

**FINANCIAL STATEMENT**

**I. Income**

Annual Earnings Before Deductions

Applicant #1 Income: (\$ \_\_\_\_\_/month x 12 months) = \_\_\_\_\_

Applicant #2 Income: (\$ \_\_\_\_\_/month x 12 months) = \_\_\_\_\_

Dividends: \$ \_\_\_\_\_

Interest: \$ \_\_\_\_\_

Rental: \$ \_\_\_\_\_

Disability Benefits (Veterans Administration): \$ \_\_\_\_\_

Personal Note: \$ \_\_\_\_\_

Trust Deeds: \$ \_\_\_\_\_

Other Assets: \$ \_\_\_\_\_

**II. Resources**

A. Savings Account (Savings & Loan, Credit Union, Etc.)

<u>Account in Whose Name</u>	<u>Name and Address of Bank</u>	<u>Current Balance</u>
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____

B. Checking Account

<u>Account in Whose Name</u>	<u>Name and Address of Bank</u>	<u>Current Balance</u>
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____

**III. Monthly Installment Payments (including VISA, MasterCard, Medical Bills, etc.)**

<u>Item</u>	<u>Total Cost</u>	<u>Monthly Payment</u>	<u>Balance Due</u>	<u>To Whom</u>
_____	\$ _____	\$ _____	\$ _____	_____
_____	\$ _____	\$ _____	\$ _____	_____
_____	\$ _____	\$ _____	\$ _____	_____
_____	\$ _____	\$ _____	\$ _____	_____
_____	\$ _____	\$ _____	\$ _____	_____

IV. Are you purchasing your home? Yes  No

Purchase Date \_\_\_\_\_

Purchase Price \$ \_\_\_\_\_

Monthly Payments \$ \_\_\_\_\_

Balance Due to Date \$ \_\_\_\_\_

V. If you are not purchasing your home, what is your rent per month? \$ \_\_\_\_\_

VI. Do you own other real estate or property? Yes  No

If yes – Purchase Date \_\_\_\_\_ Purchase Price \$ \_\_\_\_\_

Monthly Payments \$ \_\_\_\_\_ Balance Due \$ \_\_\_\_\_

Description and Location: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Vehicles:	<u>Description</u>	<u>Total Cost</u>	<u>Payments</u>	<u>Balance Due</u>
	_____	\$ _____	\$ _____	\$ _____
	_____	\$ _____	\$ _____	\$ _____
	_____	\$ _____	\$ _____	\$ _____

VII. Insurance

A. Do you have health and hospitalization for your family? Yes  No

Name of Company \_\_\_\_\_

VIII. Retirement Plan – Specify:

A. Company Retirement Plan \_\_\_\_\_

B. Social Security Benefits \_\_\_\_\_

C. Investment in Company Stock \_\_\_\_\_

Signature of Applicant #1 \_\_\_\_\_

Signature of Applicant #2 \_\_\_\_\_

Date \_\_\_\_\_