



**BANKING – THE DCU WAY**  
 220 Donald Lynch Blvd • PO Box 9130 • Marlborough, MA 01752-9130  
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# **Personal Financial Statement Confidential**

## **Commercial Loan Personal Financial Statement Form Checklist**

Please use the Commercial Loan Personal Financial Statement Form when applying for a DCU business loan and when at least one of the following is true:

- The QuickApp is not appropriate for your request,
- The DCU loan officer asks you to submit a Personal Financial Statement

Each principal who owns 20% or more of the business or property to be financed must fill out the Personal Financial Statement Form.

To speed processing of your request, please fill out the form completely and sign it. Incomplete or unsigned forms will delay processing your request.

**PLEASE COPY THIS PERSONAL FINANCIAL STATEMENT AND RETAIN A COPY FOR YOUR RECORDS**

**IMPORTANT: Directions to the Applicant and Co-Applicant**

**(Applicant and/or Co-Applicant may be Guarantor(s) of loans to other parties)**

<input type="checkbox"/>	Individual Credit-If relying on your own income and assets and not the income and assets of a spouse or another person as a basis for extension of credit or repayment of credit, complete the Financial Statement below only as it applies to you individually. Do not provide any information about a spouse or other person. Sign the Financial Statement.
<input type="checkbox"/>	Joint Credit-If applying for joint credit or for individual credit relying on your own income and/or assets of a spouse or another person as a basis for extension of or repayment of credit, complete the Financial Statement below. Include information about income, assets and liabilities of both parties. Both Applicant and Spouse or Co-Applicant must sign this statement.

**White Boxes to be Completed**

Applicant's Name:		Co-Applicant's Name:	
Street Address			
City of Residence:	State:	Zip:	
Home Phone:			
Business Phone:			
Employer			
Position or Profession			
Number of Years Here			
DCU Member Number (if any)			
Income taxes settled through (Date)			

**Schedule A: Deposit Accounts**

List all your deposits at Credit Unions, Banks, Brokers and other Financial Institutions.

Name of Institution	Name(s) on Account	Checking Balance	Savings and CD Balances	Total
DCU		\$ -	\$ -	\$ -
		\$ -	\$ -	\$ -
		\$ -	\$ -	\$ -
		\$ -	\$ -	\$ -
		\$ -	\$ -	\$ -
<b>TOTALS</b>		\$ -	\$ -	\$ -

**Schedule B: Marketable Securities, U.S. Governments, Stocks (Listed & Unlisted), Bonds (Government and Commercial)**

Shares or face value (Bonds)	Company, Mutual Fund or Type of Bond	In name of	Market Value	Pledged?
			\$ -	No ▼
			\$ -	▼
			\$ -	▼
			\$ -	▼
			\$ -	▼
<b>TOTAL</b>			\$ -	

**Schedule C1: RESIDENTIAL Real Estate Owned with 1st Mortgages.**

Address	RE Type	Title In Name Of	Year Acquire	Cost plus Improvements	Present Mkt. Value	1st Mortgage		
						Balance	Mo. Pymt	Lender
	Residence ▼			\$ -	\$ -	\$ -	\$ -	
	Residence ▼			\$ -	\$ -	\$ -	\$ -	
	Residence ▼			\$ -	\$ -	\$ -	\$ -	
<b>TOTAL</b>				\$ -	\$ -	\$ -	\$ -	

**Schedule C2: INVESTMENT Real Estate Owned with 1st Mortgages.**

Address	RE Type	Units	Title In Name Of	Year Acquired	Cost plus Improvements	Present Mkt. Value	1st Mortgage		
							Balance	Mo. Pymt	Lender
	Reside ▼				\$ -	\$ -	\$ -	\$ -	
	Reside ▼				\$ -	\$ -	\$ -	\$ -	
	Reside ▼				\$ -	\$ -	\$ -	\$ -	
	Reside ▼				\$ -	\$ -	\$ -	\$ -	
	Reside ▼				\$ -	\$ -	\$ -	\$ -	
<b>TOTAL</b>				\$ -	\$ -	\$ -	\$ -	\$ -	

