

Confidential Personal Financial Statement

To: The First National Bank and Trust Company, Newtown, PA 18940

From:		
Name	D.O.B.	Social Security #
Name	D.O.B.	Social Security #
Address	Home Phone #	
Email Address	Business Phone #	
	Cell Phone #	

The following statement of condition, as of _____ is submitted for the purpose of procuring, establishing and maintaining credit with you in 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 your favor. The undersigned warrants that this financial statement is true and correct and that you may consider this statement as continuing, to be true and correct until a written notice of a change is given to you by the undersigned.

Fill all blanks, writing "NO" or "None" where necessary to complete.

Assets	Liabilities																																																				
<p>Cash:</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20%;">Cash in</td> <td style="width: 20%; border-bottom: 1px solid black;"></td> <td style="width: 10%;">Bank</td> <td style="width: 10%; border-bottom: 1px solid black;"></td> </tr> <tr> <td>Cash in</td> <td style="border-bottom: 1px solid black;"></td> <td>Bank</td> <td style="border-bottom: 1px solid black;"></td> </tr> <tr> <td>Cash in</td> <td style="border-bottom: 1px solid black;"></td> <td>Bank</td> <td style="border-bottom: 1px solid black;"></td> </tr> <tr> <td>Total Cash</td> <td style="border-bottom: 3px double black;"></td> <td style="text-align: center;">\$</td> <td style="border-bottom: 3px double black;"></td> </tr> </table> <p>Notes Receivable (Sched.A) </p> <p>Cash Value Life Ins. (Sched.B) </p> <p>Securities (Market Value) (Sched.C) </p> <p>Retirement (Sched.D) </p> <p>Real Estate (Value) (Sched.E) </p> <p>Other Assets (Sched.F) </p> <p>TOTAL ASSETS \$ </p>	Cash in		Bank		Cash in		Bank		Cash in		Bank		Total Cash		\$		<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20%;">Notes Payable (Sched.G)</td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%; border-bottom: 1px solid black;"></td> </tr> <tr> <td>Other Payables (Sched.H)</td> <td></td> <td></td> <td style="border-bottom: 1px solid black;"></td> </tr> <tr> <td>Life Insurance Loan (Sched.B)</td> <td></td> <td></td> <td style="border-bottom: 1px solid black;"></td> </tr> <tr> <td>Mortgage Balance (Sched.E)</td> <td></td> <td></td> <td style="border-bottom: 1px solid black;"></td> </tr> <tr> <td>Total Liabilities</td> <td></td> <td style="text-align: center;">\$</td> <td style="border-bottom: 3px double black;"></td> </tr> <tr> <td colspan="4" style="padding: 10px 0 0 0;">NET WORTH</td> </tr> <tr> <td colspan="4" style="padding: 0 0 0 0;">(Assets - Liabilities)</td> </tr> <tr> <td colspan="4" style="padding: 10px 0 0 0;">TOTAL LIABILITIES & NET WORTH</td> </tr> <tr> <td colspan="3"></td> <td style="border-bottom: 3px double black; text-align: right;">\$ </td> </tr> </table>	Notes Payable (Sched.G)				Other Payables (Sched.H)				Life Insurance Loan (Sched.B)				Mortgage Balance (Sched.E)				Total Liabilities		\$		NET WORTH				(Assets - Liabilities)				TOTAL LIABILITIES & NET WORTH							\$
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CONTINGENT LIABILITIES

- | | |
|---|---|
| <p>1. Are you the co-maker or guarantor on any loans, leases, or contracts? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>2. Are you involved in any pending legal actions? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>3. Are you presently subject to any unsatisfied judgments or tax liens? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>4. Have you been through bankruptcy or settled any debts for less than the amounts owed? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> | <p>5. Are there any Letters of Credit for which you have a liability in? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>6. Are you currently under any obligation for child or spousal support? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> |
|---|---|

If yes to any questions, describe here:

