

PERSONAL FINANCIAL STATEMENT

This statement prepared as of _____ for United Bank & Capital Trust Co.

DATE

If there is insufficient space on any schedule, please include separate listings in similar detail.

APPLICANT

Name		Social Security No.		Date of Birth
Home Address	City	State	Zip	
Mailing Address	City	State	Zip	
Occupation/Specialty	Home Phone	Business Phone	Email Address	
Employer/Address	Self Employed	Title	Length of Service	
Marital Status: <i>(only complete if applying for mortgage secured credit)</i> Married Separated Unmarried (include divorced, widowed)		Dependents: No: _____ Ages: _____		

CO-APPLICANT

Name		Social Security No.		Date of Birth
Home Address	City	State	Zip	
Mailing Address	City	State	Zip	
Occupation/Specialty	Home Phone	Business Phone	Email Address	
Employer/Address	Self Employed	Title	Length of Service	
Marital Status: <i>(only complete if applying for mortgage secured credit)</i> Married Separated Unmarried (include divorced, widowed)		Dependents: No: _____ Ages: _____		

ASSETS*

Cash: Include Checking, Savings, CDs, Money Market Funds (Schedule 1)	\$
Investments: Marketable Securities (Schedule 2)	
Investments: Closely held Companies/ Non-Marketable Securities (Schedule 3)	
Accounts & Notes Receivable, Undrawn Earnings (Schedule 4)	
Real Estate: (Schedule 5) Personal	
(Schedule 6) Investment	
(Schedule 7) Pension, 401(k), IRAs	
Automobiles	
Life Insurance Cash Value (Face Value \$ _____) (Schedule 8)	
Equity in Partnerships/Privatey Owned Business(es) (Schedule 9)	
Other Assets (Itemize and attach additional pages as needed.)	
TOTAL ASSETS	\$

LIABILITIES*

Notes Payable-Unsecured (Schedule 10)	\$
Notes Payable-Secured (Schedule 10)	
Real Estate Mortgages Owning: (Schedule 5) Personal	
(Schedule 6) Investment	
Installment Loans (Schedule 10)	
Credit Balances: (Schedule 11) Credit Cards/Lines	
Accrued Income Tax	
Other Liabilities (Itemize and attach additional pages as needed)	
TOTAL LIABILITIES	\$
NET WORTH (Total Assets Minus Total Liabilities)	\$
TOTAL LIABILITIES + NET WORTH	\$

*The asset and liability sections should only be completed jointly by co-applicants if their assets and liabilities are sufficiently joined so that the statement can be meaningfully and fairly represented on a combined basis; otherwise, separate statements and schedules are required. The schedules are sufficient to annotate separate ownership.

ANNUAL SOURCES OF INCOME**

Notice to Applicant: Your income from alimony, child support or separate maintenance need not be revealed if you choose not to have it considered in the basis for credit.

	APPLICANT	CO-APPLICANT
Salary (amount reported on W-2) or Professional Net Income	\$	\$
Bonus & Commissions		
Interest & Dividends		
Net Rental Income (Schedule 6)		
Business Income or Loss		
Royalties		
Other (Itemize and attach additional pages as needed.)		
TOTAL ANNUAL INCOME	\$	\$

** Complete CO-APPLICANT information only if financial statement is to apply for or maintain secured/joint credit, or if you are relying on co-applicant's income to repay credit.

MONTHLY EXPENSES**

	APPLICANT	CO-APPLICANT
Real Estate Mortgage Payments: (Schedule 5) Personal	\$	\$
(Schedule 6) Investment		
Notes Payable (Monthly) (Schedule 10)		
Installment Loans Payment (Schedule 10)		
Credit Payments: (Schedule 11) Credit Cards/Lines		
Home Equity Lines		
Lease Payments (Schedule 12)		
Savings (Include Retirement Plan, IRA, and Keogh accounts)		
Taxes (Estimated Income and Property Taxes)		
Alimony/Child Support		
Miscellaneous (Living expenses, insurance, premiums, education, medical expenses, etc.)		
Other (Itemize and attach additional pages as needed.)		
TOTAL MONTHLY EXPENSES	\$	\$

GENERAL INFORMATION

APPLICANT CO-APPLICANT
Yes No Yes No

If yes, please explain.

