



# Hudson Valley<sup>®</sup>

FEDERAL CREDIT UNION

P.O. Box 1071 | Poughkeepsie, NY | 12602-1071  
845.463.3011 | hvfcu.org

## PERSONAL FINANCIAL STATEMENT

### SECTION 1

AMOUNT REQUESTED: \$

LOAN PURPOSE:

STATEMENT OF CONDITION AS OF \_\_\_\_\_, 20\_\_\_\_ (Date)

Name: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Residence Address: \_\_\_\_\_ No. of Yrs.: \_\_\_\_\_

City/State/ZIP: \_\_\_\_\_

Residence Phone: \_\_\_\_\_

Employer Name: \_\_\_\_\_ No. of Yrs.: \_\_\_\_\_

Employer Address: \_\_\_\_\_

Business Phone: \_\_\_\_\_

E-mail address: \_\_\_\_\_

Name, Phone No. of your accountant: \_\_\_\_\_

Name, Phone No. of your attorney: \_\_\_\_\_

Name of Spouse or Registered Partner: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Residence Address: \_\_\_\_\_ No. of Yrs.: \_\_\_\_\_

City/State/ZIP: \_\_\_\_\_

Residence Phone: \_\_\_\_\_

Employer Name: \_\_\_\_\_ No. of Yrs.: \_\_\_\_\_

Employer Address: \_\_\_\_\_

Business Phone: \_\_\_\_\_

E-mail address: \_\_\_\_\_

Name, Phone No. of your accountant: \_\_\_\_\_

Name, Phone No. of your attorney: \_\_\_\_\_

### SECTION 2

ASSETS	(Omit cents)	LIABILITIES	(Omit cents)
Cash on Hand and in Banks: (List Institutions)	\$	Accounts Payable (List Accounts including Credit Cards):	
IRA or Other Retirement Accounts	\$		
Accounts and Notes Receivable (Complete Section 4)	\$	Notes Payable to Banks and Others (Describe in Section 11)	\$
Life Insurance - Cash Surrender Value Only (Complete Section 5)	\$	Loan on Life Insurance	\$
Stocks and Bonds and Other Securities (Complete Section 6)	\$	Unpaid Taxes (Describe in Section 12)	\$
Real Estate (Complete Section 7)	\$	Mortgages on Real Estate (Describe in Section 7)	\$
Automobile - Present Value	\$	Installment Account (Auto) Mo. Payments \$ _____	\$
Other Personal Property (Complete Section 8)	\$	Installment Account (Other) Mo. Payments \$ _____	\$
Partnerships/ LLC's (Complete Section 9)	\$	Other Liabilities (Describe in Section 13)	\$
Other Assets (Complete Section 10)	\$	<b>TOTAL LIABILITIES</b>	\$
<b>TOTAL ASSETS</b>	\$	<b>Total Assets less Total Liabilities =</b>	
		<b>NET WORTH</b>	\$

**SECTION 3**

SOURCE OF INCOME		CONTINGENT LIABILITIES	
Salary (Annual)	\$	As Endorser or Co-Maker	\$
Net Investment Income	\$	Legal Claims and Judgments	\$
Real Estate Income	\$	Provision for Federal Income Tax	\$
Other Income (Describe below)*	\$	Other Special Debt	\$

**Description of Other Income in Section 3.** Please describe any recurring income not reflected on previous tax returns. \_\_\_\_\_

\*Alimony or child support payments need not be disclosed in "Other Income" unless it is desired to have such payments counted toward total income.

**SECTION 4 ACCOUNTS AND NOTES RECEIVABLE**

Name of Debtor	Address	Collateral Description	Lien Position	Equity Value	Payment Terms	Amount	Maturity Date	Current Unpaid Balance

**SECTION 5 CASH SURRENDER LIFE INSURANCE HELD** (Give face amount and cash surrender value of policies- name of insurance and beneficiaries)

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**SECTION 6 STOCKS AND BONDS** (use attachments if necessary. Each attachment must be identified as a part of this statement and signed.)

