

Business Services OUCU Financial 944 East State St. Athens, Ohio 45701 PH: 740-597-2879 FX: 740-597-2874 business@oucu.org

Personal Financial Statement

IMPORTANT NOTICE. The information contained in this statement is provided to OUCU Financial ("OUCU") to extend or to continue to extend business-purpose credit to the undersigned or to others upon the guaranty of the undersigned. OUCU is relying on this information in deciding to grant or continue credit or to accept a guaranty thereof. It is a Federal crime under Section 1014 of Title 18 of the United States Code for any person to knowingly make any false statement or report, or willfully overvalue any land, property or security for the purpose of influencing in any way the action of an insured State chartered credit union and any institution the accounts of which are insured by the National Credit Union Administration.

EQUAL CREDIT OPPORTUNITY ACT. The federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, national origin, sex, marital status, age (provided the applicant has the capacity to enter into a binding contract); because all or part of the applicant's income derives from any public assistance program; or because the applicant has in good faith exercised any right under the Consumer Credit Protection Act. The federal agency that administers compliance with this law concerning this creditor is: Federal Trade Commission, Chicago Regional Office, 55 E. Monroe St., Suite 1437, Chicago, IL 60603.

If you are applying for individual credit or if this statement relates to your guaranty of the indebtness of other person(s), firm(s) or corporations(s) including any income you are relying on, such as alimony, child support, maintenance payments or any other income or assets. Alimony child support, or separate maintenance income, need not be revealed if you do not wish to have it considered as basis for repaying this obligation.

income, need not be revealed if you do not wish to have it considered as basis for repaying this obligation.						
I intend to apply for individual credit: Signature:						
If you are applying for joint credi	t, or if this statement rela	tes to your guaranty of the indebtedness	of other person(s) firm(s) or	r corporation(s), comple	te all sections.	
We intend to apply for joint credit:	Signature: Co-		Co-Applicant Signature:			
All applicants please sign and	d date the back of this	financial statement.				
		Individual Infor	mation			
Individual Name						
Home Address, City, State, Zip						
Control Connection Management						
Social Security Number		Date of Birth		Home Phone		
Cell Phone		Email				
Employer Name		Employer Address, City, State, Zip				
Business Phone		Title/Position			No. of Years	
business Priorie		Title/Position			No. of Teals	
		Note: Attach separate sheet(s) to exp	lain all "Yes" answers.			
1. Are any significant changes in your income or expenses expected in the next 12 months?						NO
2. Are you a guarantor, co-signer or oth	nerwise liable for any loan, leas	e or other contract or debt of an individual or bus	siness?		YES	NO
3. Do you or any business in which you are an owner have any past due tax obligations (including, but not limited to, property taxes, income taxes, or payroll/withholding taxes)?						NO
4. Do you or any business in which you are an owner have any outstanding judgements or collections?					YES	NO
5. Do you or any business in which you are an owner have any outstanding letters of credit or surety bonds?						NO
6. Have you or any business in which you are or were an owner ever declared bankruptcy including minority ownership of greater than or equal to 20%?					YES	NO
7. Are there any legal actions pending against you or any business in which you are an owner?					YES	NO
8. Are you on parole or on probation, o	r have you ever been convicted	d or placed on any form of probation, for any crim	ninal offense other than a minor v	vehicle violation?	YES	NO
		Joint Information	on			
Individual Name						
Home Address, City, State, Zip						
Social Security Number		Date of Right		Home Dhone		
Social Security Humber		Date of Birth Home Phone				
Cell Phone		Email				
Employer Name		Employer Address, City, State, Zip				
Business Phone	Title/Position		No. of Years			
		Note: Attach separate sheet(s) to exp	olain all "Yes" answers.			
Are any significant changes in your in the second sec	income or expenses expected	in the next 12 months?			YES	NO
2. Are you a guarantor, co-signer or otherwise liable for any loan, lease or other contract or debt of an individual or business?				YES	NO	
3. Do you or any business in which you are an owner have any past due tax obligations (including, but not limited to, property taxes, income taxes, or payroll/withholding taxes)? YES					NO	
4. Do you or any business in which you are an owner have any outstanding judgements or collections?					YES	NO
5. Do you or any business in which you are an owner have any outstanding letters of credit or surety bonds?					YES	NO
6. Have you or any business in which you are or were an owner ever declared bankruptcy including minority ownership of greater than or equal to 20%?					YES	NO
7. Are there any legal actions pending against you or any business in which you are an owner?						NO
8. Are you on parole or on probation, or have you ever been convicted or placed on any form of probation, for any criminal offense other than a minor vehicle violation?						NO

