INterra CREDIT UNION
PO Box 727 • Goshen, IN 46527
Main Office 574.534.2506 • Loans 574.534.1844 • Fax 574.534.0768

Personal Financial Statement

INDIVIDUAL INFORMATION (type or print)		**JOINT PARTY INFORMATION** (type or print)	
Name		Name	
Address		Address	
City/State/Zip		City/State/Zip	
Position or Occupation		Position or Occupation	
Employer's Name		Employer's Name	
Employer's Address		Employer's Address	
City/State/Zip		City/State/Zip	
Length of Employment		Length of Employment	
Home Phone	Cell Phone	Home Phone	Cell Phone
Business Phone	E-mail	Business Phone	E-mail

Schedule 1 — **CASH ON HAND**

Institution	Type of Account	Balance
	Total	

Schedule 2 — **SCHEDULE OF REAL ESTATE OWNED**

Description of Property and Improvements	Date Acquired	Title In Name of	Cost	Market Value	Mortgages	
					Balance	Payment
			Total			

Schedule 3 — **ALL OTHER LOANS OR DEBTS**

Financial Institution	Collateral	Balance	Payment
	Total		

Schedule 4 — **SCHEDULE OF U.S. GOVERNMENTS, STOCKS AND BONDS OWNED**

No. of Shares or Face Value (Bonds)	Descriptions	In Name of	Market Value
		Total	

Schedule 5 — **SCHEDULE OF LIFE INSURANCE**

Amount	Name of Company	Beneficiary	Cash Surrender Value	Loans
		Total		

Schedule 6 — SCHEDULE OF REAL ESTATE MORTGAGES RECEIVABLE

Description of Property Covered	Dates of Acquisition	In Name of	Balance	Payment
			Total	

ASSETS			LIABILITIES		
Cash On Hand	Schedule 1		Mortgage and Land Contract Deb	Schedule 2	
Real Estate Owned	Schedule 2		Notes Payable	Schedule 3	
Stocks/Bonds	Schedule 4		Loans to Insurance Companies	Schedule 5	
Cash Value of Life Insurance	Schedule 5		To Finance Companies		
Mortgages and Land Contracts Receivable	Schedule 6		Accounts Payable		
Notes and Accounts Receivable - Current			Federal Income Taxes		
Notes and Accounts Receivable - Past Due			Property Taxes		
Automobiles			Other Liabilities (Itemize)		
Personal Property					
Other Assets (Itemize)					
			TOTAL LIABILITIES		
			NET WORTH		
TOTAL ASSETS			**TOTAL**		

PERSONAL INFORMATION

Personal Bank Account Carried At	Are you defendant in any suite or legal action? If yes, explain on separate sheet.
Indicate if Any Assets Pledged	
Date of Will / Who is Executor	Officer or principal in other companies
Do you pay alimony or child support? ❑ Yes ❑ No If yes, how much?	Have you ever been in bankruptcy, personal or business? If yes, explain on separate sheet.

CONTINGENT LIABILITIES		ANNUAL INCOME	
As endorser or comaker		Income from Employment	
On leases or contracts		Income from Business or Profession	
Legal claims		Income from Investments	
Other		Income from Other Sources (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	
		TOTAL INCOME	

The information contained in this statement is provided to induce you to extend or to continue the extension of credit to the undersigned or to others upon the guaranty of the undersigned. The undersigned acknowledge and understand that you are relying on the information provided herein in deciding to grant or continue credit or to accept a guaranty thereof. Each of the undersigned represents, warrants and certifies that the information provided herein is true, correct and complete. Each of the undersigned agrees to notify you immediately and in writing of any change in name, address, or employment and of any material adverse change (1) in any of the information contained in this statement or (2) in the financial condition of any of the undersigned or (3) in the ability of any of the undersigned to perform its (or their) obligations to you. In the absence of such notice or a new and full written statement, this should be considered as a continuing statement and substantially correct. If the undersigned fail to notify you as required above, or if any of the information herein should prove to be inaccurate or incomplete in any material aspect, you may declare the indebtedness of the undersigned or the indebtedness guaranteed by the undersigned, as the case may be, immediately due and payable. You are authorized to make all inquiries you deem necessary to verify the accuracy of the information contained herein, and to determine the credit-worthiness of the undersigned. The undersigned authorizes any person or consumer reporting agency to give you any information it may have on the undersigned. The undersigned authorizes the Credit Union to investigate their credit standing when opening, renewing or reviewing their account and to authorize the Credit Union to disclose information to credit bureaus and other creditors who inquire about their credit standing. As long as any obligation or guarantee of the undersigned to you is outstanding, the undersigned shall supply annually an updated financial statement. This personal financial statement and any other financial or other information that the undersigned give you shall be your property.

Signature (individual) _____

Date of Birth _____

Social Security Number _____

Date Signed _____, 20 _____

Signature (other party) _____

Date of Birth _____

Social Security Number _____

Date Signed _____, 20 _____