amounts to the nearest \$100

Date of valuation _____

Assets	Amount	Liabilities	Amount
Cash in this Bank		Notes Payable (Schedule 7)	
Cash in other Banks (Detail)		Notes Payable Others (Schedule 7)	
		Installment Contracts Payable (Schedule 7)	
		Due Department Stores, Credit Cards & Others	
Due from Friends, Relatives & Others (Schedule 1)			
		Income Taxes Payable	
Mortgage & Contracts for Deed Owned (Schedule 2)			
Securities Owned (Schedule 3)		Other Taxes Payable	
Cash Surrender Value of Life Insurance (Schedule 4)			
Homestead (Schedule 5)		Loans on Life Insurance (Schedule 4)	
Other Real Estate (Schedule 5)			
Automobiles		Mortgage on Homestead (Schedule 6)	
		Mortgage or Liens on Other Real Estate Owned (Schedule 6)	
Personal Property			
		Other Liabilities (Detail)	
Other Assets (Detail)			
		TOTAL LIABILITIES	
		Net Worth (Total Assets Less Total Liabilities)	
	TOTAL		TOTAL

Annual Income	Applicant	Co-Applicant	Contingent Liabilities	
Salary			As Endorser	
Commissions			As Guarantor	
Dividends			Lawsuits	
Interest			For Taxes	
Rentals			Other (Detail)	
Alimony, child support or maintenance (you need not show this unless you wish us to consider it). Other				
			<input type="checkbox"/> Check here if "None"	
TOTAL INCOME			TOTAL CONTINGENT LIABILITIES	

*** Attach additional sheets if needed to complete Schedule details 1-7. ***

SCHEDULE 1: Due from Friends, Relatives & Others					
Name of Debtor	Owed To	Collateral	How Payable	Maturity Date	Unpaid Balance
			\$ _____ per _____		
			\$ _____ per _____		
			\$ _____ per _____		
			\$ _____ per _____		
					TOTAL

SCHEDULE 2: Mortgage and Contracts for Deed Owned					
Name of Debtor	Type of Property	1st or 2nd Lien	Owed To	How Payable	Unpaid Balance
				\$ _____ per _____	
				\$ _____ per _____	
				\$ _____ per _____	
				\$ _____ per _____	
					TOTAL

	Applicant		Co-Applicant	
Have you ever gone through bankruptcy or had a judgment against you?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are any assets pledged or debts secured except as shown?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have you made a will?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Number of Dependents	_____	<input type="checkbox"/> None	_____	<input type="checkbox"/> None
Marital Status (Complete only if application is not for individual unsecured credit or the applicant resides in a community property state or is relying on property located in such a state as a basis for repayment of the credit requested.)	<input type="checkbox"/> Married		<input type="checkbox"/> Married	
	<input type="checkbox"/> Separated		<input type="checkbox"/> Separated	
	<input type="checkbox"/> Unmarried		<input type="checkbox"/> Unmarried	
	(Unmarried includes single, divorced, widowed)			

The forgoing statement, submitted for the purpose of obtaining credit, is true and correct in every detail and fairly shows my/our financial condition at the time indicated. I/we will give you prompt written notice of any substantial change in such financial condition occurring before discharge of my/our obligations to you. I/we understand that you retain this personal financial statement whether or not you approve the credit in connection with which is is submitted. You are authorized to check my/our credit and employment history or any other information contained therein.

THE UNDERSIGNED CERTIFY THAT THE INFORMATION CONTAINED ON THIS FORM HAS BEEN CAREFULLY REVIEWED AND IS TRUE AND CORRECT IN ALL RESPECTS.

Date _____ **Applicant Signature** _____

Date _____ **Co-Applicant Signature** _____
(If you are requesting the financial accommodation jointly)