

TRAILWEST BANK



Personal Financial Statement

Do not email sensitive personal or financial information unless it is encrypted on a secure website.

Regular emails are not encrypted.



I may apply for a credit extension, loan or other financial accommodation alone or together with someone else ("co-applicant"). If I apply with a co-applicant and our combined assets and debts can meaningfully and fairly be presented together, the co-applicant and I may complete this statement and any supporting schedules jointly, otherwise separate forms and schedules are required.

Joint Credit Requested: We intend to apply for joint credit. (Initials) ____ ____

Applicant		Co-Applicant	
Full Name:		Full Name:	
Street Address:		Street Address:	
City/State/Zip:		City/State/Zip:	
County:		County:	
Since: <input type="checkbox"/> Own	<input type="checkbox"/> Rent \$ _____ per month	Since: <input type="checkbox"/> Own	<input type="checkbox"/> Rent \$ _____ per month
Driver's License #: _____ Exp. Date: _____		Driver's License #: _____ Exp. Date: _____	
Social Security#:	Birth Date:	Social Security#:	Birth Date:
Home Phone:	Cell:	Home Phone:	Cell:
Work/Business Phone:		Work/Business Phone:	
Employer:		Employer:	
Address:		Address:	
Position/title:	Since:	Position/title:	Since:
# of dependents (including self):		# of dependents (including self):	
Marital Status* <input type="checkbox"/> Unmarried <input type="checkbox"/> Married <input type="checkbox"/> Separated		Marital Status* <input type="checkbox"/> Unmarried <input type="checkbox"/> Married <input type="checkbox"/> Separated	

* Do not provide marital status if your application is for individual credit

Please complete schedules 1 thru 6 on the following pages before the section below.

ASSETS (round to nearest \$100 and use "0" in lieu of blank cells) (Refer to schedules 1 thru 5 on following page for detail)		LIABILITIES (round to nearest \$100 and use "0" in lieu of blank cells) (Refer to schedules 4 thru 6)	
Cash, Savings, CDs, Money Mkt. (schedule 1)		Notes payable --banks (schedule 6)	
Marketable Securities/Stocks/Bonds (schedule 2)		Notes payable --others (schedule 6)	
Retirement, IRA, profit share (schedule 3)		Installment loans/contracts (schedule 6)	
Cash value life ins. (whole life only) (schedule 4)		Loans against life insurance (schedule 4)	
Primary Residence (homestead) (schedule 5)		Primary residence mortgage (homestead)(schedule 5)	
Other personally held real estate (schedule 5)		Other personal mortgages (schedule 5)	
Com'l Real Estate owned (schedule 5)		Com'l mortgage debt (schedule 5)	
Value of my companies excluding Real Estate		Taxes due	
		Total credit card debt (schedule 6)	
		Other loans (schedule 6)	
Deferred income/receivables (describe)			
Autos, Other Personal Property (describe)			
		Total Liabilities:	\$
Total Assets:	\$	Net Worth (total assets less total liabilities):	\$

(Use attachments if more space is needed)

Round all amounts to the nearest \$100. Please contact your banker if you need assistance completing the schedules.

Schedule 1 Cash, Savings, Certificates of Deposit, and Money Market Accounts

Name of Bank or Financial Institution	Type of Account	Acct. Balance
(use attachments if necessary)		Total \$

Schedule 2 Stocks, Bonds, or Other Securities Owned

# of shares or bonds	Type of account	Name on account		Current market value
			<input type="checkbox"/> Listed <input type="checkbox"/> Unlisted	
			<input type="checkbox"/> Listed <input type="checkbox"/> Unlisted	
			<input type="checkbox"/> Listed <input type="checkbox"/> Unlisted	
			<input type="checkbox"/> Listed <input type="checkbox"/> Unlisted	
			<input type="checkbox"/> Listed <input type="checkbox"/> Unlisted	
			<input type="checkbox"/> Listed <input type="checkbox"/> Unlisted	
			<input type="checkbox"/> Listed <input type="checkbox"/> Unlisted	
			<input type="checkbox"/> Listed <input type="checkbox"/> Unlisted	
(use attachments if necessary)				Total \$

Schedule 3 Retirement, 401K, Profit Sharing, Pension, IRA Accounts

Name of Institution	Account Type	Amount Vested %	Account Balance	Loans
(use attachments if necessary)				Totals \$

Schedule 4 Cash Value of Life Insurance (whole life only)

