

944 East State St. Athens, Ohio 45701 PH: 740-447-5202 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.

| income you are relying on, su | ich as alimony, child su | ement relates to your guaranty of the indebtness of other person(s), firm(s) or opport, maintenance payments or any other income or assets. Alimony child suphave it considered as basis for repaying this obligation. | | | | | |
|---|----------------------------|--|--------------|----|--|--|--|
| I intend to apply for individual credit: | Signature: | | | _ | | | |
| If you are applying for joint credit, or if this statement relates to your guaranty of the indebtedness of other person(s) firm(s) or corporation(s), complete all sections. | | | | | | | |
| We intend to apply for joint credit: | dit: Signature: | | | | | | |
| | Co-Applicant Signature: | | | | | | |
| All applicants please sign and date the back of this financial statement. | | | | | | | |
| | | Individual Information | | | | | |
| Individual Name | | | | | | | |
| Home Address, City, State, Zip | | | | | | | |
| 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 | | | | |
| | | Note: Attach separate sheet(s) to explain all "Yes" answers. | | | | | |
| 1. Are any significant changes in your income or expenses expected in the next 12 months? | | | | | | | |
| 2. Are you a guarantor, co-signer or otherwise liable for any loan, lease or other contract or debt of an individual or business? | | | | | | | |
| 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)? | | | | | | | |
| 4. Do you or any business in which you are an owner have any outstanding judgements or collections? | | | | | | | |
| 5. Do you or any business in which you are an owner have any outstanding letters of credit or surety bonds? | | | | | | | |
| 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%? | | | | | | | |
| 7. Are there any legal actions pending a | YES | 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? | | | | | | | |
| | | Joint Information | | | | | |
| Individual Name | | | | | | | |
| Home Address, City, State, Zip | | | | | | | |
| 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 | | | | |
| | | Note: Attach separate sheet(s) to explain all "Yes" answers. | | | | | |
| 1. Are any significant changes in your | ncome 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? | | | | | | | |
| 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? | | | | | | | |
| 5. Do you or any business in which you are an owner have any outstanding letters of credit or surety bonds? | | | | | | | |
| 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%? | | | | | | | |
| 7. Are there any legal actions pending against you or any business in which you are an owner? | | | | | | | |
| 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? | | | | | | | |

| | • | | | | • | • | |
|---|--------------------|-------------------------|------------------|--|---------------|-----------|------------------------------------|
| Income Description | Individual Informa | ation Joint Information | | Expense Description | Individual In | formation | Joint Information |
| Wages and salaries | | | Federal & state | | | | |
| Bonus and commissions | | | Alimony or child | d support* | | | |
| Interest/Dividends | | | Other | | | | |
| IRA distributions/Pensions and annuities | | | TOTAL EXPENSE | ES: | | | |
| Unemployment | | | *1 | | | | |
| Social security | | | | rom alimony, chila support nsidered as a basis for repa | | | t be revealed if you do not wish t |
| Other* | | | | | | | |
| TOTAL INCOME: | | | | | | | |
| A: Cash In Other Financial Institutions (checking, savings, money markets, certificates of deposit, etc.) | | | | | | | |
| Type of Accou | nt | 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 | | Market Value | | Descripti | ion | N | Narket Value |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | То | otal: | | | | Total: | |
| | | D: V | ehicles, | Boats, Etc. | | | |
| Year, Make, Mo | odel | Creditor Name | | Market Va | alue | Мо | nthly Payment |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | Total: | | Total: | |
| | E: Rea | l Estate Owned - Perso | onal - Ple | ase complete Real | Estate Sched | ule | |
| Date Acquire | d | Address | | Creditor N | ame | N | Narket Value |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | TOTAL: | |
| | | | | | | I | |

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 | | | |
| | | | % | | | |
| | | | % | | | |
| | | | % | | | |
| | Т | OTAL: | | | | |
| 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 | | | | | | |
| 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 | | | | | | |

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.