Number of Shares	Number of Securities	Cost	Market Value Quotation Exchange	Date of Quotation Exchange	Total Value

**SECTION 7 REAL ESTATE** (List each parcel separately. Use attachments if necessary. Each attachment must be identified as a part of this statement and signed.)

	Property A	Property B	Property C
Type of Property			
Address of Property			
Name of Property Owner			
% of Ownership			
Date Purchased			
Original Cost			
Current Market Value			
Name of Lender/Address			
Loan Number			
Current Loan Balance			
Interest Rate			
Loan Maturity Date			
Monthly Rent Income			
Monthly Payment (Princ. & Int.)			
Status of Loan (Current or Past Due)			

**SECTION 8 OTHER PERSONAL PROPERTY** (Describe, and if any is pledged as security, state name and address of lien holder, amount of lien, terms of payment, and if any delinquent, describe delinquency)

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**SECTION 9 CORPORATIONS, PARTNERSHIPS and LLCs**

Name	Date of Initial Investment	Percent Owned	Cost	Current Market Value	Obligations Due	Due Date
		%				
		%				
		%				
		%				

**SECTION 10 OTHER ASSETS** (Describe, and if any is pledged as security, state name and address of lien holder, amount of lien, terms of payment, and if any delinquent, describe delinquency)

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**SECTION 11 NOTES PAYABLE TO BANK AND OTHERS** (Use attachments if necessary. Each attachment must be identified as a part of this statement and signed.)

Name and Address of Note Holder(s)	Original Balance	Current Balance	Payment Amount	Frequency (monthly, etc.)	How Secured or Endorsed Type of Collateral

**SECTION 12 UNPAID TAXES** (Describe in detail as to type, to whom payable, when due, amount, and to what property, if any, a tax lien attaches.)

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**SECTION 13 OTHER LIABILITIES** (Describe in detail)

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**SECTION 14  
ADDITIONAL QUESTIONS**

Are you an endorser, guarantor or co-maker for any debt of an individual, corporation or partnership? .....	<input type="checkbox"/> Yes <input type="checkbox"/> No	\$ _____
Do you have any outstanding letters of credit or surety bonds? .....	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Are there any suits or legal actions pending against you? .....	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Are you contingently liable on any lease or contract? .....	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Are any of your tax obligations past due? .....	<input type="checkbox"/> Yes <input type="checkbox"/> No	
What would be your total estimated tax liability if you were to sell your major assets? .....		\$ _____
Income taxes filed through (date): _____ Are any returns being audited or contested? .....		
Have (either of) you or any firm in which you were a major owner ever declared bankruptcy? .....	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, what year _____
Have you drawn a will? .....	<input type="checkbox"/> Yes <input type="checkbox"/> No	Executor Name _____
Number of dependents (excluding self) and relationship to applicant .....		
Have you ever had a financial plan prepared for you? .....	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Did you include two years signed FEDERAL tax returns? .....	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Do (either of) you have a line of credit or unused credit facility at any other financial institution? .....	<input type="checkbox"/> Yes <input type="checkbox"/> No	
If yes, please indicate where, how much and name of banker .....		
Do you anticipate any substantial inheritances? .....	<input type="checkbox"/> Yes <input type="checkbox"/> No	

Attach an explanation for each yes response

**REPRESENTATIONS AND WARRANTIES**

The information contained in this statement is provided to induce HVFCU to extend or to continue the extension of credit to the undersigned or to others upon the guarantee of the undersigned. The undersigned acknowledge and understand that HVFCU is relying on the information provided herein in deciding to grant or continue credit or to accept guarantee 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 HVFCU 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 HVFCU. 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 respect, HVFCU may declare the indebtedness of the undersigned or the indebtedness guaranteed by the undersigned, as the case may be, immediately due and payable. HVFCU is authorized to make all inquiries HVFCU deems 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 HVFCU a copy of the undersigned's credit report and any other financial information it may have on the undersigned. Each of the undersigned authorizes HVFCU to answer questions about HVFCU's credit experience with the undersigned. As long as any obligation or guarantee of the undersigned to HVFCU 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 gives HVFCU shall be your property.

Date	Your Signature
Date	Co-Applicant's Signature (if you are requesting the financial accommodation jointly)