INSTRUCTIONS FOR COMPLETING THE PERSONAL FINANCIAL STATEMENT

If you prefer to use the computer to fill out the form:

1) Fill in all the gray-highlighted areas. Using the tab key will automatically move the cursor to those cells which require your input. Cells which aren't highlighted will automatically populate as necessary using the information you input into the schedules on the second page of the form.

2) Print out the worksheet.

3) Sign and date the second page of the statement. An e-mail copy will not suffice; your signature is required.

4) Mail or email it to your loan officer.

If you prefer to fill out the form by hand:

1) Print out the worksheet.

2) Fill out every area of the worksheet. (Ignore highlights)

3) Sign and date the second page of the statement.

4) Mail or email it to your loan officer.

Heritage Bank
Brilliant banking.™

PERSONAL FINANCIAL STATEMENT

IMPORTANT: Read these directions before completing this Statement.

☐ If you are applying for individual credit in your own name and are relying on your own income or assets and not the income or assets of another person as the basis for repayment of the credit requested, complete only Sections 1 and 3.

☐ 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 of another person as a basis for repayment of the credit requested, complete all Sections providing information in Section 2 about the person whose alimony, support, or maintenance payments or income or assets you are relying.

☐ We intend to apply for joint credit. Complete all Sections, providing information in Section 2 about the joint applicant and initial here.
Applicant_____ **Joint Applicant**_____

☐ If this statement relates to your guaranty of the Indebtedness of other person(s), firm(s) or corporation(s), complete Sections 1 and 3.

SECTION 1 - INDIVIDUAL INFORMATION (Type or Print)		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	Yrs. There	Business Name	Yrs. There
Business Address		Business Address	
City, State & Zip		City, State & Zip	
Cell Phone Bus.		Cell Phone Bus.	
Email		Email	

SOURCES OF INCOME FOR YEAR END		PERSONAL INFORMATION	
Salary, bonuses & commissions		Do you have a will? Select	If so, name executor.
Dividends			
Real estate income		Are you a partner or officer in any other venture? If so, describe.	
Other income (Alimony, child support, or other maintenance			
income need not be revealed if you do not wish to have it		Are you obligated to pay alimony, child support or separate payments?	
considered as a basis for repaying this obligation)			
		Are any assets pledged other than as described on schedules?	
TOTAL	$ 0	Income tax settled through (date)	

CONTINGENT LIABILITIES			
Do you have any contingent liabilities? If so, describe.		Are you a defendant in any suits or legal actions?	
		Personal bank accounts carried at	
As endorser, co-maker or guarantor?			
On leases or contracts?			
Legal claims		Have you ever been declared bankrupt? If so, describe.	
Other special debt			
Amount of contested income tax liens			

SCHEDULE A - CASH IN OUR BANK & OTHER BANKS

Bank Name	Type of Account	Account Number	Balance

SCHEDULE B - 401K + RETIREMENT ACCOUNTS + MARKETABLE SECURITIES

Number of Shares Or Face Value (Bonds)	Description	In Name Of	Are These Pledged?	Market Value

SCHEDULE C - NON-MARKETABLE SECURITIES

Number of Shares	Description	In Name Of	Are These Pledged?	Source of Value	Value

SCHEDULE D - PARTIAL INTERESTS IN REAL ESTATE EQUITIES

Address & Type Of Property	Title In Name Of	% Of Ownership	Date Acquired	Cost	Market Value	Mortgage Holder	Mortgage Payment	Mortgage Balance
		0.00%						
		0.00%						

SCHEDULE E - REAL ESTATE OWNED

Address & Type Of Property	Title In Name Of	Date Acquired	Cost	Market Value	Mortgage Holder	Mortgage Payment	Mortgage Balance

SCHEDULE F - LIFE INSURANCE CARRIED, INCLUDING N.S.L.I. AND GROUP INSURANCE

Name Of Insurance Company	Owner of Policy	Beneficiary	Face Amount	Policy Loans	Cash Value

