



people you can count on.

# Personal Financial Statement

(Do not use for business information)



<input type="checkbox"/>	I intend to apply for individual credit.	Applicant	
<input type="checkbox"/>	We intend to apply for joint credit.	Applicant	Co-Applicant

**PLEASE COMPLETE FULLY** (Describe any unusual assets or liabilities)

Name \_\_\_\_\_

Address \_\_\_\_\_ Occupation \_\_\_\_\_

**NOTICE:** Texas is a "Community Property" state, which generally means that all property, goods, salaries and debts acquired, earned or contracted after marriage belong by law, to the marital community. "Sole and Separate Property" is generally defined as those goods, property, income and debts acquired prior to marriage or by gift or inheritance after marriage.

**PLEASE READ CAREFULLY:**

This Financial Statement, unless otherwise marked below, is to be considered as the assets, liabilities and income of both spouses (marital community) to be relied upon in connection with credit extended by Bank to that marital community. Credit may be extended on one signature, unless, under applicable State law, or Bank reasonably believes, both signatures are required. This Financial Statement is to be considered as my sole and separate assets and income therefrom and all debts for which I am obligated by my signed promise to pay and it does not contain information on assets, income or creditworthiness of spouse or marital community.

**FINANCIAL CONDITION AS OF** \_\_\_\_\_

### Personal Information

APPLICANT			CO-APPLICANT		
Name:			Name:		
Employer:			Employer:		
Address of Employer:			Address of Employer:		
Business Phone No.:	No. of Years with Employer:	Title/Position:	Business Phone No.:	No. of Years with Employer:	Title/Position:
Previous Employer & Position (if with current employer less than 3 yrs):		No. of Years:	Previous Employer & Position (if with current employer less than 3 yrs):		No. of Years:
Home Address:			Home Address:		
Home Phone No.:	Social Security No.:	Date of Birth:	Home Phone No.:	Social Security No.:	Date of Birth:
Name & Phone No. of Accountant:			Name & Phone No. of Accountant:		
Name & Phone No. of Attorney:			Name & Phone No. of Attorney:		
Name & Phone No. of Investment Advisor/Broker:			Name & Phone No. of Investment Advisor/Broker:		
Name & Phone No. of Insurance Advisor:			Name & Phone No. of Insurance Advisor:		

**Cash Income and Expenditures Statement for the Year Ended:** \_\_\_\_\_ (Omit Cents)

ANNUAL INCOME	AMOUNT		ANNUAL EXPENDITURES	AMOUNT	
	Thousands	Hundreds		Thousands	Hundreds
Salary (applicant)	\$		Federal Income and Other Taxes		
Salary (co-applicant)			State Income and Other Taxes		
Bonuses & Commissions (applicant)			Rental Payments, Co-op or Condo Maintenance		
Bonuses & Commissions (co-applicant)			Mortgage Payments	Residential:	
Rental Income				Investment:	
Interest Income			Property Taxes	Residential:	
Dividend Income				Investment:	
Capital Gains			Interest and Principal Payments on Loans		
Partnership Income			Insurance		
Other Investment Income			Investments and/or Partnership Contributions		
Other Income (List) **			Alimony/Child Support		
			Tuition		
			Other Living Expenses		
			Medical Expenses		
			Other Expenses (List)		
<b>TOTAL INCOME</b>	\$		<b>TOTAL EXPENDITURES</b>	\$	

Any significant changes expected in the next 12 months?  Yes  No (If yes, attached information)

\*\*Income from alimony, child support or separate maintenance income need not be revealed if the applicant or the co-applicant does not wish to have it considered as a basis for repaying this obligation.







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### 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 are a major owner ever declared bankruptcy?  Yes  No
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. Have you ever had a financial plan prepared for you?  Yes  No
6. Did you include three years federal and state tax returns?  Yes  No
7. 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 banker: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
8. 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 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 represents, warrants, and certifies that the information provided herein is true, correct and complete. Each of the undersigned agrees to notify you immediately in writing of any change in name, address or employment and of any material change (1) in the undersigned's capacity to perform its (or their) obligations to you or in any of the information contained in this statement or (2) in the financial condition of any of the undersigned. In the absence of such notice or a new and full written statement, this should be considered as a continuing statement and substantially correct. You are authorized to make all inquiries you deem necessary to verify the accuracy of the information contained herein and to determine the creditworthiness 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.

\_\_\_\_\_  
Date Your Signature

\_\_\_\_\_  
Date Co-Applicant's Signature (if you are requesting the financial accommodation jointly)

### FOR BANK USE

Bank Certification: This is a copy of the original statement, properly signed, in the credit files of Heritage Bank.

\_\_\_\_\_  
Date Bank Officer