**Schedule D: Other Loans (Auto Loans, Home Equity Loans and 2nd or 3rd Mortgages, Lines of Credit, etc.)**

Name of Institution	Name(s) on Account	Type	High Credit	Current Balance	Monthly Payment	Secured by What Assets
			\$ -	\$ -	\$ -	
			\$ -	\$ -	\$ -	
			\$ -	\$ -	\$ -	
			\$ -	\$ -	\$ -	
			\$ -	\$ -	\$ -	
<b>TOTAL</b>			\$ -	\$ -	\$ -	

**Schedule E: Owned Businesses and Partnerships**

Name	% Ownership	Type of Business	Year Acquired	Present Mkt. Value	Present Loan Balance	Your Equity Value	Bank
				\$ -	\$ -	\$ -	
				\$ -	\$ -	\$ -	
				\$ -	\$ -	\$ -	
<b>TOTAL</b>				\$ -	\$ -	\$ -	

**Schedule F: Life Insurance Carried (T for Term, W for Whole Life)**

Name of Company	Face Amount	Term or Wh Life	Cash Surrender Value	Loans	Beneficiary
		▼			
		▼			
<b>TOTAL</b>			\$ -	\$ -	\$ -

**Schedule G: Retirement Accounts**

List all your Retirement Accounts.

Name of Institution	Type IRA, 401(k), etc.	Name on Account	Balance
<b>TOTAL</b>			\$ -

Personal Financial Statement as of:		February 6, 2018			
Assets	In Even Dollars	Joint/Individual	Liabilities	In Even Dollars	Joint/Individual
Cash in DCU	\$ -	<input type="text"/>	Installment Loans - information from Schedule D	\$ -	Individual <input type="text"/>
Deposit Account in other Financial Institutions - information from	\$ -	<input type="text"/>	Credit Cards and Accounts Payable	\$ -	<input type="text"/>
Marketable Securities - information from Schedule B	\$ -	<input type="text"/>	Unpaid Taxes	\$ -	<input type="text"/>
Accounts and Notes Receivable	\$ -	<input type="text"/>	Residence Mortgage(s) - information from Schedule C1	\$ -	<input type="text"/>
Residence(s) - information from Schedule C1	\$ -	<input type="text"/>	Investment Mortgage(s) - information from Schedule C2	\$ -	<input type="text"/>
Investment Real Estate - information from Schedule C2	\$ -	<input type="text"/>	Owned Businesses and Partnership Loans - information from Schedule	\$ -	<input type="text"/>
Cash Value Life Insurance - information from Schedule F	\$ -	<input type="text"/>	Other Liabilities:	\$ -	<input type="text"/>
Retirement Accounts	\$ -	<input type="text"/>	Other Liabilities:	\$ -	<input type="text"/>
Personal Property and Autos	\$ -	<input type="text"/>	Other Liabilities:	\$ -	<input type="text"/>
Business and Partnership Values - information from Schedule E	\$ -	<input type="text"/>	Other Liabilities:	\$ -	<input type="text"/>
Other Assets: Boat	\$ -	<input type="text"/>	Other Liabilities:	\$ -	<input type="text"/>
Other Assets: Car	\$ -	<input type="text"/>	Total Liabilities	\$ -	
Other Assets: Furniture	\$ -	<input type="text"/>	Net Worth	\$ -	
Total Assets	\$ -		Total Liabilities and Net Worth	\$ -	

Sources of Income			
Applicant	In Even Dollars	Co-Applicant	In Even Dollars
Salary from Applicant's Business	<input type="text"/>	Salary from Co-Applicant's Business	<input type="text"/>
Income from Outside Wages	<input type="text"/>	Income from Outside Wages	<input type="text"/>
Bonus and Commissions	<input type="text"/>	Bonus and Commissions	<input type="text"/>
Dividends	<input type="text"/>	Dividends	<input type="text"/>
Real Estate Income	<input type="text"/>	Real Estate Income	<input type="text"/>
*Other Income:	<input type="text"/>	*Other Income	<input type="text"/>
TOTAL	\$ -	TOTAL	\$ -

\*Alimony, child support or separate maintenance payments need not be disclosed unless relied upon as a basis for extension of credit. If disclosed, payments received under: (choose one)

