



Personal Financial Statement

CONTACT YOUR REPRESENTATIVE AT THE BANK IF YOU HAVE ANY QUESTIONS
 REGARDING THE COMPLETION OF THIS FORM

Please Type or Print

Applicant		
Personal Information		Employer or Business Information
Name - First, Middle, Last		Employer or Business Name
SS#	Date of Birth	
Address		Position / Title
City		TIN# (if applying for business credit)
State	Time at Employer	
Zip	Address	
Home Phone	Cell Phone	City
Other	State	
E-Mail	Zip	
	Phone	Fax

Co-Applicant		
Personal Information		Employer or Business Information
Name - First, Middle, Last		Employer or Business Name
SS#	Date of Birth	
Address		Position / Title
City		TIN# (if applying for business credit)
State	Time at Employer	
Zip	Address	
Home Phone	Cell Phone	City
Other	State	
E-Mail	Zip	
	Phone	Fax

Schedule 1 - Deposits In Black Hills Community Bank

	Checking	Savings	Money Market	Certificates of Deposit	Total
Black Hills Community Bank					

Schedule 2 - Deposits in Other Banks

Institution	Checking	Savings	Money Market	Certificates of Deposit	Total

Total _____**Schedule 3 - Marketable Securities (Stocks / Bonds / Mutual Funds / etc.)**

Description	Where Held	# of Shares	Purchase Date	Total Cost	Market Value

Total _____**Schedule 4 - Retirement Accounts (IRA / 401K / Profit Sharing / etc.)**

Description	Where Held	Purchase Date	Vested Balance	Loans Outstanding

Total _____**Schedule 5 - Receivables (Accounts Receivable / Notes Receivable / Contracts for Deed Owned / etc.)**

Debtor Name	Original Date	Maturity Date	Original Amount	Monthly Payment	Current Balance

Total _____**Schedule 6 - Primary Residence**

Address / Description	Title In Name Of	Purchase Date	Original Cost	Market Value

Schedule 7 - Loans on Primary Residence

Name of Creditor	Term / LOC	Interest Rate	Fixed or Variable	Original Amount	Monthly Payment	Current Balance

Total _____**Schedule 8 - Other Real Estate Owned**

Address / Description	Title In Name Of	Purchase Date	Original Cost	Market Value

Total _____**Schedule 9 - Loans on Other Real Estate Owned**

Name of Creditor	Interest Rate	Fixed or Variable	Original Amount	Monthly Payment	Current Balance

Total _____

Schedule 10 - Life Insurance

Insured	Beneficiary	Insurance Company	Type	Face Value	Cash Value	Loan on Cash Value

Total _____

Schedule 11 - Closely Held Businesses

Business Name	Ownership %	Personal Qty. %	Total Business Debt	Total Business Value	% Ownership Value

Total _____

Schedule 12- Installment Loans

Name of Creditor	Collateral	Interest Rate	Original Amount	Maturity Date	Monthly Payment	Current Balance

Total _____

Schedule 13 - All Other Loans (Credit Cards / Lines of Credit / etc.)

Name of Creditor	Type	Interest Rate	Original Amount	Monthly Payment	Current Balance

Total _____

Credit References

Name	Address	Phone	Relationship	Years Known

Applicant

Co-Applicant

- | | | |
|---|--|--|
| Have you ever had a judgment filed against you? | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Have you filed bankruptcy in the last 10 years? | <input type="checkbox"/> Yes <input type="checkbox"/> No | <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 | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Have you made a will? | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Number of dependents: | _____ | _____ |
| Marital Status (answer only if this financial statement is provided in connection with a request for secured credit or applicant is seeking a joint account with spouse.) | <input type="checkbox"/> Married
<input type="checkbox"/> Separated
<input type="checkbox"/> Unmarried | <input type="checkbox"/> Married
<input type="checkbox"/> Separated
<input type="checkbox"/> Unmarried |

Application Type - Please read the following statements and check the box that applies.

- Individual Application** - If you are applying for individual credit in your own name and 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 the applicant sections of this financial statement only.
- Joint Application** - If you are applying for joint credit with another person, complete all sections, providing information about both applicants.
We intend to apply for joint credit. **Applicant** _____ **Co-Applicant** _____
- Individual Application With Additional Income** - If you are applying for individual credit, but are relying on income from alimony, child support, or separate maintenance or the income or assets of another person as the basis for repayment of the credit requested, complete all sections to the extent possible, providing information in the co-applicant sections about the person on whose alimony, child support, or maintenance payments or income or assets you are relying.

The foregoing statement, submitted for the purpose of obtaining credit, is true and correct in every detail and fairly shows my/our financial condition at the time indicated. I/we will give you prompt written notice of any subsequent substantial change in such financial condition occurring before discharge of my/our obligations to you. I/we understand that you will retain this personal financial statement whether or not you approve the credit in connection with which it is submitted. You are authorized to check my/our credit and employment history or any other information contained herein. The undersigned certify that the information contained on this form has been carefully reviewed and that it is true and correct in all aspects.

Applicant - _____

Co-Applicant - _____

Signature _____ Date _____

Signature (If you are requesting the loan jointly) _____ Date _____