



756 Orchard Street
Raynham, MA 02767
(508) 851 - 3600
bluestone.bank

PERSONAL FINANCIAL STATEMENT

SUBMITTED TO THE BANK AS OF _____
DATE

SECTION 1 – INDIVIDUAL INFORMATION		SECTION 2 – OTHER PARTY INFORMATION	
NAME		NAME	
ADDRESS		ADDRESS	
CITY, STATE, ZIP		CITY, STATE, ZIP	
BUSINESS NAME		BUSINESS NAME	
BUSINESS ADDRESS		BUSINESS ADDRESS	
CITY, STATE ZIP		CITY, STATE, ZIP	
HOME PHONE	BUS. PHONE	HOME PHONE	BUS. PHONE
DATE OF BIRTH	SSN	DATE OF BIRTH	SSN
ACCOUNTANT NAME	PHONE	ACCOUNTANT NAME	PHONE
ATTORNEY NAME	PHONE	ATTORNEY NAME	PHONE
INSURANCE COMPANY	PHONE	INSURANCE COMPANY	PHONE

SECTION 3 – STATEMENT OF FINANCIAL CONDITION			
ASSETS	DOLLARS	LIABILITIES	DOLLARS
CASH IN THIS BANK	\$	NOTES PAYABLE TO THIS BANK	\$
CASH IN OTHER INSTITUTIONS	\$	NOTES PAYABLE TO OTHER INSTITUTIONS	\$
MARKETABLE SECURITIES (SCHEDULE A)	\$	DUE TO BROKERS / MARGIN ACCOUNTS	\$
NON-MARKETABLE SECURITIES (SCHEDULE B)	\$	AMOUNTS PAYABLE TO OTHERS SECURED	\$
ACCOUNTS & NOTES RECEIVABLE (SCHEDULE C)	\$	AMOUNTS PAYABLE TO OTHERS UNSECURED	\$
RESIDENTIAL REAL ESTATE OWNED (SCHEDULE D)	\$	ACCOUNTS PAYABLE (INCLUDING CREDIT CARDS)	\$
INVESTMENT REAL ESTATE OWNED (SCHEDULE D)	\$	REAL ESTATE MORTGAGES PAYABLE (SCHEDULE D)	\$
BUSINESS INTERESTS, PARTNERSHIPS (SCHEDULE E)	\$	NOTES DUE OTHER BUSINESS VENTURES (SCHEDULE E)	\$
CASH VALUE LIFE INSURANCE IN (SCHEDULE F)	\$	LIFE INSURANCE LOANS (SCHEDULE F)	\$
VESTED RETIREMENT, IRA, KEOUGH & OTHER	\$	TAXES PAYABLE	\$
PERSONAL PROPERTY (INCLUDING AUTOMOBILES)	\$		
OTHER ASSETS (LIST):		OTHER LIABILITIES (LIST):	
	\$		\$
	\$		\$
	\$	TOTAL LIABILITIES	\$
	\$	NET WORTH	\$
	\$		
TOTAL ASSETS	\$	TOTAL LIABILITIES AND NET WORTH	\$

SECTION 4 – ANNUAL INCOME					
YEAR ENDING	ANNUAL EXPENDITURES	CONTINGENT LIABILITIES	AMOUNTS		
SALARY, BONUS, & COMMISSION	\$	DO YOU HAVE ANY	Yes	No	\$
DIVIDENDS & INTEREST	\$	CONTINGENT LIABILITIES (AS ENDORSER, CO-MAKER, OR GUARANTOR?)	<input type="checkbox"/>	<input type="checkbox"/>	\$
REAL ESTATE INCOME	\$	INVOLVEMENT IN PENDING LEGAL ACTIONS?	<input type="checkbox"/>	<input type="checkbox"/>	\$
OTHER INCOME	\$	OTHER SPECIAL DEBT OR CIRCUMSTANCES?	<input type="checkbox"/>	<input type="checkbox"/>	\$
(ALIMONY, CHILD SUPPORT, OR SEPARATE MAINTENANCE INCOME NEED NOT BE REVEALED IF YOU DO NOT WISH TO HAVE IT CONSIDERED AS A BASIS FOR REPAYING THIS OBLIGATION)	\$	CONTESTED INCOME TAX LIENS?	<input type="checkbox"/>	<input type="checkbox"/>	\$
	\$	OBLIGATIONS PAST DUE?	<input type="checkbox"/>	<input type="checkbox"/>	\$
	\$	HAVE (EITHER OF) YOU OR ANY FIRM IN WHICH YOU WERE A MAJOR OWNER EVER DECLARED BANKRUPTCY?	<input type="checkbox"/>	<input type="checkbox"/>	\$
	\$	INCOME TAX RETURNS FILED THROUGH (D/M/YYYY)			\$
TOTAL INCOME	\$	TOTAL CONTINGENT LIABILITIES			\$

SCHEDULE A – MARKETABLE SECURITIES				
FINANCIAL INSTITUTION	ACCOUNT TYPE	OWNER	IF PLEDGED, TO WHOM?	MARKET VALUE

SCHEDULE B – NON-MARKETABLE SECURITIES				
NUMBER OF SHARES OR VALUE OF BONDS	DESCRIPTION	IN NAME(S) OF	ARE THESE REGISTERED, PLEDGED, OR HELD BY OTHERS?	MARKET VALUE

