

**PERSONAL FINANCIAL STATEMENT
TO
THE GUNNISON BANK AND TRUST COMPANY**

IMPORTANT: Please read these directions before completing this application, and check the appropriate box below.

- If you are applying for individual credit in your own name, and are 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 all sections except Co-Applicant.
- If you are applying for joint credit with another person, complete all sections and sign below. WE INTEND TO APPLY FOR JOINT CREDIT:

(APPLICANT) _____ (CO-APPLICANT) _____

- If you are applying for individual credit, but are relying on income from alimony, child support, or separate maintenance or on the income or assets of another person on whose alimony, support or maintenance payments or income or assets you are relying.
- If this statement relates to your guaranty of the indebtedness of other person(s), firm(s) or corporation(s), complete all sections.

IMPORTANT INFORMATION ABOUT PROCEDURES FOR OPENING A NEW ACCOUNT

To help the government fight the funding of terrorism and money laundering activities, the USA Patriot Act requires all financial institutions to obtain, verify and record information that identifies each person who opens an account. What this means to you: When you open an account, we will ask for you name physical address, date of birth, taxpayer identification number and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents. We will let you know if additional information is required.

APPLICANT	CO-APPLICANT
NAME: _____	NAME: _____
MAILING ADDRESS: _____	MAILING ADDRESS: _____
CITY, STATE: _____	CITY, STATE: _____
ZIPCODE: _____	ZIPCODE: _____
STREET ADDRESS: _____	STREET ADDRESS: _____
CITY, STATE: _____	CITY, STATE: _____
ZIPCODE: _____	ZIPCODE: _____
BIRTH DATE: _____ SSN: _____	BIRTH DATE: _____ SSN: _____
PHONE: HOME _____ WORK _____	PHONE: HOME _____ WORK _____
CELL: _____	CELL _____
# OF DEPENDANTS: _____ AGES: _____	# OF DEPENDANTS: _____ AGES: _____
EMPLOYER: _____	EMPLOYER: _____
POSITION: _____ DATE EMPLOYED: _____	POSITION: _____ DATE EMPLOYED: _____
E-MAIL ADDRESS: _____	E-MAIL ADDRESS: _____

Financial Statement as of: _____

ASSETS	Amount	LIABILITIES	Amount
Cash, on hand and in banks - Sch. 1	\$ -	Notes Payable and Other Loans - Sch. 7	\$ -
Notes and Accounts Receivable - Sch. 2	-	Accounts Payable - Sch. 7	-
Cash Value of Life Insurance - Sch. 3	-	Credit Card - Sch. 8	-
Listed Stocks and Bonds - Sch. 4	-	Taxes Due - Sch. 9	-
Vehicles - Sch. 5	-		
TOTAL CURRENT ASSETS	\$ -	TOTAL CURRENT LIABILITIES	\$ -
Real Estate owned - Sch. 6	-	Real Estate Mortgages - Sch. 7	-
Other Assets (List)	-	Other (List)	-
	-		-
	-		-
	-		-
	-		-
	-		-
	-		-
TOTAL ASSETS	\$ -	TOTAL LIABILITIES	\$ -
		NET WORTH	\$ -

On all schedules below, the ownership of assets or liabilities is designated in the far left hand box as follows;
 A = Applicant; C = Co-Applicant; B = Both Applicant and Co-Applicant; O = Other.

SCHEDULES

No. 1. Banking Relations. (Checking and Savings Accounts, C.D.'s, Money Market Funds)

Own	Name and Location	Type of Account	Account Number	Amount
TOTAL				\$ -

No. 2 Notes and Accounts Receivable

Own	From Whom	Amount	Terms (Note date, Interest Rate, Payment Date, Payment Amount and Maturity)
		\$ -	
		\$ -	
TOTAL		\$ -	

No. 3 Cash Value of Life Insurance

Own	Company	Address	Policy Number	Face Amount	Cash Value	Loan Amount	Net Cash Value
				\$ -	\$ -	\$ -	\$ -
				\$ -	\$ -	\$ -	\$ -
TOTAL				\$ -	\$ -	\$ -	\$ -

No. 4 Stocks and Bonds

Own	Name of Issuer	Type of Investment	Maturity	# Shares	Purchase Price	Current Value	Listed?
TOTAL						\$ -	\$ -

No. 5 Vehicles

Own	Type	Year	Make	Model	Current Value	Loans
TOTAL					\$ -	\$ -

No. 6 Real Estate Owned

Own	Legal Description of Property Address	Date Purchased	Cost	Present Value	Mortgages
TOTAL			\$ -	\$ -	

No. 7 Mortgages, Notes and Accounts Payable

Own	To Whom	Purpose and / or Security	Interest Rate	Pmt. Dates	Principal Balance	Payment Amount/ Frequency	Past Due
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REAL ESTATE DEBT

					-	-	
					-	-	
					-	-	
TOTAL					\$ -	\$ -	

NOTES PAYABLE

					-	-	
					-	-	
					-	-	
TOTAL					\$ -	\$ -	

ACCOUNTS PAYABLE

					\$ -	\$ -	
					-	-	
					-	-	
					-	-	
TOTAL					\$ -	\$ -	

No. 8 Credit Card Debt

Own	Card Company	Account Number	Credit Limit	Amount Owed	Monthly Payment	Past Due
			\$ -	\$ -	\$ -	
			\$ -	-	-	
			\$ -	-	-	
			\$ -	-	-	
			\$ -	-	-	
				\$ -	\$ -	

No. 9 Taxes Due

Real Estate	+	Income	+	Personal Property	+	Social Security	=	Total Taxes
\$ -		\$ -		\$ -		\$ -		\$ -

INCOME INFORMATION

(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.)

	Monthly Income		Monthly Expenses	
	Gross	Net		
Applicant	_____	_____	Rent or House Expense	
Co-Applicant	_____ -	_____ -	Living Expense	
Other (List)	_____	_____ -	Auto Insurance	
	_____	_____	House Insurance	-
	_____	_____	Real Estate Taxes	-
Total Income	\$ -	\$ -	Total Expenses	\$ -

Have you been declared bankrupt in the last 10 years? _____ If so, give details. _____

Lawsuits, of Tax Liens against me (or pending) at this time _____ Party Owed: _____

Are you a partner in any firm? _____ Have you any partners in any business? _____

Are you a co-maker, endorser or guarantor of any loan or contract? _____ If so, give details. _____

Other relevant comments: _____

The information contained in this statement is provided for the purpose of obtaining, maintaining credit with you on behalf of the undersigned, or persons, firms or corporations in whose behalf the undersigned may either severally or jointly with others, execute a guaranty in your favor. Each undersigned understands that you are relying on the information provided herein (including the designation made as to ownership of property) in deciding to grant or continue credit. Each undersigned represents and warrants that the information provided is true and complete and that you may consider this statement as continuing to be correct until written notice of a change is given to you by the undersigned. You are authorized to make all inquiries you deem necessary to verify the accuracy of the statements made herein, and to determine my/our creditworthiness. You are authorized to answer questions about your credit experience with me/us.

APPLICANT: _____ **DATE:** _____ **WITNESS:** _____

CO-APPLICANT: _____ **DATE:** _____ **WITNESS:** _____