CONFIDENTIAL

PERSONAL FINANCIAL STATEMENT

AS OF ______________________________

IMPORTANT: DIRECTIONS TO APPLICANT(S)

To: **HERITAGE COMMUNITY BANK**

APPLICANT'S NAME:______________________________

DATE OF BIRTH:______________________________

SOCIAL SECURITY NO:______________________________

CO-APPLICANT'S NAME:______________________________

DATE OF BIRTH:______________________________

SOCIAL SECURITY NO:______________________________

HOME ADDRESS: ______________________________

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HOME PHONE:______________________________

MOBILE PHONE:______________________________

Read directions before completing Financial Statement.

Please check appropriate box

☐ **Individual credit**-If relying on your own income and assets and not the income and assets of a spouse or another person as a basis for extension or repayment or credit, complete the Financial Statement below only as it applies to you, individually. Do not provide any information about a spouse or other person. Sign the Financial Statement.

☐ **Joint Credit**

☐ **Individual Relying upon Income or assets of spouse or other person**

If applying for joint credit or for individual credit relying on income or assets of a spouse or another person for extension and repayment of credit requested, complete the Financial Statement below.

Include information about income, assets and liabilities of the spouse or other person. Both Applicant and Spouse or Co-Applicant sign this statement.

Please do not leave any questions unanswered. Use "na" or "none" where necessary.

Assets	*In Even Dollars*	*Liabilities and Net Worth*	*In Even Dollars*
Cash on hand and in Banks—See Schedule A	$	Unpaid Taxes	$
U.S. Government Securities—See Schedule B		Liabilities of Partnerships & Joint Ventures	
Listed Securities—See Schedule B		Liabilities of Proprietorships	
Unlisted Securities—See Schedule B		Real Estate Mortgages Payable—See Schedule C	
Other Equity Interests—See Schedule B		Vehicles, Boats, Machinery, and Equipment Payable—See Schedule D	
Accounts and Notes Receivable		Life Insurance Loans—See Schedule E	
Real Estate Owned—See Schedule C		Other Loans Payable—See Schedule G	
Vehicles, Boats, Machinery, and Equipment—See Schedule D		Notes Payable: Relatives	
Cash Value Life Insurance—See Schedule E		Other:	
Other Assets: See Schedule F			
		TOTAL LIABILITIES	$
		NET WORTH	$
TOTAL ASSETS	$	**TOTAL LIABILITIES AND NET WORTH**	$

Contingent Liabilities	*In Even Dollars*	*General Information (continued)*
As endorser, co-maker or guarantor	$	Are you a defendant in any suits or legal action? ☐ No ☐ Yes
On leases		If so, explain:
Legal claims		Have you ever taken bankruptcy? ☐ No ☐ Yes
Provision for federal income taxes		If so, explain:
Other special debt, e.g., recourse or repurchase liability		Do you have a will? ☐ No ☐ Yes With whom?
		Do you have a trust? ☐ No ☐ Yes With whom?
TOTAL	$	Number of dependents ______ Ages _______________
Sources of Income For Year Ended: (Attach a copy of your most recent Income Tax Return.)	*In Even Dollars*	*General Information*
Salary	$	Employer
Bonus and Commissions		Position or Profession / No. Years
Dividends		Employer's Address
Real Estate Income		Phone No.
*Other Income:		Partner, officer or owner in any other venture? ☐ No ☐ Yes
Joint Applicant Salary, if Applicable		If so, explain:
TOTAL	$	
*Alimony, child support or separate maintenance payments need not be disclosed unless relied upon as a basis for extension of credit. If disclosed, payments received under ☐ court order ☐ written agreement ☐ oral understanding.		Are any assets pledged? ☐ No ☐ Yes Detail in Schedule A
		Income taxes settled through (Date)

Schedule A: Banks, Brokers, Savings & Loan Association, Finance Companies or Credit Unions. List here the names of all the institutions at which you maintain a deposit account..

Name of Institution	*Balance on Deposit*	*Type of Deposit*	*Secured by What Assets*
TOTAL	$		

Schedule B: U.S. Governments, 401(k), Pensions, Annuities, Stocks (Listed & Unlisted), Bonds (Gov't & Comm.), and Partnership Interests (General & Ltd.)

Number of Shares, Face Value (Bonds), or % of Ownership	*Indicate:* *1. Agency or name of company issuing security or name of partnership* *2. Type of investment or equity classification* *3. Number of shares, bonds or % of ownership held* *4. Basis of valuation**	*In Name of*	**Market Value*	*Pledged Yes X*	*Pledged No X*
		TOTAL	$		

Schedule C: Real Estate Owned (and related debt, if applicable)

Description of Property or Address	*Title in Name Of*	*Acquired*	*Improvements*	*Value*	*Balance*	*Payment*	*Holder*
		TOTAL	$	$	$		

Schedule D: Vehicles, Boats, Machinery, and Equipment (Or related debt, if applicable)

Description (Include Year, Make, and Model	*Title in Name Of*	*Date Acquired*	*Market Value*	*Loan Balance*	*Loan Payable To*	*Monthly Payment*
		TOTAL	$	$		

Schedule E: Life Insurance Carried

Name of Company	*Face Amount*	*Cash Surrender Value*	*Loans*	*Beneficiary*
TOTAL	$	$		

Schedule F: Other Assets (Personal Property, Furniture, Collections, Jewelry, ETC.)

Description	*Market Value*	*To Whom Pledged*
TOTAL	$	

Schedule G: Other Loans Payable

Name and Address of Lender	*Type of Loan (Credit Card, Student, ETC.)*	*Original Date*	*Credit Limit*	*Loan Balance*	*Payment Amount*
			TOTAL	$	

Representations and Warranties

I/we have carefully read and submitted the foregoing information provided on all three pages of this statement to the Bank named above. The information is presented as a true and accurate statement of my/our financial condition on the date indicated. This statement is provided for the purpose of obtaining and maintaining credit with said Bank. I/we agree that if any material change(s) occur(s) in my/our financial condition that I/we will immediately notify said Bank of said change(s) and unless said Bank is so notified it may continue to rely upon this financial statement and the representations made herein as a true and accurate statement of my/our financial condition.

I/we authorize the Bank to make whatever credit inquiries it deems necessary in connection with this financial statement. I/we authorize and instruct any person or consumer reporting agency to furnish to the Bank any information that it may have or obtain in response to such credit inquiries.

I/we also hereby certify that no payment requirements listed herein are delinquent or in default except as follows; if “NONE” so state.

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I/we fully understand that it is a federal crime punishable by fine or imprisonment or both to knowingly make any false statements concerning any of the above facts, pursuant to 18 U.S.C. Section 1014.

Applicant’s Signature ______________________________ Date _________

This Statement Received By:_________________________

Spouse’s or Co-Applicant’s Signature ______________________________ Date _________

Date:____________Branch:___________