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Income Description	Individual Information	on Joint Information		Expense Description	Individual In	formation	Joint Information
Wages and salaries			Federal & state	income taxes			
Bonus and commissions			Alimony or chile	d support*			
Interest/Dividends			Other				
IRA distributions/Pensions and annuities			TOTAL EXPENS	ES:			
Unemployment			*/	from alimony, shild support		onance need no	at he revealed if you do not wish t
Social security				prom alimony, chila support Insidered as a basis for repa			ot be revealed if you do not wish t
Other*							
TOTAL INCOME:							
A: Cash	ı In Other Finan	cial Institutions (che	cking, sa	vings, money mark	ets, certificate	es of depos	it, etc.)
Type of Accou	int	Financial Institutio	n	Pledged?	Yes/No	Ac	count Balance
				YES	NO		
				YES	NO		
				YES	NO		
						Total:	
B: Marketable Securities (mutual funds, stocks, bonds, etc.)			etc.)	C: Retirement Accounts (including IRA, 401k, 403b, Keogh, SEP, Profit-Sharing, etc.)			
Description	1	Market Value		Descripti	ion	N	/larket Value
	Tota	al:				Total:	
		D: \	/ehicles,	Boats, Etc.			
Year, Make, Mo	odel	Creditor Name		Market Va	alue	Мо	nthly Payment
				Total:		Total:	
		E: Real E	state Ov	wned - Personal			
Date Acquire	ed	Address		Creditor N	ame	N	/larket Value
						TOTAL:	

Annual Expenses (omit cents)

Annual Income (omit cents)

F: Business/Partnership Interests - Please attach K-1, if applicable						
Name of Business/Partnership	Owner Since	Total Debt	%Owned			
			%			
			%			
			%			
		TOTAL:				
G: Credit Cards, Department Store Cards, Charge Cards, Etc.						
Creditor Name	Credit Limit	Current Balance	Monthly Payment			
	TOTAL:	TOTAL:	TOTAL:			
H: Other Liabilities (student loans, family loans, etc.)						
Creditor Name	Type of Loan	Current Balance	Monthly Payment			
		TOTAL:	TOTAL:			
IMPORTANT NOTICES & DISCLOSURES						
The undersigned agree to notify OU change in (1) any of the information the undersigned to perform their old considered as a continuing stateme	ersigned represent, warrant and cert ICU immediately and in writing of any or contained in this statement, (2) the oligations to OUCU. In the absence of int and substantially correct. If the un	change in name, address, or emplo financial condition of any of the und such notice or a new and full writte dersigned fail to notify OUCU as req	yment and of any material adverse lersigned, or (3) the ability of any of n statement, this should be uired above, or if any of the			

YOUR REPRESENTATIONS. The undersigned represent, warrant and certify that the information provided herein is true, correct and complete. The undersigned agree to notify OUCU immediately and in writing of any change in name, address, or employment and of any material adverse change in (1) any of the information contained in this statement, (2) the financial condition of any of the undersigned, or (3) the ability of any of the undersigned to perform their obligations to OUCU. 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 OUCU as required above, or if any of the information herein should prove to be inaccurate or incomplete in any material respect, OUCU may declare the indebtedness of the undersigned or the indebtedness guaranteed by the undersigned, as the case may be, in default and immediately due and payable. OUCU is authorized to make all inquires it deems necessary to verify the accuracy of the information contained herein and to determine the credit-worthiness of the undersigned. The undersigned authorize any person or consumer reporting agency to give OUCU any information it may have on the undersigned. Each of the undersigned authorizes OUCU to answer questions about its credit experience with the undersigned. As long as any obligation or guaranty of the undersigned to OUCU is outstanding, the undersigned shall supply annually an updated financial statement and any other financial information requested by OUCU. The undersigned acknowledge receiving a copy of the disclosures herein. All parties will consider a copy or facsimile of this statement to be as binding and valid as the original. This statement and any other financial or other information that the undersigned gives OUCU shall be the property of OUCU.

SIGNATURES				
Signature:	Date:			
Signature:	Date:			

To Print:

To Email:

- complete form
- save as new file

Please contact us to receive a secure link to submit your items. Protecting our members' personal information is very important to us. Please never include non-public and confidential personal information in an email or attachment.