



**PERSONAL FINANCIAL STATEMENT**

TO: Mid-Minnesota Federal Credit Union, 200 South 6<sup>th</sup> Street, Brainerd, MN 56401  
 Phone: 218-829-0371 Fax: 218-829-4947

IMPORTANT: Read these directions before completing.

This statement and any applicable supporting schedules may be used to apply for an extension of credit individually or jointly with coapplicants. If the co-applicant's assets and liabilities cannot be meaningfully and fairly presented on a combined basis, separate statements and schedules should be completed for each co-applicant. Do not complete section two if you are applying for unsecured individual credit.

Check appropriate box:

- If you are applying for an individual account in your own name and are relying on your own income or assets and not the income or assets of another person as the basis for repayment of the credit requested, complete only Sections 1, 3, 4 and all Schedules.
- We intend to apply for joint credit: Applicant Signature: \_\_\_\_\_ Co-Applicant Signature: \_\_\_\_\_ If you are applying for a joint account or an account that you and another person will use, complete all Sections and Schedules, providing information in Section 2 about the joint applicant.
- If you are applying for an individual account, but are relying on income from alimony, child support or separate maintenance or on the income or assets of another person as the basis for repayment of the credit requested, complete all Sections and Schedules to the extent possible, providing information in Section 2 about the person whose alimony, support, or maintenance payments or income or assets you are relying.

All amounts should be rounded to the nearest \$100.

Section 1	Section 2
Applicant Information (Type or Print)	Co-Applicant Information (Type or Print)
Name:	Name:
Date of Birth:	Date of Birth:
Driver's License:	Driver's License:
Social Security Number:	Social Security Number:
Address:	Address:
City, State, Zip:	City, State, Zip:
Home Phone:	Home Phone:
Marital Status*: <input type="checkbox"/> Married <input type="checkbox"/> Unmarried <input type="checkbox"/> Separated Marital Status	Marital Status*: <input type="checkbox"/> Married <input type="checkbox"/> Unmarried <input type="checkbox"/> Separated Marital Status
Employer:	Employer:
Position/Occupation: Since:	Position/Occupation: Since:
Address:	Address:
City, State, Zip	City, State, Zip
Work Phone:	Work Phone:
Work Fax:	Work Fax:

\* Do not provide information if you are applying for unsecured or individual credit.



Section 3			
Annual Income	Applicant	Co-Applicant	
Wages/Salary			Applicant: Yes No; Co-Applicant: Yes No
Bonuses/Commissions			Are you a partner or officer in any other venture? <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Dividends/Interest			Have you ever declared bankruptcy? <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Net Rental Income			Are you a defendant in any legal actions or suits? <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Alimony, Child Support or other maintenance payments. (You need not reveal if you do not choose to have it considered.)			Do you have past due obligations, tax liens, or judgments outstanding against you? <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Other (List)			Are you obligated to make any other payments (alimony, child support, maintenance payments, rent) or a guarantor or co-maker that are not listed elsewhere on this statement? <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Total			If you have answered "YES" to any of the above questions, attach detailed explanations for each.

Section 4			
Statement of Financial Condition as of: _____, 20_____.			
Assets	In Dollars	Liabilities and Net Worth	In Dollars
Cash on hand and money on deposit (Schedule A)		Notes Payable Banks and others (Schedule E)	
Listed securities, stocks, bonds (Schedule B or attach copies of statements)		Life Insurance Loans	
Cash Value Life Insurance		Credit Card Debt (Details)	
Pension/401k/IRA			
Unlisted Securities (Details)		Unpaid Taxes (Details)	
Accounts and Notes Receivable (Schedule C)			
Real Estate Owned (Schedule D)			
Automobiles (Details)		Real Estate Mortgages/Liens (Schedule F)	
		Other Debts (Details)	
Other Personal Property			
Other Assets (Details)			
		<b>Total Liabilities</b>	
		<b>Assets less Liabilities = Net Worth</b>	
<b>Total Assets</b>		<b>Total Liabilities and Net Worth</b>	





<b>Schedule E – Notes Payable Banks and Others</b>						
<b>Name of Lender</b>	<b>In Name Of:</b>	<b>Amount</b>	<b>Balance</b>	<b>Payment</b>	<b>Maturity</b>	<b>Security</b>
<b>TOTALS</b>						

<b>Schedule F – Real Estate Mortgages/Liens (Attached additional sheets with this detail if necessary)</b>						
<b>Address</b>	<b>Lender</b>	<b>Original Amount</b>	<b>Balance</b>	<b>Payment</b>	<b>Maturity</b>	<b>Lien Position</b>
<b>Totals</b>						

I/We certify that this financial statement is true and complete. I/We authorize Mid-Minnesota Federal Credit Union (MMFCU) or its agents to verify this information and to obtain additional information concerning my/our financial condition including, without limitation, consumer credit reports, although MMFCU may rely on this financial statement without any further verification. I/We authorize MMFCU to furnish such information and any other credit experiences with me/us to others and to answer any questions about my/our credit experience and other financial relationships with MMFCU. I/We, so long as I/We owe any sums or guaranty any obligations to MMFCU, agree to notify MMFCU, in writing, of any change that materially affects the accuracy of this statement and agree to provide MMFCU with an updated personal financial statement when requested. I/We understand that MMFCU will retain this statement whether or not MMFCU grants the requested credit.

**It may be a federal crime punishable by a fine and/or imprisonment to knowingly make false statements concerning any of the above information to a financial institution, under provisions of Title 18, United States Code, Section 1014.**

**Signature of Applicant:** \_\_\_\_\_ **Dated:** \_\_\_\_\_

**Signature of Co-Applicant:** \_\_\_\_\_ **Dated:** \_\_\_\_\_