

TO The Bank of Herrin, 101 South Park Avenue, PO Box B, Herrin, IL 62948

TYPE OF CREDIT - CHECK APPROPRIATE BOX

(Name of Lender)

Individual - If you check this box, provide Financial Information only about yourself.

Joint, with \_\_\_\_\_ Relationship \_\_\_\_\_ If you check this box, provide Financial Information about yourself and the other person.

**PERSONAL FINANCIAL STATEMENT**

NOTE: Any willful misrepresentation could result in a violation of Federal Law (Sec. 18 S.S.C 1014)

Name \_\_\_\_\_ Birthdate \_\_\_\_\_ Statement Date \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State/Zip \_\_\_\_\_ Social Sec. # \_\_\_\_\_

Home Phone \_\_\_\_\_ No. of Dependents \_\_\_\_\_ Business or Occupation \_\_\_\_\_ Business Phone \_\_\_\_\_

**SECTION 2**

**INSTRUCTIONS: Please fill out other side first, then carry totals to this side as labeled.**

ASSETS		Thousands	Hundreds	Cents	LIABILITIES		Thousands	Hundreds	Cents
1. Cash on Hand & in Banks	Sec 1 - A				21. Notes due to Banks	Sec 1 - A			
2. Cash Value of Life Insurance	Sec 1 - B				22. Notes due to Others	Sec 1 - G			
3. US Gov. Securities	Sec 1 - C				23. Accts. & Bills Payable	Sec 1 - G			
4. Other Securities	Sec 1 - C				24. Unpaid Income Taxes Due - Federal				
5. Notes & Accts Receivable - Good	Sec 1 - D				25. Unpaid Income Taxes Due - State				
6. Other Assets - Itemize below					26. Other Unpaid Taxes & Interest				
7.					27. Loans on life insurance policies	Sec 1 - B			
8.					28. Cash rent owed				
9.					29. Other Liabilities Due within 1 year - itemize below				
10. <b>TOTAL CURRENT ASSETS</b>					30.				
11. Real Estate Owned	Sec 1 - E				31.				
12. Notes & Accts Rec. - Doubtful	Sec 1 - D				32.				
13. Other Securities not readily mktbl	Sec 1 - D				33. <b>TOTAL CURRENT LIABILITIES</b>				
14. Personal Property	Sec 1 - F				34. Real Estate Mortgages Payable	Sec 1 - E			
15. Other Assets - Itemize below					35. Liens & Assessments Payable				
16.					36. Other Debts - Itemize				
17.					37.				
18.					38. Total Liabilities				
19.					39. Net worth (Total Assets less Total Liabilities)				
20. <b>TOTAL ASSETS</b>					40. <b>TOTAL LIABILITIES + NET WORTH</b>				

ANNUAL INCOME		ESTIMATE OF ANNUAL EXPENSES	
Salary, Bonuses & Commissions	\$	Income Taxes	\$
Dividends & Interest	\$	Other Taxes	\$
Rental & Lease Income (Net)	\$	Insurance Premiums	\$
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.		Mortgage Payments	\$
Other income - itemize	\$	Rent Payable	\$
Provide the following information only if Joint Credit is requested above:		Other Expenses	\$
Other person's salary, bonuses & commission income	\$		\$
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.			\$
Other Income of Other Person - itemize	\$		\$
TOTAL	\$	TOTAL	\$

GENERAL INFORMATION			CONTINGENT LIABILITIES	
Are any of the assets you listed above pledged?	<input type="checkbox"/> No	<input type="checkbox"/> Yes	As Endorser, Co-maker or Guarantor	\$
Are you a defendant in any Suits or Legal Actions?	<input type="checkbox"/> No	<input type="checkbox"/> Yes	On Leases or Contracts	\$
(Explain)			Legal Claims	\$
Have you been declared bankrupt in the last 10 years?	<input type="checkbox"/> No	<input type="checkbox"/> Yes	Federal & State Income Taxes	\$
Explain			Other	\$

**CREDIT DISCLOSURES:** An insurance product may be offered to you. If you purchase an insurance product: (1) The insurance product is not a deposit or other obligation or, or guaranteed by, this institution or our affiliate(s); and (2) With exception of Federal Flood Insurance or Federal Crop Insurance, the insurance product is not insured by the Federal Deposit Insurance Corporation or any other agency of the United States, this institution, or our affiliate(s). If an insurance product is offered we cannot condition an extension of credit on either of the following: (1) Your purchase of an insurance product from us or any of our affiliates; or (2) Your agreement not to obtain or a prohibition on you from obtaining, an insurance product from an unaffiliated entity.

