



Personal/Joint Financial Statement

New Mexico Community Development Loan Fund
 423 Iron Ave SW · PO Box 705 · Albuquerque · NM · 87103
 Phone (505) 243-3196 www.loanfund.org
 Toll free (866) 873-6746 Fax (505) 243-8803

Applicant Name: _____ **Social Security #:** _____

Spouse Name: _____ **Social Security #:** _____

Purpose: This form helps to demonstrate your personal financial situation. Because you will be asked to personally guarantee the loan, The Loan Fund will review your assets, liabilities, and ability to handle additional debt.

Instructions: 1) Do not include any business assets or debts on this form. Business information should be included on the Business Information Form & Debt Schedule and in financials provided separately as a part of the application package. 2) Be sure to include complete detailed information on all open accounts as this statement will be cross-referenced with your credit report. Incomplete information typically holds up the loan application review process. 3) If you have questions about how to fill out this form, please contact us.

ASSETS	LIABILITIES
Checking accounts/Cash on hand _____	Notes Payable (see section 2) _____
Savings accounts & CDs _____	Auto Loans/Leases (see section 2) _____
Vehicles (estimate current market value)	Credit Cards (see section 2) _____
Yr/Make _____	Student Loans (see section 2) _____
Yr/Make _____	Other Installment Loans (see section 2) _____
Yr/Make _____	Mortgages on Real Estate (see section 3) _____
Tax Refund _____	Loans on Life Insurance _____
Real Estate (see section 3) _____	Unpaid Taxes (see section 8) _____
Stocks & Bonds (see section 4) _____	Accounts Payable _____
Other Assets & Personal Property (see section 5) _____	Other Liabilities (see section 9) _____
Accounts/Notes Receivable (see section 6) _____	Total Liabilities = _____
IRAs/Retirement accounts (see section 6) _____	NET WORTH
Life Insurance- Cash Value only (see section 7) _____	Total Assets – Total Liabilities = _____
Total Assets = _____	

SECTION 1: Income and Liabilities

<u>Sources of Income</u>			<u>Contingent Liabilities</u>	
	Self	Spouse		
Annual Salary/Wages	_____	_____	As guarantor or co-maker	_____
Real Estate Income	_____	_____	Legal claims and judgments	_____
Net Investment Income	_____	_____	Income/Self employment tax	_____
Other Income	_____	_____	Other special debt	_____
Total	_____	_____	Total	_____

SECTION 2: Notes Payable, Auto Loans/Leases , Credit Cards, Student Loans & Other Installment Loans

(Use attachments if necessary. Each attachment must be identified as part of this statement and signed.)

Name & Address of Noteholder	Original Balance	Current Balance	Payment Amount	Terms (monthly,etc.)	How Secured or Endorsed and Type of Collateral

SECTION 3: Real Estate Owned (Use attachments if necessary. Each attachment must be identified as part of this statement and signed.)

Address & Type of Property	Title is in Name of:	Date Purchased	Original Cost	Present Value	1 st Mortgage Balance	Amount of Payment	Status of Mortgage

SECTION 4: Stocks & Bonds (Use attachments if necessary. Each attachment must be identified as part of this statement and signed.)

Number of Shares	Name of Securities	Cost	Market Value Quotation/Exchange	Date of Quotation/Exchange	Total Value

SECTION 5: Other Assets & Personal Property (List and describe items.)

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SECTION 6: IRAs, Retirement Accounts & Notes Receivable (Describe in detail.)

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SECTION 7: Life Insurance Held (Give face amount of policies - name of company and beneficiaries)

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SECTION 8: Unpaid Taxes (Describe in detail, as to type, to whom payable, when due, amount, and what, if any property the tax lien attaches.)

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SECTION 9: Other Liabilities (Describe in detail.)

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The undersigned certifies that the above facts are true and accurate statements of FINANCIAL CONDITION AS OF _____ (date) and further agrees to advise The Loan Fund immediately if there are material changes in my/our financial condition. I/We further authorize The Loan Fund to make any verification of the above information it deems necessary in order to obtain this loan.

Applicant Signature

Date



Business Information Form & Debt Schedule

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General Information

Business Name: _____ Mo/Yr business started: _____ **OR** Startup

Business Address: _____

Business located on an Indian reservation or pueblo? No Yes Experience in industry? ____ Yrs ____ Mos

For startup businesses: Do you have a written business plan? No Yes (Required; please attach)

For established businesses: Did the business make a profit last year? No Yes

Accounting records by: Professional/CPA Partner/Employee Spouse Self Not Kept

Are all taxes (gross receipts, self employment, employee, income, etc) current? No Yes (If no, please explain)

Business Depository Accounts

Bank Name	Account number	Average Balance
_____	_____	\$ _____
_____	_____	\$ _____

Business Loan Accounts

As of _____ (date)

(Please supply the following information for all term loans, credit lines, mortgages, credit cards, equipment leases, etc.)

Name of Creditor	Line or Loan?	Secured or Unsecured?	Total Outstanding Balance Of Loan or Line of Credit	Monthly Payment	Date Opened	Current or Delinquent?
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
TOTAL =			_____	_____	_____	_____

Business Trade/Supplier References

Business Name	Contact Person	Telephone number
_____	_____	_____
_____	_____	_____