Contingent Liabilities * (If answer is yes, attach explanation)			
Applicant	Amount	Co-Applicant	Amount
As endorser, co-maker or guarantor on any loans or leases? *	No <input type="text"/>	As endorser, co-maker or guarantor on any loans or leases? *	No <input type="text"/>
Any legal claims outstanding? *	No <input type="text"/>	Any legal claims outstanding? *	No <input type="text"/>
Past due taxes? *	No <input type="text"/>	Past due taxes? *	No <input type="text"/>
Other special debt? *	No <input type="text"/>	Other special debt? *	No <input type="text"/>
Are you a defendant in any suits or legal action? *	No <input type="text"/>	Are you a defendant in any suits or legal action? *	No <input type="text"/>
Have you ever filed for bankruptcy? *	No <input type="text"/>	Have you ever filed for bankruptcy? *	No <input type="text"/>
Do you have a will or trust?	No <input type="text"/>	Do you have a will or trust?	No <input type="text"/>
Number of Dependents	<input type="text"/>	Number of Dependents	<input type="text"/>

My Attorney is:	<input type="text"/>	City:	<input type="text"/>	State:	<input type="text"/>	Phone:	<input type="text"/>
My Accountant is:	<input type="text"/>	City:	<input type="text"/>	State:	<input type="text"/>	Phone:	<input type="text"/>

I/we have carefully read and submitted the foregoing information provided on all pages of this statement to the Digital Federal Credit Union. The information is presented as a true and accurate statement of my/our financial condition on the date indicated. This statement is provided for the purpose of obtaining and maintaining credit with said Credit Union. I/we agree that if any material change(s) occur(s) in my/our financial condition that I/we will immediately notify said Credit Union of said change(s) and unless said Credit Union is so notified it may continue to rely upon this financial statement and the representations made herein as a true and accurate statement of my/our financial condition.

I/we authorize Digital Federal Credit Union to make whatever credit inquiries it deems necessary during the review of any applications(s) for credit or at any time during the continuation of the credit relationship. I/we authorize Digital Federal Credit Union to obtain information regarding my/our creditworthiness, standing or capacity, character, general reputation, personal characteristics or mode of living from any consumer reporting agency, financial institution or any other outside source that regularly provides such information.

**I/We also hereby certify that I/we do not have any delinquent payments over 30 days past due or in default except as follows, if "NONE" so state.**

Name of Institution	Loan Balance	Monthly Payment	Amount Past Due	Past Due How Long?	Reason

*Please read and review the disclosures below and sign and date where indicated below. We cannot process your application without proper signatures.*

Applicant Signature	Date Signed	Social Security No.	Date of Birth

Co - Applicant Signature	Date Signed	Social Security No.	Date of Birth

**DISCLOSURES AND SIGNATURES**

If your application for business credit is denied, you have the right to a written statement of the specific reasons for the denial. To obtain the statement, please contact Digital Federal Credit Union, Commercial Lending Department, 220 Donald Lynch Boulevard, PO Box 9130, Marlborough, MA 01752, 800.328.8797 within sixty (60) days from the date you are notified of our decision. We will send you a written statement of reasons for the denial within thirty (30) days of receiving your request for the statement.

NOTICE: 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 National Credit Union Administration, Office of Consumer Protection, 1775 Duke Street, Alexandria, VA 22314.

If your loan is secured by real estate, we may order an appraisal to determine the property's value ~ the cost will be responsibility of the Applicant. We will promptly provide you a copy of any appraisal, even if your loan application fails to result in a closed loan. Regarding loans secured by 1-4 family residential properties, we will deliver a copy of any valuation (appraisal or evaluation) promptly upon completion of the valuation but at least three (3) business days before closing.

**HOME MORTGAGE DISCLOSURE**

- 1.) Is your loan request for one or more of the following situations:  Yes  No
- a.)** for the purchase of, **b.)** or improvements to, **c.)** or a refinance of a residential property? *(By definition, residential property is 50% or more of the rental income from the residential units.)*
- 2.) Will the Borrower be a: (Choose one)?  Individual(s)  Partnership  Limited Liability Company (LLC)  
 Corporation  Trust  Limited Liability Partnership (LLP)

If the answer to **question 1 is Yes** and the answer to **question 2 is Individual or Partnership**, please read the information below. Otherwise, the PFS is complete.