Are you a defendant in any suit or legal action?				
Are you presently subject to any unsatisfied judgments or tax liens?				
Have you ever declared bankruptcy?				
Are any tax returns being audited or contested?				
Are all related taxes paid?				

CONTINGENT LIABILITIES

APPLICANT CO-APPLICANT
Yes No Yes No

Please give brief description.

Endorser or Co-maker on Note (s)				
Letters of Credit				

Please indicate ownership of assets or liabilities in last box: "A" for Applicant, "C" for Co-Applicant, "J" for Joint.

Schedule 1- CASH: Checking, Savings, CD's, Money Market Funds

Financial Institution	Title of Account	Type of Account	Amount	A,C, or J

Schedule 2- INVESTMENTS: Marketable Securities (Registered and Traded: Stocks, Bonds, Mutual Funds)

Description of Security	Registered Owner(s)	Bond Par or Number Of Shares	Book Value	Market Value	Where Pledged	A,C, or J

Schedule 3- INVESTMENTS: Closely Held Companies / Non-Marketable Securities

Description of Security	Registered Owner(s)	Bond Par or No. of Shares	Book Value	Estimated Market Value	Where Pledged		A,C, or J

Schedule 4- ACCOUNTS & NOTES RECEIVABLE, UNDRAWN EARNINGS

Date of Account or Note	Due From	Original Balance	Present Balance	Repayment Terms	Security Held, If Any	A,C, or J

Schedule 5- REAL ESTATE: Personal

Description and Location	Title in Name Of	Original Investment Year	Original Dollar Investment	Mortgage Lender	Market Value	Mortgage Balance	Monthly Payments	A,C, or J

Schedule 6- REAL ESTATE: Investment

Description and Location	Title in Name of	Original Investment Year	Original Dollar Investment	Mortgage Lender	Market Value	Mortgage Balance	Monthly Payments	Net Rental Income	A, C, or J

Schedule 7- RETIREMENT ACCOUNTS: Pension, 401(k), IRAs

Name of Institution Where Held	Title of Account	Type of Account	Percent Vested	Market Value	A, C, or J

Schedule 8- INSURANCE: Life, Disability, Malpractice

Insurance Company	Policy Owner/Name of Insured	Beneficiary	Policy Face Amount	Cash Surrender	Policy Loans	Premium Payments	Where Assigned	A, C, or J

Schedule 9- EQUITY IN PARTNERSHIPS/PRIVATELY OWNED BUSINESS(ES)

Business Name and Address	Form of Ownership	Nature of Business	Date of Investment	Original Investment Cost	% of Ownership	Estimated Market Value of Investment	A,C, or J

Schedule 10- NOTES PAYABLE & INSTALLMENT LOANS: Unsecured, Secured

Owed To (Account #)	Balance Amount	Payment	Frequency/ Maturity	Terms	Secured By	A,C, or J

Schedule 11- CREDIT ACCOUNTS: Credit Cards, Credit Lines, Home Equity Line

Issuer and Account Number	Credit Limit	Current Balance	Monthly Payments	Secured By	A,C, or J

Schedule 12- LEASES

Item Description	Year Manufactured	Balance Amount	Monthly Payment	Lease Term	A,C, or J

PERSONAL ADVISORS (Please List Name and Telephone Number)

Attorney _____	Accountant _____
Investment Advisor/Financial Planner _____	Insurance Agent _____

You represent that all information in this application is accurate and complete, that you are competent to enter into contracts and that no bankruptcy proceeding is in progress or anticipated which involves you. We are not obligated to grant you credit and we may retain this application whether or not credit is granted. You authorize us to obtain information from others concerning your credit standing and other relevant information impacting on this application and to provide to others information about our experience with you.

Applicant's Signature _____	Date _____
Co-Applicant's Signature _____	Date _____

TO APPLICANT (S)- RETAIN COPY OF THIS STATEMENT FOR YOUR RECORDS