PERSONAL FINANCIAL STATEMENT

Submitted to:

Bank of the Rio Grande
Member FDIC
421 North Water, Las Cruces, NM 88001 • (505) 525-8900
Branch 2535 S. Telshor • (505) 525-8960

NAME: _____

ADDRESS: _____ CITY, STATE, ZIP: _____

SOCIAL SECURITY NUMBER: _____ DATE OF BIRTH: _____ DL# _____

PHONE NUMBERS: HOME: _____ MOBILE: _____ WORK: _____ FAX: _____

BUSINESS OR OCCUPATION: _____ HOW LONG: _____

SALARY OR WAGES: $_____ PER _____ OTHER INCOME : $ _____ PER _____ SOURCE _____

NAME: _____

ADDRESS: _____ CITY, STATE, ZIP: _____

SOCIAL SECURITY NUMBER: _____ DATE OF BIRTH: _____ DL# _____

PHONE NUMBERS: HOME: _____ MOBILE: _____ WORK: _____ FAX: _____

BUSINESS OR OCCUPATION: _____ HOW LONG: _____

SALARY OR WAGES: $_____ PER _____ OTHER INCOME : $ _____ PER _____ SOURCE _____

NAME: _____

ADDRESS: _____ CITY, STATE, ZIP: _____

SOCIAL SECURITY NUMBER: _____ DATE OF BIRTH: _____ DL# _____

PHONE NUMBERS: HOME: _____ MOBILE: _____ WORK: _____ FAX: _____

BUSINESS OR OCCUPATION: _____ HOW LONG: _____

SALARY OR WAGES: $_____ PER _____ OTHER INCOME : $ _____ PER _____ SOURCE _____

PARTNER OR OFFICER IN OTHER VENTURES? _____ DECLARED BANKRUPTCY? _____ PLEDGED ASSETS? _____

MADE A COMPOSITION SETTLEMENT? _____ GUARANTEED LOANS? _____ COSIGNED LOANS? _____

IF YES, EXPLAIN: _____

For the purpose of procuring and maintaining credit from time to time in any form whatsoever with the above named bank, for claims and demands against the undersigned, the undersigned submits the following as being a true and accurate statement of its financial condition on the following date, and agree that if any change occurs that materially reduces the means or ability of the undersigned to pay all claims and demands against it, the undersigned will immediately and without delay notify the said Bank, and unless the Bank is so notified it may continue to rely upon the statement herein given as a true and accurate statement of the financial condition of the undersigned as of the close of business _____, _____. Income from alimony, child support or maintenance payments need not be revealed if the undersigned does not choose to disclose such income in applying for credit.

By signing below I authorize you to check my credit and employment history and to answer questions others may ask you about my credit record with you. I understand that I may be requested to update my credit information, annually.

Statement of Financial Condition as of _____ _____

ASSETS	
Cash on hand	
Deposits in financial institutions (Sch. A)	
Investments (Sch. B)	
Retirement Accounts (Sch. C)	
Cash Value of Life Insurance	
Vehicles: Number _____	
Personal Property	
Real Estate (Sch. D)	
List of Other Assets:	
Total Assets	

LIABILITIES	
Accounts & bills payable	
Bank Credit Cards: Number _____	
Store Credit cards: Number _____	
Unpaid Taxes	
Loans at financial institutions (Sch. F)	
Mortgages Payable (Sch. E)	
List of Other Liabilities:	
Total Liabilities	
Net Worth	
Total Liabilities & Net Worth	

Date _____ Date _____

Signed _____ Signed _____

SCHEDULE A - DEPOSITS IN BANKS & OTHER FINANCIAL INSTITUTIONS

Name of Financial Institution	Type of Account	Account Number	Date Opened	Current Balance

SCHEDULE B - INVESTMENTS (Stocks, Bonds, Corporations, Partnerships, ETC.)

Company / Firm	Type of Investment	Date Started	Base Value	Current Value

SCHEDULE C - RETIREMENT ACCOUNTS

Held By Company / Firm	In Name of	Type of Account	Current Value

SCHEDULE D - REAL ESTATE

Property Location - Address	Date Purchased	Purchase Price	Number of Loans	Current Value

SCHEDULE E - MORTGAGES PAYABLE

Name of Institution	Property Address	Mortgage Amount	Months Left to Pay	Monthly Payment	Current Balance

SCHEDULE F - LOANS

Name of Institution	Account Number	Amount of Loan	Collateral	Monthly Payment	Current Balance