



NAME _____ Financial Statement Individual
 Home Address _____ Home _____
 Business Address _____ Work _____

I guarantee that the information we have given you below is a true accurate statement of my financial condition as of _____.

Balance Sheet

| Assets | | Liabilities | |
|---|----|---------------------------|----|
| Cash in Hand & in Accounts (Sch.1) | \$ | Accounts Payable | \$ |
| Accounts & Notes Receivables (Sch.2) | \$ | Notes Payable (Sch.6) | \$ |
| US Government Bonds | \$ | Mortgages (Sch. 5B) | \$ |
| Listed Marketable Stocks & Bonds(Sch.3) | \$ | Installment Notes (Sch.7) | \$ |
| Unlisted, Non-Liquid Stocks & Bonds (Sch.4) | \$ | Life Insurance Loans | \$ |
| Real Estate (Sch. 5A) | \$ | Other Liabilities(List) | \$ |
| Life Insurance (Cash Value) (Sch. 8) | \$ | | |
| Furniture & Fixtures | \$ | | |
| Automobiles | \$ | | |
| Other Assets (Sch. 9) | \$ | | |
| | | Total Liabilities | \$ |
| | | Net Worth | \$ |
| Total | \$ | Total | \$ |

Contingent Liabilities

Do you have any contingent liabilities? If so, please describe:

As endorser, co-marker or guarantor?.....\$ _____
 On leases or contracts?.....\$ _____
 Amount of contested income tax liens.....\$ _____
 Legal Claims.....\$ _____
 Other special debt.....\$ _____



Schedule 1: CASH ACCOUNTS

| Depository Institution | In the Name of | Account Type | Balance |
|------------------------|----------------|--------------|---------|
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | Total | \$ |

Schedule 2: NOTES AND ACCOUNT RECEIVABLE

| Debtor's Name | Purpose | Monthly Payment | Principal and or Interest | Balance |
|---------------|---------|-----------------|---------------------------|---------|
| | | | | |
| | | | | |
| | | | | |
| | | | Total | \$ |

Schedule 3: LISTED MARKETABLE STOCKS AND BONDS

| Number of Shares | Issue | Owner | Pledged yes/no | Market Value |
|------------------|-------|-------|----------------|--------------|
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | Total | \$ |

Schedule 4: UNLISTED, NON-LIQUID STOCKS BONDS

| Number of Shares | Issue | Owner | Valuation Method | Value |
|------------------|-------|-------|------------------|-------|
| | | | | |
| | | | | |
| | | | | |
| | | | Total | \$ |

Schedule 5A: Real Estate

| No. | Location and Description | Title in the Name of | Purchase Date & Price | Market Value |
|-----|--------------------------|----------------------|-----------------------|--------------|
| 1 | | | | |
| | | | | |
| 2 | | | | |
| | | | | |
| 3 | | | | |
| | | | | |
| 4 | | | | |
| | | | | |
| 5 | | | | |
| | | | | |
| 6 | | | | |
| | | | | |
| | | | Total | |

Schedule 5B: Mortgages

| No. | Mortgage | Collateral Position | Original Amount | Monthly Payment | Principal and or Interest | Present Balance |
|-----|----------|---------------------|-----------------|-----------------|---------------------------|-----------------|
| 1 | | | | | | |
| | | | | | | |
| 2 | | | | | | |
| | | | | | | |
| 3 | | | | | | |
| | | | | | | |
| | | | | | Total | |

Schedule 6: Notes Payable

| Creditor Name | Purpose | Collateral | Monthly Payment | Principal and or Interest | Balance |
|---------------|---------|------------|-----------------|---------------------------|---------|
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | Total | |

Schedule 7: Installment Loans

| Creditor Name | Purpose | Collateral | Monthly Payment | Balance |
|---------------|---------|------------|-----------------|---------|
| | | | | |
| | | | | |
| | | | Total | |



A simplified Income Statement is outlined below. If you would prefer to attach your Income Tax Return for a recent year, this form does not have to be completed.

| Fiscal Year Ending: _____ | Amount |
|---------------------------|--------|
| Business Income | |
| Salary | |
| Commissions and Bonuses | |
| Dividends | |
| Interest | |
| Capital Gain | |
| Net Rental | |
| (Depreciation) \$ | |
| (Interest) \$ | |
| Other (Describe Below) | |
| | |
| | |
| Total | |

To: National Bank of Coxsackie

Notification of Changes: I will notify you promptly in writing if there should be any unfavorable change in my financial condition. Until I give you such notice or substitute a complete new written Financial Statement, the information below may be considered a substantially correct statement of my financial condition at any future time that I may apply for credit.

False or Misleading Statements: If any part of this statement should be false or misleading, I will, if you demand, immediately repay any or all debts to you, both my own and those I have guaranteed for others. You do not have to give me specific advance notice that you are.

National Bank of Coxsackie normally obtains a consumer (credit) report on all principals of loan applicants and for updates, renewals, and extensions of that credit. Upon my request, the Bank will inform me if such a report has been obtained and will give me the name and address of the agency furnishing the report. I authorize the National Bank of Coxsackie to obtain such reports.

Date:

Signature: _____ DOB: _____ Social Security # _____

Signature: _____ DOB: _____ Social Security # _____