



GOLDEN EAGLE COMMUNITY BANK

PERSONAL FINANCIAL STATEMENT AS OF _____

Date

PERSONAL INFORMATION					
APPLICANT (NAME)			CO-APPLICANT (NAME)		
Employer			Employer		
Address of Employer(street, city, state, zip)			Address of Employer(street, city, state, zip)		
Business Phone No.	No. of Years with Employer	Title/Position	Business Phone No.	No. of Years with Employer	Title/Position
Name of previous employer & position (if with current employer less than 3 years)			Name of previous employer & position (if with current employer less than 3 years)		
Home Address(street, city, state, zip)			Home Address(street, city, state, zip)		
Home Phone No.	Social Security No.	Date of Birth	Home Phone No.	Social Security No.	Date of Birth
Name, Phone No. of your Accountant			Name, Phone No. of your Accountant		
Name, Phone No. of your Attorney			Name, Phone No. of your Attorney		
Name, Phone No. of your Investment Advisor/Broker			Name, Phone No. of your Investment Advisor/Broker		
Name, Phone No. of your Insurance Advisor			Name, Phone No. of your Insurance Advisor		

Cash Income & Expenditures Statement For Year Ended _____ (Omit Cents)

ANNUAL INCOME	AMOUNT (\$)	ANNUAL EXPENDITURES	AMOUNT (\$)
Salary (applicant)		Federal Income and Other Taxes	
Salary (co-applicant)		State Income and Other Taxes	
Bonuses & Commissions (applicant)		Rental Payments, Co-op, or Condo Maintenance	
Bonuses & Commissions (co-applicant)		Mortgage Payments - Residential	
Rental Income		Mortgage Payments - Investment	
Interest Income		Property Taxes - Residential	
Dividend Income		Property Taxes - Investment	
Capital Gains		Insurance	
Partnership Income		Investments (including tax shelters)	
Other Investment Income		Alimony/Child Support	
Other Income (List)**		Tuition	
		Other Living Expense	
		Medical Expenses	
		Other Expense (List)	
TOTAL INCOME →	\$0	TOTAL EXPENDITURES →	\$0

Any significant changes expected in the next 12 months? (If yes, attach information.)

_____ Yes _____ No

** Income from alimony, child support, or separate maintenance income need not be revealed if the applicant or co-applicant does not wish to have it considered as a basis for repaying this obligation.

Schedule E - Notes Payable						
Secured						
Due to	Type of Facility	Amount of Line	Collateral	Interest Rate	Maturity	Unpaid Balance
		\$0				\$0
		\$0				\$0
Unsecured						
TOTAL						

Balance Sheet as of: _____

ASSETS	AMOUNT (\$)	LIABILITIES	AMOUNT (\$)
Cash in this Bank (including money market accounts, CDs)		Notes Payable to this Bank	
		Secured	
Cash in Other Financial Institutions (List) (including money market accounts, CDs)		Unsecured	
		Notes Payable to Others (Schedule E)	
		Secured	\$0
		Unsecured	\$0
		Accounts Payable (including credit cards)	
Readily Marketable Securities (Schedule A)	\$0	Margin Accounts	
Non-Readily Marketable Securities (Schedule A)	\$0	Notes Due: Partnership (Schedule D)	
Accounts and Notes Receivable		Taxes Payable	
Net Cash Surrender Value of Life Insurance (Schedule B)	\$0	Mortgage Debt (Schedule C)	
Residential Real Estate (Schedule C)		Life Insurance Loans (Schedule B)	
Real Estate Investments (Schedule C)		Other Liabilities (List):	
Partnerships / PC Interests (Schedule D)	\$0		
IRA, Keogh, Profit-Sharing & Other Vested Retirement Accounts			
Deferred Income			
Number of years deferred:			
Personal Property (including automobiles)			
Other Assets (List):			
		Total Liabilities	\$0
		Net Worth	\$0
TOTAL ASSETS	\$0	TOTAL LIABILITIES & NET WORTH	\$0

CONTINGENT LIABILITIES	YES	NO	AMOUNT
	(mark with "X")		
Are you a guarantor/co-maker/endorser for any debt of an individual, corporation, or partnership?			
Do you have any outstanding letters of credit or surety bonds?			
Are there any suits or legal actions pending against you?			
Are you contingently liable on any lease or contract?			
Are any of your tax obligations past due?			
What would be your total estimated tax liability if you were to sell your major assets?			
If yes for any of the above, give details:			

