

FINANCIAL STATEMENT

Commonwealth Credit Union
417 High St
Frankfort, KY 40601

TYPE OF CREDIT - CHECK THE APPROPRIATE BOX

- Individual - Provide your financial information only
 Joint, with _____
 Information on separate financial statement
 Relationship _____

Applicant's Name and Address

Creditor's Name and Address

INDIVIDUAL INFORMATION

Business or Occupation _____
 Employer's Name and Address _____
 Length of Employment _____
 Home Phone _____ Bus. Phone _____
 Date of Birth _____ S.S./Taxpayer I.D.# _____

JOINT PARTY INFORMATION

Business or Occupation _____
 Employer's Name and Address _____
 Length of Employment _____
 Home Phone _____ Bus. Phone _____
 Date of Birth _____ S.S./Taxpayer I.D.# _____

ASSETS

Note: Complete **SCHEDULES first.**

LIABILITIES

1. Cash On Hand and in Banks	Sched. A		16. NOTES DUE TO BANKS	SCHED. H	
2. Cash Value of Life Insurance (NOT FACE AMOUNT)	Sched. B		17. AUTO LOANS	SCHED. G	
3. U.S. Gov. Securities	Sched. C		18. CREDIT CARD BALANCES		
4. Other Marketable Securities	Sched. C		19. CHARGE ACCOUNT BALANCES		
			20. STUDENT LOANS		
			21. HELOC BALANCES		
			22. OTHER DEBTS OWED - SPECIFY		
X - TOTAL LIQUID ASSETS (ADD 1 to 7)	X		23. OTHER -		
8. REAL ESTATE OWNED (USE PG 2 SCHEDULE E)	Sched. E				
9. NOTES & ACCOUNTS RECEIVABLE - ALL	Sched. D				
10. NOTES DUE FROM RELATIVES	Sched. D		L1 - TOTAL SHORT TERM LIABILITIES (ADD 16 to 26)	L1	
11. OTHER SECURITIES	Sched. C		27. REAL ESTATE MORTGAGES PAYABLE - ALL	Sched. E	
12. PERSONAL PROPERTY (autos, antiques, equip., etc)	Sched. G		28. TAXES DUE, TAX LIENS, ASSESSMENTS DUE		
13. IRA'S, 401K'S, PENSIONS			29. OTHER (Itemize)		
14. OTHER -			L2 - TOTAL LONG TERM LIABILITIES (ADD 27 to 29)	L2	
15. Other Assets - Itemize <input type="checkbox"/> (see attached itemization)			L3 - TOTAL LIABILITIES (ADD L1 + L2)	L3	
Y - TOTAL PRODUCTIVE ASSETS (ADD 8 to 15)	Y		NW - Net Worth (total assets - total liabilities: Z - L3)	NW	
Z - TOTAL ASSETS (X + Y)	Z		TOTAL LIABILITIES AND NET WORTH	L3 + NW	

ANNUAL INCOME

ESTIMATE OF ANNUAL EXPENSES

Salary Bonuses and Commissions	\$	Income Taxes	\$
Dividends and Interest	\$	Other Taxes	\$
Rental and Lease Income (Net)	\$	Insurance Premiums	\$
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.		Mortgage Payments	\$
Other Income - Itemize	\$	Rent Payable	\$
Provide the following information only if Joint Credit is checked above.		Other Expenses	\$
Other Person's Salary, Bonuses and Commissions	\$		
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 Income of Other Person - Itemize	\$		
TOTAL		TOTAL	

GENERAL INFORMATION

CONTINGENT LIABILITIES

Are any Assets Pledged Other Than Described on SCHEDULES	<input type="checkbox"/> yes	<input type="checkbox"/> no	As Endorser, Co-maker or Guarantor	<input type="checkbox"/> yes	<input type="checkbox"/> no
Are You a Defendent in Any Suits or Legal Actions?	<input type="checkbox"/> yes	<input type="checkbox"/> no	On Leases or Contracts	<input type="checkbox"/> yes	<input type="checkbox"/> no
Income Tax Return Filed Through What Date?			Legal Claims	<input type="checkbox"/> yes	<input type="checkbox"/> no
Have you ever been declared Bankrupt in the last 10 years?	<input type="checkbox"/> yes	<input type="checkbox"/> no	Federal - State Income Taxes	<input type="checkbox"/> yes	<input type="checkbox"/> no
Are you a Partner or Officer in any other Venture?	<input type="checkbox"/> yes	<input type="checkbox"/> no	Other		

