



CORPORATE BANKING
 P.O. BOX 370
 DEARBORN, MICHIGAN 48121
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 dfcufinancial.com

Personal Financial Statement

Guarantor Information – Applicant

Applicant Name		Social Security #		Date of Birth	
Home Phone	Cell Phone	Business Phone		Email	
Home Address		City	State		Zip
Current Employer			Title/Position		No. Yrs.

Guarantor Information – Joint Applicant

Applicant Name		Social Security #		Date of Birth	
Home Phone	Cell Phone	Business Phone		Email	
Home Address		City	State		Zip
Current Employer			Title/Position		No. Yrs.

Cash Income and Expenditures Statement for Year Ended []

*Annual Income	Applicant	Joint Applicant	Annual Expenses	Applicant	Joint Applicant
Salary	\$	\$	Federal Income & Other Taxes	\$	\$
Bonus			Property Taxes & Assessments		
Commissions			Rental Payments, Co-op or Condo Maint.		
Dividends & Interest			Loan Payments (Principal & Interest)		
Rental Income			Insurance Premiums		
Partnership Income			*Alimony/Support Payments		
Capital Gains			Tuition/Education		
Other Items			Other Living Expenses		
			Other – Itemize		
Total	\$	\$	Total	\$	\$

*It is optional to disclose income from alimony, child support or maintenance payments if you do not wish it to be considered as a basis for repaying this obligation. If disclosed, please indicate if such payments are received under court order, written agreement, or oral understanding.

Are any significant changes to income expected in the next 12 months? (If yes, attach information)

Applicant: Yes No Joint Applicant: Yes No

Assets & Liabilities

Date of Financial Statement: []

Assets	Applicant	Joint Applicant Only	Total
Cash in Credit Union Accounts	\$	\$	\$
Cash in Other Financial Institutions (Section 1)	\$	\$	\$
Traded and Marketable Securities (Section 2)	\$	\$	\$
Non-Readily Marketable Securities (Section 3)	\$	\$	\$
Accounts and Loans Receivable (Section 4)	\$	\$	\$
Personal Residence (Section 5)	\$	\$	\$
Real Estate Investments (Section 5)	\$	\$	\$
Land Contracts or Mortgages Receivable (Section 6)	\$	\$	\$
Partnership Interests (Section 7)	\$	\$	\$
Retirement Accounts	\$	\$	\$
Vested Interests in Pension Plans	\$	\$	\$
Cash Value of Life Insurance (Section 8)	\$	\$	\$
Vehicles	\$	\$	\$
Personal Property	\$	\$	\$
Other Assets:	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
Total Assets	\$	\$	\$

Assets & Liabilities, continued

Liabilities			
Accounts Payable & Credit Cards	\$	\$	\$
Notes Payable to Credit Union and Others (Section 9)	\$	\$	\$
Land Contracts or Mortgages Receivable (Section 6)	\$	\$	\$
Vehicle Loans (Section 9)	\$	\$	\$
Partnership Loans (Section 7)	\$	\$	\$
Loans on Life Insurance (Section 8)	\$	\$	\$
Loans on Real Estate	\$	\$	\$
Unpaid Income Taxes – Current Year	\$	\$	\$
Unpaid Income Taxes – Prior Year	\$	\$	\$
Judgements	\$	\$	\$
Other Liabilities:	\$	\$	\$
	\$	\$	\$
Total Liabilities	\$	\$	\$
Net Worth (total assets minus total liabilities)			\$

Section 1: Deposits (List the name of all institutions where you maintain a deposit account)						
Name of Institution	Name(s) on Acct	Type of Acct	Acct Number	Deposit Balance	Pledged?	If yes, to whom?
				\$	<input type="checkbox"/> Yes <input type="checkbox"/> No	
					<input type="checkbox"/> Yes <input type="checkbox"/> No	
					<input type="checkbox"/> Yes <input type="checkbox"/> No	
					<input type="checkbox"/> Yes <input type="checkbox"/> No	
					<input type="checkbox"/> Yes <input type="checkbox"/> No	
Total Cash				\$		

Section 2: Traded and Marketable Securities (including U.S. Governments) – Attach copy of broker’s statements						
Description	Traded Where	No. of Shares/Face Value of Bonds	Registered in Name(s) of	Market Value	Pledged No. Shares/Bonds	Pledged to whom?
				\$		
Total Traded and Marketable Securities				\$		

Section 3: Non-Readily Marketable Securities (including U.S. Governments) – Attach copy of broker’s statements							
Description	% Owned	Number of Shares/Bonds	Registered in Name(s) of	Book Value*	Market Value*	Pledged No. Shares/Bonds	Pledged to whom?
				\$	\$		
Total Non-Readily Marketable Securities				\$			

*Attach current financial statements.