SCHEDULE C – ACCOUNTS AND NOTES RECEIVABLE				
DUE FROM	AMOUNT	MATURITY DATE	TERMS	COLLATERAL

SCHEDULE D – PERSONAL RESIDENCE & REAL ESTATE INVESTMENTS (ATTACH ADDITIONAL SCHEDULE IF NECESSARY)									
ADDRESS / PROPERTY TYPE	LEGAL OWNER	PURCHASE YEAR / PRICE	MARKET VALUE	LOAN BALANCE	INT RATE	MATURITY DATE	MONTHLY PAYMENT	% OWNED	LENDER

SCHEDULE E – BUSINESS INTERESTS / PARTNERSHIPS							
LIST NAME & ADDRESS OF VENTURES YOU ARE A PRINCIPAL OR PARTNER	POSITION / TITLE IN BUSINESS	LINE OF BUSINESS	YEARS IN BUSINESS	CURRENT MARKET VALUE	YOUR % OF OWNERSHIP	BAL. DUE ON PARTNERSHIP NOTES	FINAL CONTRIBUTION DATE

SCHEDULE F – LIFE INSURANCE						
NAME OF COMPANY	OWNER OF POLICY	BENEFICIARY & RELATIONSHIP	TYPE OF POLICY	FACE AMOUNT	POLICY LOANS	CASH SURRENDER VALUE

REPRESENTATIONS AND WARRANTIES

THE INFORMATION CONTAINED IN THIS STATEMENT IS PROVIDED TO INDUCE YOU TO EXTEND OR CONTINUE THE EXTENSION OF CREDIT TO THE UNDERSIGNED OR TO OTHERS UPON THE GUARANTEE OF THE UNDERSIGNED. THE UNDERSIGNED ACKNOWLEDGE AND UNDERSTAND THAT YOU ARE RELYING ON THE INFORMATION PROVIDED HEREIN IN DECIDING TO GRANT OR CONTINUE CREDIT OR TO ACCEPT A GUARANTEE THEREOF. EACH OF THE UNDERSIGNED REPRESENTS, WARRANTS, AND CERTIFIES THAT THE INFORMATION PROVIDED HEREIN IS TRUE, CORRECT, AND COMPLETE. EACH OF THE UNDERSIGNED AGREES TO NOTIFY YOU IMMEDIATELY AND IN WRITING OF ANY CHANGE IN NAME, ADDRESS, OR EMPLOYMENT AND OF ANY MATERIAL ADVERSE CHANGE (1) IN ANY OF THE INFORMATION CONTAINED IN THIS STATEMENT OR (2) IN THE FINANCIAL CONDITION OF ANY OF THE UNDERSIGNED OR (3) IN THE ABILITY OF ANY OF THE UNDERSIGNED TO PERFORM ITS (OR THEIR) OBLIGATIONS TO YOU. IN THE ABSENCE OF SUCH NOTICE OR A NEW AND FULL WRITTEN STATEMENT, THIS SHOULD BE CONSIDERED AS A CONTINUING STATEMENT AND SUBSTANTIALLY CORRECT. IF THE UNDERSIGNED FAIL TO NOTIFY YOU AS REQUIRED ABOVE, OR IF ANY OF THE INFORMATION HEREIN SHOULD PROVE TO BE INACCURATE OR INCOMPLETE IN ANY MATERIAL RESPECT, YOU MAY DECLARE THE INDEBTEDNESS OF THE UNDERSIGNED OR THE INDEBTEDNESS GUARANTEED BY THE UNDERSIGNED, AS THE CASE MAY BE, IMMEDIATELY DUE AND PAYABLE. YOU ARE AUTHORIZED TO MAKE ALL INQUIRIES YOU DEEM NECESSARY TO VERIFY THE ACCURACY OF THE INFORMATION CONTAINED HEREIN AND TO OBTAIN A CREDIT BUREAU REPORT ON ME NOW AND AT ANY TIME DURING THE TERM OF MY LOAN(S) WITH THE BANK AND/OR LOAN(S) WITH THE BANK IN WHICH I AM A GUARANTOR **AND PERSONALLY LIABLE** WITH THE BANK TO DETERMINE THE CREDIT-WORTHINESS OF THE UNDERSIGNED. THE UNDERSIGNED AUTHORIZE ANY PERSON OR CONSUMER REPORTING AGENCY TO GIVE YOU ANY INFORMATION IT MAY HAVE ON THE UNDERSIGNED. EACH OF THE UNDERSIGNED AUTHORIZES YOU TO ANSWER QUESTIONS ABOUT YOUR CREDIT EXPERIENCE WITH THE UNDERSIGNED. AS LONG AS ANY OBLIGATION OR GUARANTEE OF THE UNDERSIGNED TO YOU IS OUTSTANDING, THE UNDERSIGNED SHALL SUPPLY ANNUALLY AN UPDATED FINANCIAL STATEMENT. THIS PERSONAL FINANCIAL STATEMENT AND ANY OTHER FINANCIAL OR OTHER INFORMATION THAT THE UNDERSIGNED GIVE YOU SHALL BE YOUR PROPERTY.

I / WE FULLY UNDERSTAND THAT IT IS A FEDERAL CRIME PUNISHABLE BY FINE AND OR IMPRISONMENT OR BOTH TO KNOWINGLY MAKE ANY FALSE STATEMENTS, CONCERNING ANY OF THE ABOVE FACTS, PURSUANT TO 18 U.S.C. SECTION 1014.

DATE

YOUR SIGNATURE

DATE

CO-APPLICANT SIGNATURE (IF APPLICABLE)