SCHEDULES

A CASH IN BANKS

(List all Real Estate Loans in Schedule E)

Additional Information Requested

NAME OF BANK	Type of Account	Type of Ownership	On Deposit	On Deposit	
			\$	\$	
Cash On Hand					
<input type="checkbox"/> See Attached Itemization					
TOTALS					

B LIFE INSURANCE (List only those Policies that you own)								
COMPANY	Face Of Policy	Cash Surrender Value	Policy Loan From Insurance Co.	Other Loans Policy As Collateral	BENEFICIARY			
<input type="checkbox"/> See Attached Itemization		TOTALS	\$	\$				
C SECURITIES OWNED (Including U.S. Gov't Bonds and all other Stocks and Bonds)								
Face Value-Bonds No. Of Shares Stock	DESCRIPTION Indicate those Not Registered in Your Name	Type of Ownership	COST	Market Value U.S. Gov. Sec.	Market Value Marketable Sec.	MARKET VALUE Not Readily Marketable	Amount Pledged To Secured Loan	
<input type="checkbox"/> See Attached Itemization				TOTALS	\$	\$	\$	
D NOTES AND ACCOUNTS RECEIVABLE (Money Payable or Owed to You Individually-Indicate % of your Ownership Interest)								
MAKER/DEBTOR	%	When Due	Original Amount	Balance Due Current Accounts	Balance Due Over 90 Days	Bal. Due Notes Rel. and Friends	Security (If Any)	
			\$	\$	\$	\$		
<input type="checkbox"/> See Attached Itemization				TOTALS	\$	\$	\$	
E REAL ESTATE OWNED (Indicate % of your Ownership Interest)								
TITLE IN NAME OF	%	Description and Location	Date Acquired	Original Cost	Present Value of Real Estate	Amount of Ins. Carried	MORTGAGE OR CONTRACT PAYABLE Bal. Due Payment Maturity	
				\$	\$	\$		
<input type="checkbox"/> See Attached Itemization				TOTAL	\$	TOTAL	\$	
F MORTGAGES AND CONTRACTS OWNED (OTHER PEOPLE THAT OWE YOU MONEY)								
Cont.	Mtg.	%	MAKER Name Address	PROPERTY COVERED	Starting Date	Payment	Maturity	Balance Due
						\$		
<input type="checkbox"/> See Attached Itemization							TOTALS	\$
G PERSONAL PROPERTY (Includes Autos, Jewelry, Furnishings, Antiques, Guns, etc.)								
DESCRIPTION	%	Date When New	Cost When New	Value Today	LOANS ON PROPERTY Balance Due To Whom Payable			
<input type="checkbox"/> See Attached Itemization				TOTALS	\$			
H NOTES DUE TO BANKS & To OTHERS (unsecured loan, lines, accounts & contracts payable)								
PAYABLE TO	Other Obligors (If Any)	When Due	Notes Due To Rel. and Friends	Notes Due "Others" (Not Banks)	Accounts and Bills	Contracts Payable	COLLATERAL (If Any) Payable	
<input type="checkbox"/> See Attached Itemization			TOTALS					

This information and the information provided on all accompanying financial statements and schedules is provided for the purpose of obtaining credit for the Applicant(s) or for the purpose of Applicant(s) guaranteeing credit for others. Applicant(s) acknowledge that representations made in this Statement will be relied on by Creditor in its decision to grant such credit. This Statement is true and correct in every detail and accurately represents the financial condition of the Applicant(s) on the date given below. You are authorized to make all inquiries you deem necessary to verify the accuracy of the information contained herein and to determine the creditworthiness of the undersigned. Applicant(s) will promptly notify Creditor of any subsequent changes which would affect the accuracy of this Statement. Creditor is further authorized to answer any questions about Creditor's credit experience with Applicant(s). Applicant(s) are aware that any knowing or willful false statements regarding the value of the above property for purposes of influencing the actions of Creditor can be a violation of federal law 18 U.S.C. sec. 1014 and may result in a fine or imprisonment or both.

In addition, each individual signing below authorizes the Creditor to check their individual credit account and employment history and have a credit reporting agency prepare a credit report on them.

The undersigned declares that he/she has read and understands the statements above.

Date Signed _____ Signature _____ Signature _____ Other Person (If Applicable) _____