Section 4: Accounts and Loans Receivable										
Name of Debtor	Address	Owing to Applicant or Joint Applicant	Description	Original Balance	Amount Owning	Interest Rate	Payment Freq.	Payment Amount	Pymts Current?	Collateral (None, if Unsecured)
				\$	\$					
Total Accounts and Loans Receivable				\$						

Section 5: Personal Residence, Real Estate Investments, and Related Liabilities													Investment Properties
Description of Property/Address	Title in Name(s) Of	% of Ownership	Date Acquired	Original Cost	Market Value	Appraised Value/Date (if available)	Property Taxes Paid Through	Mortgages and Land Contracts Payable					Annual Net Operating Income
								Payment Amt/Freq	Int. Rate	Current Balance	Mat. Date	Owned To	
				\$	\$	\$		\$ /		\$			\$
								\$ /					
								\$ /					
								\$ /					
Total Real Estate				\$									\$
							Total Liabilities	\$					\$

Section 6: Land Contracts or Mortgages Receivable and Related Liabilities												
Description of Property/Address	Title in Name(s) Of	% of Ownership	Date Sold	Sale Price	Amount Owning	Payment Amt./Freq.	Payments Current?	Mortgages and Land Contracts Payable				Owned To
								Payment Amt/Freq	Int. Rate	Current Balance	Mat. Date	
				\$	\$	\$ _____/_____ _____		\$ _____/_____ _____		\$		
						\$ _____/_____ _____		\$ _____/_____ _____				
						\$ _____/_____ _____		\$ _____/_____ _____				
						\$ _____/_____ _____		\$ _____/_____ _____				
Total Land Contracts or Mortgages Receivable					\$	Total Liabilities					\$	

Section 7: Partnerships														
Name of Partnership	Type of Investment	Owned by Applicant/Joint Applicant?	General or Limited Partner?	% Partner	Address	Date Acquired	Cost	Market Value	Withdrawals & Distributions To Date	Balance Cash Payments Required	Future Cash Payments Required	Frequency	Next Due	Final Due
							\$	\$	\$	\$	\$			
Total Partnership and Related Liabilities										\$	\$			

Section 8: Life Insurance Carried										Disability Insurance	Applicant	Joint Applicant
Name of Insurance Company	Agency Name	Agent's Name	Agent's Phone Number	Policy Face Amount	Type of Policy	Owned By	Beneficiary	Cash Surrender Value	Outstanding Loans	Name of Company		
								\$	\$			
Total Cash Value of Insurance and Related Liabilities									\$	\$		
										Name of Agency		
										Agent's Name/Phone		
										Monthly Distribution if Disabled		
										Number of Years Covered		

Section 9: Loans Payable to Banks and Others											
Name of Lender	Debt in Name(s) Of	Account Number	Line Amount if Line of Credit	Original Balance	Amount Owning	Interest Rate	Payment Frequency	Payment Amount	Maturity Date	Collateral (None, if unsecured)	
			\$	\$	\$			\$			
Total Loans Payable to Banks and Others					\$						

Personal Information	Applicant	Joint Applicant
Do you have a will, trust or estate plan? If yes, name a personal representative or trustee.	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you a partner, officer, or director in any other venture? (If yes, explain on separate sheet).	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Number of dependents		
Are you a defendant in any suits or legal actions? (Explain on separate sheet).	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you or any firm in which you were a major owner ever declared bankruptcy? (If yes, explain on separate sheet).	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Income Tax Returned filed through (date):		
Have you ever been convicted of a felony?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

Contingent Liabilities								
Are you a guarantor, co-maker or endorser for any debt of an individual, corporation, or partnership?			Do you have any outstanding letters of credit or surety bonds?			Are any of your tax obligations past due?		
Applicant <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount \$	Description/Details*	Applicant <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount \$	Description/Details*	Applicant <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount \$	Description/Details*
Joint Applicant <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount \$	Description/Details*	Joint Applicant <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount \$	Description/Details*	Joint Applicant <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount \$	Description/Details*
Are there any suits, judgements, or legal actions pending against you?			Are you contingently liable on any lease or contract?			Are any tax returns currently being audited or contested? If yes, what years?		
Applicant <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount \$	Description/Details*	Applicant <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount \$	Description/Details*	Applicant <input type="checkbox"/> Yes <input type="checkbox"/> No	Years	Description/Details*
Joint Applicant <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount \$	Description/Details*	Joint Applicant <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount \$	Description/Details*	Joint Applicant <input type="checkbox"/> Yes <input type="checkbox"/> No	Years	Description/Details*
Do you have any other contingencies not already described above?								
Applicant <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount \$	Description/Details*						
Joint Applicant <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount \$	Description/Details*						

*If space provided is not adequate, attach a separate schedule.

I certify the above and that the statements contained in the attachments are true and accurate as of the date indicated below. I authorize DFCU Financial to make inquiries as necessary to verify the accuracy of the statements made and to determine my creditworthiness. These statements are made for the purpose of either obtaining a loan or guaranteeing a loan. In the event DFCU Financial is unable to extend credit, I give authorization to DFCU Financial to release information regarding my business and personal information to alternative lending sources in order to facilitate the possibility of receiving financing. Borrower agrees to hold DFCU Financial harmless against any liabilities that arise out of their referral of the above mentioned business to an alternative lending source.

Regulations B and the Equal Credit Opportunity Act requires that a lender obtain evidence of each loan applicants intent to apply for joint credit before a credit decision can be made. Failure to complete when required will render the application/request for credit incomplete.

JOINT INTENT

- I (we) intend to apply for joint credit.
- I (we) do not intend to apply for joint credit.

Signature of Applicant

Printed Name

Date

Signature of Joint Applicant

Printed Name

Date