



**Personal Financial Statement** Notice: This statement is designed for use by residents of community property states (Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Texas, or Wisconsin). This statement should reflect the borrower's financial condition. List all of your separate assets and any community property or income in which you have an interest, as well as all debts which may be satisfied out of either your separate or community property. If you are seeking credit jointly, with your spouse, then include all community property and separate property on this Personal Financial Statement form. Do not complete the starred (\*) sections of this form unless you (a) are a resident of a community property state, (b) are relying on property located in a community property state as a basis for repayment of the credit requested, or (c) are applying jointly with your spouse for the credit requested.

**FINANCIAL STATEMENT DATE:** (Month) (Day) , (Year)

**PERSONAL PROFILE**

NAME		DATE OF BIRTH	SOCIAL SECURITY NO.
ADDRESS		CITY	STATE ZIP CODE
MARITAL STATUS* <input type="checkbox"/> MARRIED <input type="checkbox"/> UNMARRIED (Includes single, divorced, widowed) <input type="checkbox"/> SEPARATED			NO. OF DEPENDENTS
HOME PHONE	HOUSING INFORMATION <input type="checkbox"/> OWN <input type="checkbox"/> RENT <input type="checkbox"/> OTHER	PRESENT ADDRESS ____ YEARS ____ MONTHS	
EMPLOYED BY	YEARS	CURRENT POSITION	BUSINESS PHONE
PREVIOUS EMPLOYMENT	YEARS	PREVIOUS POSITION	BUSINESS PHONE

**SPOUSE'S PROFILE\*** (See Notice Above)

SPOUSE'S NAME*		DATE OF BIRTH*	SOCIAL SECURITY NO.*
EMPLOYED BY*	YEARS*	CURRENT POSITION*	BUSINESS PHONE*

**FINANCIAL STATEMENT** – List in dollars only. Please attach a separate sheet if further space is needed.

ASSETS		LIABILITIES	
Cash Held at Capital One, N.A. (Schedule 1)		Due on Automobiles (Schedule 3)	
Cash Held at Other Institutions (Schedule 1)		Notes Payable – Secured (Schedule 3)	
U.S. Government Securities (Schedule 2)		Notes Payable – Unsecured (Schedule 3)	
Marketable Listed Securities (Schedule 2)			
Unlisted Securities & Limited Partnerships (Schedule 2)		<b>MORTGAGES PAYABLE:</b> (Schedule 4)	
Notes & Accounts Receivable		Due on Personal Residence	
Cash Value of Life Insurance		Due on Other Owned Real Estate	
IRA/Keogh's/Pensions		Oil and Gas Liabilities	
<b>REAL ESTATE</b> (Schedule 4)		Revolving Charge Obligations	
Personal Residence		Unpaid Income Taxes	
Other Owned Real Estate		Loans on Life Insurance	
Oil and Gas Interests		Other Liabilities	
Automobiles		Other Liabilities	
Business Equity		<b>TOTAL LIABILITIES (L)</b>	
Other Assets		<b>NET WORTH (NW) = (A – L)</b>	
<b>TOTAL ASSETS (A)</b>		<b>TOTAL (L + NW)</b>	

ANNUAL INCOME (1)	AMOUNT	ANNUAL EXPENDITURES	AMOUNT	CONTINGENT LIABILITIES	AMOUNT
Salary & Wages		Mortgage Payments (or Rent)		As Endorser	
Spouse's Income*		Other Real Estate Mortgages		As Guarantor	
Commission, Bonus		Automobile Payments		On Damage Claims	
Interest, Dividends		Other Installment Payments		Letter of Credit	
Gross Rental Income		Alimony/Child Support		Other	
Payments from Notes Receivable		Credit Card Payments			
Alimony/Child Support (2)		Other _____			
Other Recurring Income		Other _____			
Nonrecurring Income		Other _____		<input type="checkbox"/> Check here "if none"	
<b>TOTAL</b>		<b>TOTAL</b>		<b>TOTAL</b>	

(1)  Check this space if you are providing a current year income tax return complete with all schedules in lieu of completing the above section, "Annual Income". By doing so, you certify that the tax return information is correct and that Capital One, N.A. may rely upon it as stated below. Note: The Annual Expenditures and Contingent Liabilities Sections must still be completed.