SCHEDULE G - AUTO & MISC. ASSETS

Type of Property	Title in the Name of	Lien Holder	Cost	Market Value	Loan Balance

SCHEDULE H - ALL BANKS OR FINANCE COMPANIES WHERE CREDIT IS OUTSTANDING

Name & Address Of Lender	Credit In The Name Of	Collateral	Original Date	Payment Amount	Current Balance	Original Balance

SECTION 3 - STATEMENT OF FINANCIAL CONDITION AS OF			
ASSETS (Do not include Assets of doubtful value)	In Dollars (Omit cents)	LIABILITIES	In Dollars (Omit cents)
Cash on hand and in banks - Schedule A	0	Notes payable to banks - secured (see Schedule G)	0
Marketable Securities - see Schedule B	0	Notes payable to banks - unsecured (see Schedule H)	0
Non-Marketable Securities - see Schedule C	0	Due to brokers	
Securities held by broker in margin accounts		Amounts payable to others - secured	
Restricted or control stocks		Amounts payable to others - unsecured	
Partial interest in Real Estate Equities - see Schedule D	0	Accounts and bills due	
		Unpaid income tax	
Real Estate Owned - see Schedule E	0	Other unpaid taxes and interest	
Loans Receivable		Real estate mortgages payable - see Schedule E	0
Automobiles and other personal property- Sch G	0		
Cash value-life insurance - see Schedule F	0	Other debts - itermize	
Other assets - itemize			
		TOTAL LIABILITIES	0
		NET WORTH	0
TOTAL ASSETS	0	TOTAL LIABILITIES AND NET WORTH	0

The information contained in this statement is provided for the purpose of obtaining, or maintaining credit with you 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 your favor. Each undersigned understands that you are 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 you may consider this statement as continuing to be true and correct until a written notice of change is given to you by the undersigned. You are authorized to make all inquiries you deem necessary and to obtain a consumer credit report from any credit reporting agency to verify the accuracy of the statements made herein, in connection with Bank's preliminary evaluation of undersigned, or during any periodic review of undersigned deemed necessary by Bank. You are authorized to answer questions about your credit experience with me/us.

Signature (Individual) _____

Date Signed _____ SSN# _____ Date of Birth _____

Signature (Individual) _____

Date Signed _____ SSN# _____ Date of Birth _____

SCHEDULE A - CASH IN OUR BANK & OTHER BANKS (CONTINUED)

Bank Name	Type of Account	Account Number	Balance

SCHEDULE B - 401K + RETIREMENT ACCOUNTS + MARKETABLE SECURITIES (CONTINUED)

Number of Shares Or Face Value (Bonds)	Description	In Name Of	Are These Pledged?	Market Value

SCHEDULE C - NON-MARKETABLE SECURITIES (CONTINUED)

Number of Shares	Description	In Name Of	Are These Pledged?	Source of Value	Value

SCHEDULE D - PARTIAL INTERESTS IN REAL ESTATE EQUITIES (CONTINUED)

Address & Type Of Property	Title In Name Of	% Of Ownership	Date Acquired	Cost	Market Value	Mortgage Holder	Mortgage Payment	Mortgage Balance
		0.00%						
		0.00%						

SCHEDULE E - REAL ESTATE OWNED (CONTINUED)

Address & Type Of Property	Title In Name Of	Date Acquired	Cost	Market Value	Mortgage Holder	Mortgage Payment	Mortgage Balance

SCHEDULE F - LIFE INSURANCE CARRIED, INCLUDING N.S.L.I. AND GROUP INSURANCE (CONTINUED)

Name Of Insurance Company	Owner of Policy	Beneficiary	Face Amount	Policy Loans	Cash Value

SCHEDULE G - AUTO & MISC. ASSETS (CONTINUED)

Type of Property	Title in the Name of	Lien Holder	Cost	Market Value	Loan Balance

SCHEDULE H - ALL BANKS OR FINANCE COMPANIES WHERE CREDIT IS OUTSTANDING (CONTINUED)

Name & Address Of Lender	Credit In The Name Of	Collateral	Original Date	Payment Amount	Current Balance	Original Balance