

PERSONAL FINANCIAL STATEMENT

Submitted to: **First Hope Bank**
PO Box 296, Hope, NJ 07844

Date: _____

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, or if this statement relates to your guaranty of the indebtedness of other person(s), firm(s) or corporation(s), complete only Sections 1, 3, and 4.
- 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. Provide all information in Section 2 about the person whose alimony, support, or maintenance payments or income or assets you are relying on. 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.

Section 1 - Individual Information (type or print)	Section 2 - Other Party Information (type or print)
Name _____	Name _____
Address _____ _____	Address _____ _____
City, State & Zip _____	City, State & Zip _____
Social Security # _____	Social Security # _____
Date of Birth _____	Date of Birth _____
Position or occupation _____	Position or occupation _____
Business name _____	Business name _____
Business address _____ _____	Business address _____ _____
City, State & Zip _____	City, State & Zip _____
Length at present address _____	Length at present address _____
Length of employment _____	Length of employment _____
Res. Phone _____	Res. Phone _____
Bus. Phone _____	Bus. Phone _____
E-mail Address _____	E-mail Address _____

Have (either of) you or any firm in which you were a major owner ever declared bankruptcy, or settled any debts for less than the amounts owed? If yes, please provide details on a separate sheet. Yes No

Are (either of) you a defendant in any suit or legal action? Yes No

Are (either of) you presently subject to any unsatisfied judgments or tax liens? Yes No

When, if ever, have (either of) you been audited by IRS?

Section 3 - Statement of Financial Condition as of _____, 20							
Assets <small>(Do not include assets of doubtful value)</small>	In dollars		If joint, with whom	Liabilities	In dollars		If joint, with whom
	Individual	Joint			Individual	Joint	
Cash, Checking & Savings, CD's - see Schedule A				Notes payable to banks & others - see Schedule H			
U.S. Gov't & marketable securities - see Schedule B				Due to brokers			
Non-marketable securities - see Schedule C				Amounts payable to others - secured			
Securities held by broker in margin accounts				Amounts payable to others - unsecured			
Restricted, control or margin account stocks				Accounts & bills due			
Real estate owned - see Schedule D				Unpaid income tax			
Accounts, loans, & notes receivable				Other unpaid taxes & interest			
Automobiles				Real estate mortgages payable - see Schedules D & H			
Cash surrender value-life insurance - see Schedule E							
Deferred compensation/profit-sharing plans - see Schedule F							
Business ventures - see Schedule G				Total Liabilities			
Other assets/personal property itemize - see Schedule G				Net Worth			
Total Assets				Total Liabilities and Net Worth			

SCHEDULE A - CASH, CHECKING AND SAVINGS ACCOUNTS, CERTIFICATES OF DEPOSIT, MONEY MARKET FUNDS, ETC. (Use additional sheet if necessary)

Name of Financial Institution	Type of Account	Owner	(J)	If Pledges, to Whom?	Balance

SCHEDULE B - U.S. GOVERNMENT & MARKETABLE SECURITIES (Use additional sheet if necessary)

Number of Shares or Face Value of Bonds	Description	In Name of	Are these Registered, Pledged, or Held by Others?	Market Value	Exchanges Where Traded

SCHEDULE C - NON-MARKETABLE SECURITIES (Use additional sheet if necessary)

Number of Shares	Description	In Name of	Are these Registered, Pledged, or Held by Others?	Value	Method of Valuation

SCHEDULE D - IN VESTMENTS IN REAL ESTATE (Use additional sheet if necessary)

Description/Location of Real Estate Investment	(J)	Date of Original Investment/Amount	% Owned By You	Market Value of Your % of Investment	Present Balance	Monthly Payment	Mortgage Maturity Date	Mortgage Owed To

SCHEDULE E - LIFE INSURANCE CARRIED, INCLUDING GROUP INSURANCE (Use additional sheet if necessary)

Name of Insurance Company	Owner of Policy	Beneficiary and Relationship	Face Amount	Policy Loans	Cash Surrender Value

SCHEDULE F - VESTED INTEREST IN DEFERRED COMPENSATION/PROFIT-SHARING PLANS (Use additional sheet if necessary)

% Vested	Company Name	Account Number	Manner of Payout (Annuity, Lump Sum, etc.)	Distribution Date	Beneficiary	Amount

SCHEDULE G - BUSINESS VENTURES (Use additional sheet if necessary)

