

Instructions

To complete this Electronic Personal Financial Statement:

- Please complete all fields. Fields requiring user input are highlighted in blue.
- To complete Section 2, please fill out the corresponding schedules (A - H) on page 2. The data entered in these schedules is totaled in Section 2.
- You cannot save data typed into this form. Please print your completed form, return a copy to Oculina Bank and retain a copy for your records.

If you have questions or would like assistance, please do not hesitate to contact a representative at Oculina Bank.

Oculina Bank

4450 24th Ave.

Vero Beach, FL 32967

(772) 563-2212 Phone

(772) 563-4909 Fax



Confidential Personal Financial Statement

Section 1: Individual Information					
Name:			Business Name:		
Position or Occupation:					
Residence Address:			Business Address:		
City	State	Zip	City	State	Zip
Home Phone:			Business Phone:		

Section 2: Statement of Financial Condition Complete via the schedules A – H on page 2					
ASSETS	Schd.	In Dollars (Omit Cents)	LIABILITIES	Schd.	In Dollars (Omit Cents)
Cash on hand and in banks	A		Notes Payable to banks	H	
US Gov't & Marketable Securities	B		Due to Brokers		
Non-Marketable Securities	C		Amounts payable to others		
Retirement Accounts	D		Accounts and bills due		
Accounts, Loans & Notes Receivable	E		Unpaid income tax		
Cash Value Life Insurance	F		Other unpaid taxes and interest		
Real Estate Owned	G		Real Estate mortgages	G	
Vehicles & other personal property			Other Debts (Itemize Below):		
Other Assets (Itemize Below):					
			TOTAL LIABILITIES		
			TOTAL NET WORTH		
TOTAL ASSETS			TOTAL LIABILITIES AND NET WORTH		

Section 3: Income for year ending:	In Dollars (Omit Cents)	Section 5: Personal Information
Salary, Bonuses & Commissions:		Do you have a will?
Dividends:		If so, name of executor:
Real Estate Income:		Are you a partner or officer in any other venture?
Other Income (Describe Below):		If so, describe:
		Are you obligated to pay alimony, child support or separate maintenance payments? If so, describe:
TOTAL		

Section 4: Contingent Liabilities	In Dollars (Omit Cents)	Section 5: (Continued)
Do you have any contingent liabilities?		Are you a defendant in any suits or legal actions?
If so, describe:		
As endorser, co-maker or guarantor?		Income tax settles through (date):
If so, describe:		
Are any assets pledged other than as described on schedules? If so, describe:		Have you filed for bankruptcy in the last ten years?

Schedule A: Cash on hand and in banks			Schedule B: US Gov't & Marketable Securities		
Bank Name	Type	Balance	Name of Security	Shares	Market Value
Total			Total		

Schedule C: Non-Marketable Securities (Privately Held)			Schedule D: Retirement Accounts		
Company Name	\$ Invested	Market Value	Name of Security	Type	Market Value
Total			Total		

Schedule E: Accounts, Loans & Notes Receivable						
Name of Security	Original Date	Purpose	Maturity Date	Monthly Payment	Original Amount	Current Balance
Total						

Schedule F: Life Insurance Carried					
Name of Insurance Co.	Owner of Policy	Beneficiary	Face Amount	Policy Loans	Cash Surrender Value
Total					

Schedule G: Real Estate Owned						
Title in the Name of	Address & Type of Property	Date Acquired	Cost	Market Value	Mortgage Maturity	Mortgage Amount
Total						

Schedule H: Banks or Finance Companies Where Credit Has Been Obtained						
Credit in the Name of	Lender	Collateral	Original Date	High Credit	Current Balance	Monthly Payment
Total						

The information contained in this statement is provided for the purpose of obtaining, or 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 in deciding to grant or continue credit. Each undersigned represents and warrants that the information provided is true and complete. You are authorized to make all inquiries you deem necessary to verify the accuracy of the statements made herein, and to determine my/our credit worthiness. You are authorized to answer questions about your credit experience with me/us.

Signature _____ Date _____ SS No. _____ Date of Birth _____

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