



PERSONAL FINANCIAL STATEMENT
Community Bank

Received by ___ Hand ___ Mail

Date Received _____

By _____ SIGNATURE

MEMBER FDIC

Important: Read these directions before completing this Statement.

Income from alimony, child support, or maintenance payments need not be revealed if the applicant does not choose to disclose such income in applying for credit.

- Four checkboxes with instructions regarding individual credit, joint credit, and guaranty of indebtedness.

Table with 2 columns: SECTION I - INDIVIDUAL INFORMATION (Type or Print) and SECTION II - OTHER PARTY INFORMATION (Type or Print). Rows include Name, Residence Address, City, State & Zip, Position or Occupation, Business Name, Business Address, City, State, Zip, Res. Phone, Bus. Phone, Social Security No., and Birthdate.

The undersigned make(s) this statement with intent that it shall be relied upon by you in granting to the undersigned any credit, whether direct or indirect.

The undersigned warrant(s) and represents that this statement is a complete and true statement of the financial condition of the undersigned as of this date. You may rely upon this statement until you are notified by the undersigned of any material change therein or until it is replaced by a new statement.

The Federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, natural origin, sex, marital status, age (provided that the applicant has the capacity to enter into a binding contract); because all or part of the applicant's income derives from any public assistance program; or because the applicant has in good faith exercised any right under the Consumer Credit Protection Act.

I/We authorize Community Bank of Florida to obtain any credit information needed, including personal Consumer Credit Reports. You may request or use subsequent reports in connection with any update, renewal or extension of credit for which I/we have applied under personal or business names.

Date _____ Signature _____ Signature _____

Name:

SECTION III

ASSETS				LIABILITIES			
	Millions	Thousands	Hundreds		Millions	Thousands	Hundreds
1 Cash - On Hand & in Banks Sec. IV-A				21 Notes Due to Banks Sec. IV-A			
2 Cash Value of Life Insurance Sec. IV-B				22 Notes Due to Relatives & Friends Sec. IV-B			
3 U.S. Gov. Securities Sec. IV-C				23 Notes Due to Others Sec. IV-H			
4 Other Marketable Securities Sec. IV-C				24 Accounts & Bills Payable Sec. IV-H			
5 Notes & Accounts Receivable-Good Sec. IV-D				25 Unpaid Income Taxes Due <input type="checkbox"/> Federal <input type="checkbox"/> State			
6 Other Assets Readily Convertible to Cash: Itemize				26 Other Unpaid Taxes & Interest			
7				27 Loans on Life Insurance Policies Sec. IV-B			
8				28 Contract Accounts Payable Sec. IV-H			
9				29 Cash Rent Owed			
10 Total Current Assets				30 Other Liabilities Due within 1 year - Itemize			
11 Real Estate Owned Sec. IV-E				31			
12 Mortgages & Contracts Owned Sec. IV-F				32			
13 Notes & Accts. Receivable-Doubtful Sec. IV-D				33 Total Current Liabilities			
14 Notes Due from Relatives & Friends Sec. IV-D				34 Real Estate Mortgage Payable Sec. IV-E			
15 Other Securities-Not Readily Marketable Sec. IV-C				35 Liens & Assessments Payable			
16 Personal Property Sec. IV-G				36 Other Debts - Itemize			
17 Other Assets - Itemize				37 Total Liabilities			
18				38 <i>Net Worth (Total Assets minus Total Liabilities)</i>			
19				39			
20 Total Assets				Total Liabilities & Net Worth			
				Estimate of Annual Expenses			
Annual Income				Income Taxes			\$
				Other Taxes			\$
Salary				Insurance Premiums			\$
Bonus & Commissions				Mortgage Payments			\$
Dividends & Interest				Rent Payable			\$
Rental & Lease Income (Net)				Other Expenses			\$
* Other Income - Itemize				Alimony, Child Support or Maintenance			\$
							\$
TOTAL				TOTAL			\$

SECTION IV

A. Cash in Banks and Notes Due to Banks (List all Real Estate in Section IV-E)

Name of Bank and Type of Account	Account #s	On Deposit	Note Due Banks	Collateral (if any)
		\$	\$	
Cash on Hand				
TOTALS		\$	\$	
		(Enter Sec. III Line 1)	(Enter Section III Line 21)	

B. Life Insurance

Company	Face of Policy	Cash Surrender Value	Policy Loan from Insurance Company	Loss from Others Policy as Collateral	Beneficiary
	\$	\$	\$	\$	
TOTALS		\$	\$		
		(Enter Sec. III Line 2)	(Enter Sec. III Line 27)		

C. Securities Owned (Including U.S. Government Bonds and all other Stocks and Bonds)

Face Value-Bonds No. of Shares Stock	Description (Indicate those Not Registered in Your Name)	Cost	Market Value U.S., Gov't. Sec.	Market Value Marketable Sec.	Market Value Not Readily Marketable	Amount Pledge to Secure Loan
						\$
TOTALS			\$	\$	\$	
			(Enter Sec. III Line 3)	(Enter Sec. III Line 4)	(Enter Sec. III Line 15)	

D. Notes and Accounts Receivable (Money Owed or Payable to You)

Maker/Debtor	When Due	Original Amount	Balance Due Good Accounts	Balance Due Doubtful Accounts	Bal. Due Notes Relatives & Friends	Security (If Any)
		\$	\$	\$	\$	
TOTALS			\$	\$	\$	
			(Enter Sec. III Line 5)	(Enter Sec. III Line 13)	(Enter Sec. III Line 14)	

Initial(s) _____