**DEMOGRAPHIC INFORMATION OF APPLICANT AND CO-APPLICANT**

The purpose of collecting this information is to help ensure that all applicants are treated fairly and that the housing needs of communities and neighborhoods are being fulfilled. For residential mortgage lending, Federal law requires that we ask applicants for their demographic information (ethnicity, sex, and race) in order to monitor our compliance with equal credit opportunity, fair housing, and home mortgage disclosure laws. You are not required to provide this information, but are encouraged to do so. You may select one or more designations for "Ethnicity" and one or more designations for "Race". The law provides that we may not discriminate on the basis of this information, or on whether you choose to provide it. However, if you choose not to provide the information and you have made this application in person, Federal regulations require us to note your ethnicity, sex, and race on the basis of visual observation or surname. If you do not wish to provide some or all of this information, please check below.

<b>Applicant:</b>	<b>Co-Applicant:</b>
<b>Ethnicity:</b> - Check one or more <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Mexican <input type="checkbox"/> Puerto Rican <input type="checkbox"/> Cuban <input type="checkbox"/> Other Hispanic or Latino ~ <i>Print origin; example Argentinean, Colombian, Dominican, Nicaraguan, Salvadoran, Spaniard and so on:</i> <input type="checkbox"/> Not Hispanic or Latino	<b>Ethnicity:</b> - Check one or more <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Mexican <input type="checkbox"/> Puerto Rican <input type="checkbox"/> Cuban <input type="checkbox"/> Other Hispanic or Latino ~ <i>Print origin; example Argentinean, Colombian, Dominican, Nicaraguan, Salvadoran, Spaniard and so on:</i> <input type="checkbox"/> Not Hispanic or Latino
<input type="checkbox"/> I do not wish to provide this information	<input type="checkbox"/> I do not wish to provide this information

<b>Race:</b> - Check one or more <input type="checkbox"/> American Indian or Alaska Native ~ <i>Print name of enrolled or principal tribe:</i>  <input type="checkbox"/> Asian <input type="checkbox"/> Asian Indian <input type="checkbox"/> Chinese <input type="checkbox"/> Filipino <input type="checkbox"/> Japanese <input type="checkbox"/> Korean <input type="checkbox"/> Vietnamese <input type="checkbox"/> Other Asian ~ <i>Print race; example Hmong, Laotian, Thai, Pakistani, Cambodian, and so on:</i>	<b>Race:</b> - Check one or more <input type="checkbox"/> American Indian or Alaska Native ~ <i>Print name of enrolled or principal tribe:</i>  <input type="checkbox"/> Asian <input type="checkbox"/> Asian Indian <input type="checkbox"/> Chinese <input type="checkbox"/> Filipino <input type="checkbox"/> Japanese <input type="checkbox"/> Korean <input type="checkbox"/> Vietnamese <input type="checkbox"/> Other Asian ~ <i>Print race; example Hmong, Laotian, Thai, Pakistani, Cambodian, and so on:</i>
<input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> Native Hawaiian <input type="checkbox"/> Guamanian or Chamorro <input type="checkbox"/> Samoan <input type="checkbox"/> Other Pacific Islander ~ <i>Print race; example Fijian, Tongan, and so on:</i> <input type="checkbox"/> White	<input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> Native Hawaiian <input type="checkbox"/> Guamanian or Chamorro <input type="checkbox"/> Samoan <input type="checkbox"/> Other Pacific Islander ~ <i>Print race; example Fijian, Tongan, and so on:</i> <input type="checkbox"/> White
<input type="checkbox"/> I do not wish to provide this information	<input type="checkbox"/> I do not wish to provide this information

<b>Sex:</b> <input type="checkbox"/> Female <input type="checkbox"/> Male	<b>Sex:</b> <input type="checkbox"/> Female <input type="checkbox"/> Male
<input type="checkbox"/> I do not wish to provide this information	<input type="checkbox"/> I do not wish to provide this information

**To Be Completed by Financial Institution (for application taken in person):**

Was the ethnicity of the Applicant collected on the basis of visual observation or surname?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Was the race of the Applicant collected on the basis of visual observation or surname?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Was the sex of the Applicant collected on the basis of visual observation or surname?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No

The Demographic Information was provided through:

Face-to-Face Interview (includes Electronic Media w/video component)
  Telephone Interview
  Fax or Mail
  Email or Internet