FULTON SAVINGS BANK
75 South First St
Fulton, NY 13069
(315) 592-3100

PERSONAL FINANCIAL STATEMENT

- Complete this statement for each: (1) proprietor; (2) general partner; (3) managing member of a limited liability company (LLC); (4) owner of 20% or more of the equity in a corporation; or (5) any person or entity providing a guaranty on the loan. If personal assets and debts can meaningfully and fairly be presented together (ex. Spouse), only one form needs to be completed for those individuals.

- If Applicant includes spousal assets in this statement, please include spouse's information on Page 1

- If there is insufficient space to provide requested information, the Applicant(s) will so indicate and provide such information on separate attached schedules.

STATEMENT DATE: _____

PERSONAL INFORMATION

Applicant			Co-Applicant/Spouse		
NAME			NAME		
SOCIAL SECURITY NUMBER	DATE OF BIRTH		SOCIAL SECURITY NUMBER	DATE OF BIRTH	
ADDRESS			ADDRESS		
CITY	STATE	ZIP	CITY	STATE	ZIP
TELEPHONE NUMBER	EMAIL ADDRESS		TELEPHONE NUMBER	EMAIL ADDRESS	
EMPLOYER			EMPLOYER		
TITLE / POSITION		NO. OF YEARS	TITLE / POSITION		NO. OF YEARS

ANNUAL INCOME		CONTINGENT LIABILITIES	
Salary (Applicant)		As Endorser, Co-maker, or Guarantor	
Salary (Co-Applicant/Spouse)		On Leases or Contracts	
Dividends & Interest		Legal Claims & Judgements	
Real Estate Income (Net)		Provision for Federal/State Income Tax	
Other Income:		Other Contingent Liabilities:	
a).		a).	
b).		b).	
c).		c).	
TOTAL ANNUAL INCOME		TOTAL CONTINGENT LIABILITIES	

Note: Alimony or child support payments should not be disclosed in "Other Income:" unless it is desired to have such payments counted toward total income

ASSETS	Value (Omit cents)	LIABILITIES	Value (Omit cents)
Cash on hand & in banks *		Notes Payable (Schedule 6)	
IRA or Other Retirement Accounts *		Accounts Payable & Credit Cards (Schedule 6)	
Accounts & Notes Receivables (Schedule 1)		Taxes Payable (Schedule 6)	
Life Insurance - Cash surrender value only (Schedule 2)		Life Insurance Loans (Schedule 6)	
Stocks & Bonds (Schedule 3)		Automobile & Equipment Loans (Schedule 5)	
Automobiles & Equipment (Schedule 5)		Mortgage/HELOC - Personal (Schedule 4)	
Real Estate - Personal (Schedule 4)		Mortgage/HELOC - Investment (Schedule 4)	
Real Estate - Investment (Schedule 4)		Other Liabilities: (Schedule 6)	
Other Assets: (Schedule 5)		a).	
a).		b).	
b).		c).	
c).		**TOTAL LIABILITIES**	
d).		**NET WORTH**	
TOTAL ASSETS		**TOTAL LIABILITIES & NET WORTH**	

SCHEDULE 1 - ACCOUNTS & NOTES RECEIVABLE

Account Name	Pays as agreed?	Balance	If used as collateral:		
			Lien Holder	Balance	Terms

SCHEDULE 2 - LIFE INSURANCE

Insurance Company	Face Value	Cash Surrender Value	Beneficiaries

SCHEDULE 3 - STOCKS & BONDS

Name of Security	Readily Marketable?	Number of Shares	Market Value	Date of Valuation	Total Value

SCHEDULE 4 - REAL ESTATE

	Property A	Property B	Property C
Address			
Occupancy (Primary, Investment/Rental, Commercial, etc.)			
Date Purchased			
Present Market Value			
If property is mortgaged, please complete the below section:			
Lender			
Loan Type (Mortgage, HELOC, etc.)			
Maturity Date			
Mortgage Balance			
Monthly Payment			

SCHEDULE 5 - PERSONAL PROPERTY & OTHER ASSETS

Description	Market Value	If used as collateral:		
		Lien Holder	Balance	Terms

SCHEDULE 6 - LIABILITIES

(Do not list liabilities already stated in a previous schedule)

Creditor	Debt Type	Current Balance	Monthly Payment	Collateral

I/We authorize Fulton Savings Bank to make inquiries as necessary to verify the accuracy of the statements made and to determine my creditworthiness.

Certification:

By signing this form, I/We certify under penalty of criminal prosecution that all information on this form and any additional supporting information submitted with this form is true and complete to the best of my knowledge. I/We understand that Fulton Savings Bank will rely on this information when making decisions regarding an application for a loan.

Signature _____ Date _____

Signature _____ Date _____