Source of Income #1

Employer

Employer Address

Employer Phone #

Type of Business

Your Position & Length of Employment

Source of Income #2

Employer

Employer Address

Employer Phone #

Type of Business

Your Position & Length of Employment

Annual Income

Salary

Bonus & Commissions

Dividends & Interest

Net Rental Income

Other*

Total Income

Annual Income

Salary

Bonus & Commissions

Dividends & Interest

Net Rental Income

Other*

Total 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 this obligation.**

NOTES RECEIVABLES – SCHEDULE A

Due from: (Name and Address)	Maturity Date	Payments	G – Good D - Doubtful	Amount
			Total	

LIFE INSURANCE POLICIES – SCHEDULE B

Name of Company	Beneficiary	Face Value	Cash Value	Loans
			Total	

SECURITIES – SCHEDULE C

Type (If Gov't Name Series)	In Name of	Market Value
		Total

RETIREMENT PLANS – SCHEDULE D

Type (IRA's, Keogh, Profit Sharing, 401k, etc.)	In Name of	Amount
		Total

REAL ESTATE – SCHEDULE E

Res. Com. Ind.	Address	Title in Name of	% of Ownership	Purchase Date	Cost	Current Value	Mortgage Balance	Mortgage Maturity	Mortgage Held By	Type of Mortgage A.R.M., Fixed, etc.	Monthly Pymt
Total											

OTHER ASSETS– SCHEDULE F

Type	Lower of Cost or Market or Insured Value
Total	

NOTES PAYABLE (Banks – Finance Co's) – SCHEDULE G

To Whom Owed	Maturity Date	Collateral (Auto, Real Estate, etc.)	Monthly Payment	Amount
Total				

PAYABLES (including Revolving Charge Plans, Past due Taxes, Installment Plans, etc.) – SCHEDULE H

To Whom Owed	Monthly Repayment	Amount
Total		

Do (either of) you have a will? [redacted]

When is the will dated? [redacted]

List the Name and Address of Executors:

[redacted]	[redacted]
[redacted]	[redacted]
[redacted]	[redacted]

List the Names and ages of dependents:

[redacted]

Have you ever been audited by the IRS? [redacted]

If yes, list date and outcome: [redacted]

Have you been, or are you now, involved in Bankruptcy proceedings (within previous 7 years)?

[redacted]

If yes, explain [redacted]

Do you have disability insurance? [redacted] If yes, describe policy (benefits per month, when do benefits start, etc.): [redacted]

Are you a partner or do you have an interest in any other business or venture other than mentioned above? [redacted]

If yes, give details: [redacted]

For the purpose of obtaining and/or maintaining credit for the Undersigned (the person or persons signing below) or another person or persons, with The First National Bank, the Undersigned submits the above information as being a true, accurate statement of their financial condition of the date shown. The Undersigned agree that the Bank may at its discretion make whatever inquiries it deems necessary in connection with the information contained herein or in the course of any credit extended in reliance on this information. The Undersigned authorize any person or Consumer Reporting Agency to compile and furnish to the Bank any information it may have or obtain in response to such credit inquiries. The Bank is authorized to answer questions from others concerning the Bank's credit experience.

The undersigned agree to notify the Bank immediately of any change in their financial condition which would adversely affect their ability to repay any of their obligations to the Bank according to terms. Should the Bank learn of such an adverse change without notice from the Undersigned, or should any of the information in the above statement be untrue or misleading or materially incomplete, the Undersigned agree that all their indebtedness, jointly or severally, to the Bank and all indebtedness of another Bank to which is guaranteed by the Undersigned, may at the Bank's election become immediately due and payable without notice.

Unless the Bank itself learns otherwise, or is notified otherwise by the Undersigned, it is understood that the Bank may continue to rely upon the information herein as a true, accurate statement of the financial condition of the Undersigned. In the event of a continuing obligation or guaranty to the Bank, the Undersigned agree to supply such current financial or other information as the Bank may reasonably request from time to time. This and all such financial statements shall become the property of the Bank.

EACH PARTY TO THE STATEMENT MUST SIGN BELOW

SIGNATURE: _____ (SEAL) DATE SIGNED: _____

SIGNATURE: _____ (SEAL) DATE SIGNED: _____