



Personal Financial Statement

**CONTACT YOUR REPRESENTATIVE AT THE BANK IF YOU HAVE ANY QUESTIONS
REGARDING THE COMPLETION OF THIS FORM**

250 Prairie Center Drive | Eden Prairie, MN 55344
construction@star.bank | p 952.358.2265 | f 952.358.7827

YOU MAY APPLY FOR A CREDIT EXTENSION OR FINANCIAL ACCOMMODATION INDIVIDUALLY OR JOINTLY WITH A CO-APPLICANT. THIS STATEMENT AND ANY APPLICABLE SUPPORTING SCHEDULES MAY BE COMPLETED JOINTLY BY BOTH MARRIED AND UNMARRIED CO-APPLICANTS IF THEIR ASSETS AND LIABILITIES ARE SUFFICIENTLY JOINED SO THAT THE STATEMENT CAN BE MEANINGFULLY AND FAIRLY PRESENTED ON A COMBINED BASIS; OTHERWISE SEPARATE STATEMENTS AND SCHEDULES ARE REQUIRED.

APPLICANT

FULL NAME _____ SOCIAL SECURITY NUMBER _____

ADDRESS _____

PHONE NUMBER _____ DATE OF BIRTH _____

PRESENT EMPLOYER _____ POSITION _____

EMPLOYER ADDRESS _____

CO-APPLICANT

FULL NAME _____ SOCIAL SECURITY NUMBER _____

ADDRESS _____

PHONE NUMBER _____ DATE OF BIRTH _____

PRESENT EMPLOYER _____ POSITION _____

EMPLOYER ADDRESS _____

DATE OF VALUATION _____

- Round ALL AMOUNTS to the nearest \$100
- Attach a separate sheet if you need more space to complete detail schedule

ASSETS	AMOUNT	LIABILITIES	AMOUNT
Cash in this Bank		Notes Payable Banks	
Cash in Other Banks (Detail)		Notes Payable Others	
		Installment Contracts Payable	
		Due Dept. Stores, Credit Cards & Others	
Due from Friends, Relatives & Others (Sched 1)		Income Taxes Payable	
Mortgage & Contracts for Deed Owned (Sched. 2)		Other Taxes Payable	
Securities Owned (Schedule 3)			
Cash Surrender Value of Life Insur. (Sched. 4)		Loans on Life Insurance (Schedule 4)	
Homestead (Schedule 5)			
Other Real Estate Owned (Schedule 5)		Mortgage on Homestead (Schedule 6)	
Automobiles		Mortgage or Liens on Other Real Estate Owned (Schedule 6)	
Personal Property		Other Liabilities (Detail)	
Other Assets (Detail)			
		TOTAL LIABILITIES	
		Net Worth (Total Assets Less Total Liabilities)	
TOTAL		TOTAL	

ANNUAL INCOME	APPLICANT	CO-APPLICANT	CONTINGENT LIABILITIES	
Salary			As Endorser	
Commissions			As Guarantor	
Dividends			Lawsuits	
Interest			For Taxes	
Rentals			Others (Detail)	
Alimony, child support or maintenance (you need not show this unless you wish us to consider it).				
Other			Check here if "None"	
TOTAL INCOME			TOTAL CONTINGENT LIABILITIES	

SCHEDULE 1 DUE FROM FRIENDS, RELATIVES & OTHERS

Name of Debtor	Owed to	Collateral	How' Payable	Maturity Date	Unpaid Balance
			\$ per		
			\$ per		
TOTAL					

SCHEDULE 2 MORTGAGE AND CONTRACTS FOR DEED OWNED

Name of Debtor	Type of Property	1st or 2nd Lien	Owed To	How Payable	Unpaid Balance
				\$ per	
				\$ per	
				\$ per	
				\$ per	
TOTAL					

SCHEDULE 3 SECURITIES OWNED

No. Shares or Bond Amount	Description	In Whose Name(s) Registered	Cost	Present Market Value	L – listed U – unlisted
TOTAL					

SCHEDULE 4 LIFE INSURANCE

Insured	Insurance Company	Beneficiary	Face Value of Policy	Cash Value	Loans
TOTAL					

SCHEUDLE 5 REAL ESTATE

Address and Type of Property	Title in Name(s) of	Monthly Income	Cost Year Acquired	Present Market Value	Amount Insurance
Homestead			\$ Year		
			\$ Year		
			\$ Year		
			\$ Year		
			\$ Year		
			\$ Year		
			\$ Year		

SCHEDULE 6 MORTGAGES OR LIENS ON REAL ESTATE

To Whom Payable	How Payable		Interest Rate	Maturity Date	Unpaid Balance
Homestead	\$	per			
	\$	per			
	\$	per			
	\$	per			

	APPLICANT		CO APPLICANT	
Have you ever gone through bankruptcy or had a judgment against you?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are any assets pledged or debts secured except as shown?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have you made a will?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Number of Dependents? (If none, check none)	<input type="checkbox"/> Dependents	<input type="checkbox"/> None	<input type="checkbox"/> Dependents	<input type="checkbox"/> None
Marital Status (answer only if this financial statement is provided in connection with a request for secured credit or the applicant is seeking a joint account with a spouse.	<input type="checkbox"/> Married		<input type="checkbox"/> Married	
	<input type="checkbox"/> Separated		<input type="checkbox"/> Separated	
	<input type="checkbox"/> Unmarried		<input type="checkbox"/> Unmarried	

(Unmarried includes single, divorced, or widowed).

The foregoing statement, submitted for the purpose of obtaining credit is true and correct in every detail and fairly shows my/our financial condition at the time indicated. I/we will give you prompt notice of any subsequent substantial change in such financial condition occurring before the discharge of my/our obligations to you. I/we understand that you will retain this personal financial statement whether or not you approve the credit in connection with which it is submitted. You are authorized to check my/our credit and employment history or any other information contained herein.

THE UNDERSIGNED CERTIFIES THAT THE INFORMATION CONTAINED ON THIS FORM HAS BEEN CAREFULLY REVIEWED AND THAT IT IS TRUE AND CORRECT IN ALL RESPECTS.

Applicant Signature

Co-Applicant Signature

Applicant Printed Name

Co-Applicant Printed Name

Date

Date