Insurance Company	Name Insured	Beneficiary	Face Value	Cash Value	Loans
(use attachments if necessary)					Totals \$

Schedule 5 Real Estate / Mortgages / Contract for deeds / Contracts Owned

Personal residence (homestead) Property Address	Lender/Creditor	Purchase		Market Value	Mortgage Balance	Monthly Payment	Monthly Rental Income	Maturity Date
		Year	Price					
Totals \$								

Other Real Estate (rental homes, cabin, vacation homes, etc.) Property Address	Lender/Creditor	Purchase		Market Value	Mortgage Balance	Monthly Payment	Monthly Rental Income	Maturity Date
		Year	Price					
Totals \$								

(use attachments if more space is needed)

Commercial Real Estate, Investment Real Estate, Etc. Property Address	Lender/Creditor	Purchase		Market Value	Mortgage Balance	Monthly Payment	Monthly Rental Income	Maturity Date
		Year	Price					
Totals \$								

(Indicate if property is sold on contract for deed by marking "C4D" next to the property address)

Schedule 6 Notes payable to Banks/others, Installment loans, Auto loans, Credit Cards, Lines of credit, Bills due

Name of Creditor/Lender/Party Owed	Collateral (if any)	Monthly payments	Balance Due	Explanation
Total \$				

Annual Income	Applicant	Co-Applicant
Salary		
Bonuses/Commissions		
Dividends/Interest		
Rental/Real Estate Income		
Income from child support need not be entered unless you want to consider it		
Other (list)		
Total:		

Contingent Liabilities	Applicant	Co-Applicant
As Endorser		
As Guarantor		
Lawsuits		
Taxes		
Other (list)		
Total:		

	Applicant		Co-Applicant	
Have you ever gone through bankruptcy?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have you ever had a judgment against you?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Do you have any suits or legal action against you?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are any of your tax obligations past due?	<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
Are you a co-maker, endorser or guarantor of any other person's debt?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Explanation (if necessary):				

Equal Credit Opportunity Notice

CREDIT DENIAL NOTICE. If your gross revenues were \$1,000,000 or less in your previous fiscal year, or you are requesting trade credit, a factoring agreement, or similar types of business credit in this Commercial Loan Application, and if your application for business credit is denied, you have the right to a written statement of the specific reasons for the denial. To obtain the statement please contact (Name, address, and telephone number of a person or office from which the statement of reasons can be obtained):

Credit Department
 11300 US HWY 93 South, Suite D
 Lolo, MT 59847
 Phone: (406) 273-2400

within 60 days from the date you are notified of our decision. We will send you a written statement of reasons for the denial within 30 days of receiving your request for the statement. The notice that follows describes additional protections extended to you.

NOTICE: The federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, national origin, sex, marital status, age (providing the applicant has the capacity to enter into a binding contract), because all or a part of the applicant's income derives from any public assistance program, or because the applicant has in good faith exercised any right under the Consumer Credit Protection Act. The federal agency that administers compliance with this law concerning this creditor is:

FDIC Consumer Response Center
 1100 Walnut St. Box #11
 Kansas City, Missouri 64106
 Toll-free: (877) 275-3342
 Fax: (703) 812-1020
 TTY: (800) 925-4818

 Date

 Applicant Signature

 Date

 Co-Applicant Signature

This statement is given to you for the purpose of obtaining credit. It is true and correct in every detail and fairly shows my/our financial condition at this time. I/we will give you prompt written notice of any substantial change in such financial condition occurring before full payment of my/our obligations to you. I/we understand that you will keep this personal financial statement whether or not you approve the credit for which it is submitted. You are authorized to check my/our credit and employment history or any other information provided. I/we are aware that in the event the "Co-Applicant" line is signed that we intend to apply for joint credit.

For Creditor's Use Only					
Date Application Received:	Received By:	Decision: Approved Denied Withdrawn Approved but not accepted	Decision By:	Date of Notification:	Notification Given: Face-to-Face Mail or Fax Telephone
HMDA Reportable: Yes No	Census Tract:	Account No.	<i>Instruction: If this application for credit is HMDA reportable and one or more applicants are a natural person, have the separate HMDA Demographic Information form completed. Even if HMDA-reportable, do not complete the HMDA Demographic Information form for any guarantor.</i>		
The HMDA Demographic Information was provided through:	Mail or Fax	Telephone Interview	Email or Internet	Face-To-Face Interview (Includes Electronic Media with Video Component)	

Officer Signature: _____