(2) 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.

**GENERAL INFORMATION\*** (If married, these questions apply to both you and your spouse).

Have you ever had assets repossessed by a creditor?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Have you been involved in an IRS Audit in the past 3 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you ever filed bankruptcy or had a judgement against you?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Results of IRS Audit?	
Have you ever been a principal of a firm that declared bankruptcy?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Do you have a will/estate plan?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you party to any claim or lawsuit?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Have you ever been convicted or plead nolo contendere to a Felony?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are any assets pledged or debts secured except as shown?	<input type="checkbox"/> Yes <input type="checkbox"/> No	What is your disability insurance coverage? _____	
What is your total life insurance coverage? _____			
Are any assets held in trust, in estate or in any other name or capacity?	<input type="checkbox"/> Yes <input type="checkbox"/> No		
If you answered YES to any of the above, please explain: _____			

**SCHEDULE 1 – BANKING RELATIONSHIP** (Please list only your personal accounts).

BANK	ACCOUNT NUMBER	TYPE OF ACCOUNT	CURRENT BALANCE	IS IT PLEDGED?

**SCHEDULE 2 – STOCKS AND BONDS (INCLUDING MUTUAL FUNDS)** – PROVIDE SEPARATE SHEET IF NECESSARY

ISSUER	REGISTERED IN NAME OF	WHERE TRADED	NO. OF SHARES	MARKET VALUE PER SHARE	TOTAL MARKET VALUE	PLEDGED? YES OR NO	RESTRICTED? YES OR NO

**SCHEDULE 3 – NOTES PAYABLE (EXCLUDING REAL ESTATE MORTGAGES)** – PROVIDE SEPARATE SHEET IF NECESSARY

DUE TO	ACCOUNT NUMBER	BALANCE	PAYMENT AMOUNT	PAYMENT FREQUENCY	MATURITY	COLLATERAL	RATE

**SCHEDULE 4 – REAL ESTATE HOLDINGS** – PROVIDE SEPARATE SCHEDULE IF NECESSARY

Property Type Includes: Personal Residence, Other Residential, Commercial/Industrial, Partially Owned Residential, Partially Owned Commercial

REQUIRED INFORMATION	FIRST PROPERTY	SECOND PROPERTY	THIRD PROPERTY	FOURTH PROPERTY	FIFTH PROPERTY
Property Type (See above)	RESIDENCE				
Property Address					
Cost & Improvements					
Estimated Market Value					
Mortgage Balance					
Mortgage Lender / Year Purchased					
Monthly Principal and Interest Payments					
Interest Rate / Maturity					
Annual Gross Rental Income					
Annual Cash Operating Expenses					
Percent of Ownership					

For the purpose of obtaining and/or maintaining credit, I submit this financial statement as a true, complete and accurate statement of my financial condition as of the date hereof and the date of my signature below. I will notify you immediately in the event of any material change in my financial condition, and until such time, you may continue to rely upon this statement. This statement shall remain your property.

You are authorized to verify the information herein, and obtain such additional information as you may require, by contacting my spouse and other third parties. You may exchange with, or furnish information to, others regarding your credit experience with me.

Signature of Preparer if other than Borrower: \_\_\_\_\_

Signature (Borrower): \_\_\_\_\_

(Date Signed)

Signature of Spouse, if spouse is a joint Co-Borrower\*: \_\_\_\_\_

(Date Signed)

For Bank Use Only:

Reviewed By:

Date Received: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Direct Account No.:

Indirect Account No.: