



PERSONAL FINANCIAL STATEMENT

| Section 1: Individual Information | | Section 2: Other Party Information | |
|-----------------------------------|------------|------------------------------------|------------|
| Name | | Name | |
| Residence Address | | Residence Address | |
| City, State & Zip | | City, State & Zip | |
| Position or Occupation | | Position or Occupation | |
| Business Name | | Business Name | |
| Business Address | | Business Address | |
| City, State & Zip | | City, State & Zip | |
| Res. Phone | Bus. Phone | Res. Phone | Bus. Phone |
| Cell Phone | DOB | Cell Phone | DOB |
| Email | | Email | |
| SSN | | SSN | |

| Section 3: Statement of Financial Condition As Of: | | | |
|--|--------------|------------------------------------|--------------|
| Assets | In Dollars | Liabilities | In Dollars |
| (do not include Assets of doubtful value) | (Omit Cents) | | (Omit Cents) |
| Cash on Hand and in Banks | | Notes Payable to banks - secured | |
| US Gov't & Marketable Sec. (Sch. A) | | Notes Payable to banks - unsecured | |
| Non Marketable Securities (Sch. B) | | Notes Payable to relatives | |
| Real Estate Owned (Sch. C) | | Unpaid Taxes | |
| Notes Receivable | | Real Estate Mortgages (Sch. C) | |
| Furniture & Fixtures | | Other Debts (Sch. E) | |
| Automobiles | | | |
| Cash Value - Life Insurance (Sch. D) | | | |
| Other Assets - Itemize: | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | Total Liabilities | |
| | | Net Worth | |
| Total Assets | | Total Liabilities & Net Worth | |

| Sources of Income for Year Ended | Personal Information (give details on back) |
|--|--|
| Salary, bonuses & commissions | Do You Have a Will <input type="checkbox"/> Yes <input type="checkbox"/> No If so, name of executor: |
| Dividends | |
| Real Estate Income | |
| <p>Other Income: Alimony, child support, or separate maintenance income need not be revealed if you do not wish to have it considered as a basis for repaying the obligation. Alimony, child support or separate maintenance received under: <input type="checkbox"/> court order <input type="checkbox"/> written agreement <input type="checkbox"/> oral understanding. (If this application is being taken orally, this preceding statement should be read prior to any questions regarding income).</p> <p><input type="checkbox"/> If you are applying for individual credit, but are relying on income from alimony, child support, or separate maintenance or on the income or assets or another person as basis for repayment of the credit requested, complete all sections providing information in Section 2 about the person whose alimony, child support or maintenance payments or income or assets you are relying.</p> | Are you a partner or an officer in any venture? If so, describe: |
| | Are you obligated to pay alimony, child support or separate maintenance payments? If so, describe: |
| | Are any assets pledged other than as described on schedules? If so, describe: |
| Other Income | |
| Total | Income tax settled through (date): |
| Contingent Liabilities | Are you a defendant in any suits or legal actions? |
| Do you have any contingent liabilities? If so, describe: | |
| | Personal bank accounts carried at: |
| As indorser; co-maker or guarantor? \$ | |
| On leases or contracts? | Have you ever been declared bankrupt in the last 14 years? |
| Legal claims | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Other special debt | |

SCHEDULE A - US Government & Marketable Securities

| # of Shares | Description | In Name Of | Pledged? | Market Value |
|-------------|-------------|------------|----------|--------------|
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

SCHEDULE B - Non-Marketable Securities

| # of Shares | Description | In Name Of | Pledged? | Source of Value | Value |
|-------------|-------------|------------|----------|-----------------|-------|
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

SCHEDULE C - Real Estate Owned

| Address & Type of Property | In Name Of | Cost/ Date Acquired | Market Value | Mortgage Amt. |
|----------------------------|------------|---------------------|--------------|---------------|
| | | | | |
| | | | | |
| | | | | |
| | | | | |

SCHEDULE D - Life Insurance Carried

| Insurance Company | Owner | Beneficiary | Face Amount | Policy Loans | Cash Surrender Value |
|-------------------|-------|-------------|-------------|--------------|----------------------|
| | | | | | |
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| | | | | | |
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SCHEDULE E - Other Debts

| Notes and Accounts Owed By Me To: | Current Amt. | Payment | Security Pledged |
|-----------------------------------|--------------|---------|------------------|
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Additional Personal Information

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Submission of this financial statement and information contained herein constitutes a request for credit, to Charter Bank, in the amount of _____
for the purpose of _____

I am applying for individual credit. _____

We are applying for joint credit. _____

The information contained in this statement is provided for the purpose of obtaining or maintaining credit with Charter Bank on behalf of the undersigned, or persons, firms, or corporations in whose behalf the undersigned may either severally, or jointly with others, execute a guaranty in favor of Charter Bank. Each undersigned understands that Charter Bank is relying on the information provided herein (including the designation made as to ownership of property) in deciding to grant or continue credit. Each undersigned represents and warrants that the information provided is true and complete and that Charter Bank may consider this statement as continuing to be true and correct until a written notice of a change is given to Charter Bank by the undersigned. Charter Bank is authorized to make all inquiries it deems necessary, including the obtaining of a credit bureau report, to verify the accuracy of the statements made herein, and to determine the undersigned credit worthiness. Charter Bank is authorized to answer questions about its credit experience with the undersigned. The undersigned acknowledge(s) receipt of a copy of this instrument.

| | | |
|------------------------|--|-------------------------|
| Date: | | |
| Signature (Individual) | | Signature (Other Party) |