**SIGNATURES -** I certify that everything I have stated in this application and on any attachments is correct. Lender may keep this application whether or not it is approved. By signing below I authorize Lender to check my credit and employment history and to answer questions others may ask Lender about my credit record with Lender. I understand that I must update credit information at Lender's request if my financial condition changes.

Applicant's Signature

Date

Other Signature (Where Applicable)

Date

**The Bank of Herrin**  
 101 South Park Avenue, PO Box B, Herrin, IL 62948

**Note: Be sure to answer all questions on this page before completing summary on back. If you need more room, please attach a separate sheet of paper. Thank you.**

**PERSONAL FINANCIAL STATEMENT**

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**SECTION 1 INSTRUCTIONS: Please fill out this side first, then carry totals to other side as labeled.**

**A) CASH IN BANKS AND NOTES DUE TO BANKS (List all Real Estate Loans in Section 1-E)**

Bank Name	Account Type	Ownership Type	Amt. on Deposit	Amt Owed	Collateral (if any)
			\$	\$	
<b>Totals</b>			\$	\$	

Section 2 line 1                      Section 2 Line 21

**B) LIFE INSURANCE (List only policies that you own)**

Company	Face Amount	Cash Value	Outstanding Loan from Insurance Company	Other Loans using Policy as Collateral	Beneficiary of Policy
		\$	\$	\$	
<b>Totals</b>		\$	\$		

Section 2 Line 2                      Section 2 Line 27

**C) SECURITIES OWNED (Including US Government Bonds and other Stocks & Bonds)**

Face Value of Bonds # of Shares of Stock	Description	Type of Ownership	Cost	Mkt Value US Gov't Securities	Mkt Value Marketable Securities	Mkt Value not readily marketable Securities	Amount pledged as Collateral on Loans
				\$	\$	\$	
<b>Totals</b>				\$	\$	\$	

Sec 2 Line 3                      Sec 2 Line 4                      Sec 2 Line 14

**D) NOTES & ACCOUNTS RECEIVABLE (Money owed to you by others.) Please circle amount if others have an interest in ownership**

Maker/Debtor	Due Date	Original Amount	Balance Due (Good Accounts)	Balance Due (Questionable)	Balance Due (Relatives/Friends)	Security (if any)
			\$	\$	\$	
<b>Totals</b>			\$	\$	\$	

Sec 2 Line 5                      Sec 2 Line 12                      Sec 2 Line 13

**E) REAL ESTATE YOU OWN (Circle if others have an ownership interest)**

Name on Deed	Description & Location	Date Acquired	Original Cost	Present Value	Amount of Insurance	Balance Owed on Property	Payment Amount	Maturity Date	Lien Holder
			\$	\$	\$	\$	\$		
<b>Total</b>			\$		<b>Total</b>	\$			

Sec 2 Line 11                      Sec 2 Line 34

**F) PERSONAL PROPERTY Automobiles, Boats, Antiques, etc. (Circle if others have an ownership interest)**

Description	Date when new	Original Cost	Current Value	Bal. Due	To Whom Payable
		\$	\$	\$	
<b>Total</b>			\$		

Sec 2 Line 14

**G) NOTES (Money other than Bank, Mortgage & Insurance Company Loans which you owe to others)**

Payable to	Cosigners	Due Date	Amount Owed	Accts & Bills Payable	Collateral
			\$	\$	
			\$	\$	

Sec 2 Line 22                      Sec 2 Line 23