

PERSONAL FINANCIAL STATEMENT As of _____, 20____.	Return to: South Florida Regional Planning Council 1 Oakwood Boulevard Suite 250 Hollywood, FL 33020	SFRPC _____ File No:_____
Complete this form if 1) a sole proprietorship by the proprietor, 2) a partnership by each partner, 3) a corporation by each officer and each stockholder with 20% or more ownership, or 4) any other person or entity providing a guaranty on the loan.		
Name and Address, Including ZIP Code (of person and spouse submitting Statement) Social Security No: _____ Social Security No. (spouse): _____		
Business (of person submitting Statement)		
Please answer all questions using "No" or "None" where necessary		
ASSETS		LIABILITIES
Cash on Hand and in Banks \$ _____ Savings Account in Banks _____ US Government Bonds _____ Accounts & Notes Receivable _____ Life Insurance Cash Surrender Value Only _____ Other Stocks and Bonds _____ (Describe in Section 3) _____ Real Estate _____ (Describe in Section 4) _____ Automobile - Present Value _____ Other Personal Property _____ (Describe in Section 5) _____ Other Assets _____ (Describe in Section 6) _____ <div style="text-align: right; margin-top: 10px;"> Total _____ </div>	Accounts Payable \$ _____ Notes Payable to Banks _____ (Describe in Section 2) _____ Notes Payable to Others _____ (Describe in Section 2) _____ Installment Accounts (Auto) _____ Monthly Payments \$ _____ Installment Accounts (Other) _____ Monthly Payment \$ _____ Loans on Life Insurance _____ Mortgages on Real Estate _____ (Describe in Section 4) _____ Unpaid Taxes _____ (Describe in Section 7) _____ Other Liabilities _____ (Describe in Section 8) _____ Total Liabilities _____ Net Worth _____ <div style="text-align: right; margin-top: 10px;"> Total _____ </div>	

Section 4: Real Estate Owned. (List each parcel separately. Use supplemental sheets if necessary. Each sheet must be identified as a supplement to this statement and signed). (Also advises whether property is covered by title insurance, abstract of title, or both).

Title is in name of	Type of property	
Address of property (City and State)	Original Cost to (me)	_____
	Date Purchased	_____
	Present Market Value	_____
	Tax Assessment Value	_____
Name and Address of Holder of Mortgage (City and State)	Date of Mortgage	_____
	Original Amount	_____
	Balance	_____
	Maturity	_____
	Terms of Payment	_____
Status of Mortgage, i.e., or current or delinquent. If delinquent describe delinquencies		

Section 5: Other Personal Property. (Describe and if any is mortgaged, state name and address of mortgage holder and amount of mortgage terms of payment and if delinquent, describe delinquency.)

Section 6: Other Assets. (Describe)

Section 7: Unpaid Taxes. (Describe in detail, as to type, to whom payable, when due, amount, and what, if any, property or tax lien, if any attach.)

Section 8: Other Liabilities. (Describe in detail)

I or We certify the above and the statements contained in the schedules herein is a true and accurate statement of (my) or (our) financial condition as of the date stated herein. Additionally you authorize the SFRPC to obtain a personal credit report on applicant(s).

Signature

Signature

Date