List Name and Address of Any Business Venture In Which You Are a Principal or Partner	Your Position/ Title in the Business	Line of Business	Years in Business	Total Assets Listed in Section 3	Your % of Ownership	Net Worth of Business	Present Net Value of Your Investment

SCHEDULE H - LOANS OWING BANKS, BROKERS, FINANCE COMPANIES, AND OTHERS (MASTERCARD, VISA, ETC.) (Use additional sheet if necessary)

Owing to (Acct. No.)	(J)	Date of Original Borrowing/Amount	Present Balance	Due	Monthly Payment	Date of Final Payment	Secured By

Annual Income		Annual Expenditures			Contingent Liabilities Estimated Amts.			
	Individual	Joint		Individual	Joint		Individual	Joint
Salary, bonuses & commissions	\$		Mtg/rental payments	\$		Do you have any of the following? Yes No		
Dividends & interest			R/E taxes & assessments			Contingent liabilities as endorser, Co-maker or guarantor? <input type="checkbox"/> <input type="checkbox"/>		
Real estate income			Taxes fed/state/local			On leases? On contracts? <input type="checkbox"/> <input type="checkbox"/>		
Other income			Insurance payments			Involvement in pending legal actions? <input type="checkbox"/> <input type="checkbox"/>		
(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.)			Other (car/charge cards)			Contested income tax liens? <input type="checkbox"/> <input type="checkbox"/>		
			Alimony, child support, maintenance			Any estimated capital gains tax on the unrealized asset appreciation? <input type="checkbox"/> <input type="checkbox"/>		
			Other expenses			Other special debt or circumstances? <input type="checkbox"/> <input type="checkbox"/>		
Total Income	\$		Total Exps	\$		If "yes" to any question(s) please describe on a separate sheet.		
						Total Contingent Liabilities	\$	

The information contained in this statement is provided to induce you to extend or to continue the extension of credit to the undersigned or to others upon the guaranty of the undersigned. The undersigned acknowledges and understands that you are relying on the information provided herein in deciding to grant or continue credit or to accept a guaranty thereof. Each of the undersigned represents, warrants, and certifies that (1) the information provided herein is true, correct and complete and gives a correct and complete showing of the financial condition of the undersigned, (2) the undersigned has no liabilities direct, indirect or contingent except as set forth in this statement, and (3) legal and equitable title to all assets listed herein is in the undersigned's sole name, except as may be herein otherwise noted. Each of the undersigned agrees to notify you immediately and in writing of any change in name, address, or employment and of any material adverse change (1) in any of the information contained in this statement or (2) in the financial condition of any of the undersigned or (3) in the ability of any of the undersigned to perform its (or their) obligations to you. In the absence of such notice or a new and full written statement, this should be considered as a continuing statement and substantially correct. You are authorized to make all inquiries you deem necessary to verify the accuracy of the information contained herein, and to determine the credit-worthiness of the undersigned and the undersigned hereby authorizes all persons of whom you make such inquiries to respond thereto in full. Each of the undersigned authorizes you to answer questions about your credit experience with the undersigned.

Date signed _____, 20____ Signature (individual) _____

Date signed _____, 20____ Signature (Other party) _____

RECERTIFICATION OF PERSONAL FINANCIAL STATEMENT

The undersigned acknowledges and understands that First Hope Bank (FHB) is relying on the information provided in the foregoing personal financial statement in deciding to grant or continue credit or to accept a guaranty thereof. Each of the undersigned represents, warrants and certifies that (1) the information provided herein is true, correct and complete and gives a correct and complete showing of the financial condition of the undersigned, (2) the undersigned has no liabilities, direct, indirect or contingent, except as set forth in this statement, and (3) legal and equitable title to all assets listed herein is in the undersigned's sole name, except as may be herein otherwise noted. Each of the undersigned agrees to notify FHB immediately and in writing of any change in name, address, or employment and of any material adverse change (1) in any of the information contained in this statement, (2) in the financial condition of any of the undersigned, or (3) in the ability of any of the undersigned to perform its obligations to FHB. In the absence of such notice or a new and full written statement, this should be considered as a continuing statement and substantially correct. FHB is authorized to make all inquiries as deemed necessary to verify the accuracy of the information contained herein, and to determine the credit-worthiness of the undersigned, and the undersigned hereby authorizes all persons of whom you make such inquiries to respond thereto in full. Each of the undersigned authorizes FHB to answer questions about its credit experience with the undersigned.

Date recertified _____, 20____ Signature (individual) _____

Date recertified _____, 20____ Signature (Other party) _____