

PERSONAL FINANCIAL STATEMENT

As of: _____

Name _____

Home Address _____

Home Phone # _____ Cell Phone # _____ Work Phone # _____

E-mail _____

Business Name of Applicant _____

| Assets | Liabilities |
|--|--|
| Cash on hand & in Banks..... _____ | Accounts Payable..... _____ |
| Savings Account..... _____ | Notes Payable to Banks and Others..... _____ (Describe in Section 2) |
| IRA or Other Retirement Account..... _____ | Installment Account (Auto)..... _____ Mo. Payments \$ _____ |
| Accounts & Notes Receivable..... _____ | Installment Account (Other)..... _____ Mo. Payments \$ _____ |
| Life Insurance - Cash Surrender Value Only.. _____ (complete Section 7) | Loan on Life Insurance..... _____ |
| Stocks and Bonds..... _____ (Describe in Section 3) | Mortgages on Real Estate..... _____ (Describe in attached Real Estate Schedule) |
| Real Estate..... _____ (Describe in attached Real Estate Schedule) | Unpaid Taxes..... _____ (Describe in Section 5) |
| Automobile-Present Value..... _____ | Other Liabilities..... _____ (Describe in Section 6) |
| Other Personal Property..... _____ (Describe in Section 4) | Total liabilities..... _____ |
| Other Assets..... _____ (Describe in Section 4) | |
| TOTAL _____ | TOTAL _____ |

Section 1.

Annual Source of Income

Salary..... _____
 Net Investment Income..... _____
 Real Estate Income..... _____
 Other Income (Describe Below)*..... _____

(*Alimony or child support payments need not be disclosed in "Other Income" unless it is desired to have such payments counted toward total income)

Annual Expenditures

Mortgage/rental payments..... _____
 Real Estate Taxes & assessments..... _____
 Taxes-federal, state, & local..... _____
 Insurance payments..... _____
 Other contract payments..... _____
 (car payments, charge cards, etc.)
 Alimony, child support, maintenance..... _____
 Other expenses..... _____

Section 4. Other Personal Property and Other Assets. (Describe in detail.)

Section 5. Unpaid Taxes. (Describe in detail, as to type, to whom payable, when due, amount, and to what property, if any, a tax lien attaches.)

Section 6. Other Liabilities. (Describe in detail.)

Section 7. Life Insurance Held. (Give face amount and cash surrender value of policies – name of insurance company and beneficiaries)

I authorize Direct Mortgage Loan Company/Lender to make inquiries as necessary to verify the accuracy of the statements. I certify the above and the statements contained in the attachments are true and accurate as of the stated date(s). These statements are made for the purpose of either obtaining a loan or guaranteeing a loan.

Signature _____

Date _____

SSN: _____

Signature _____

Date _____

SSN: _____