PERSONAL FINANCIAL STATEMENT



Submitted to Merrimack County Savings Bank as of_____ (date)

89 North Main Street • PO Box 2826 Concord, NH 03302-2826 Ph. 603.225.2793 • 800.541.0006 www.themerrimack.com

PERSONAL INFORMATION								
APPLICANT (NAME)				CO-APPLICANT (NAME)				
Home Address				Home Address				
Home Phone	Social Security Number Da		Date of Birth	Home Phone	Social Security Number		Date of Birth	
Employer				Employer				
Address of Employer				Address of Employer				
Business Phone	# of Years with Employer		Title/Position	Business Phone	# of Years with Employer		Title/Position	
Previous Employer & Position (if with pless than 3 years)	present employer # of Years		Years	Previous Employer & Position (if with present employer less than 3 years) # of Years				
Name, Phone Number of Your Accountant				Name, Phone Number of Your Accountant				
Name, Phone Number of Your Attorney				Name, Phone Number Attorney				
Name, Phone Number of Your Investment Advisor/Broker				Name, Phone Number of Your Advisor/Broker				
Name, Phone Number of Your Insurar	nce Advisor			Name, Phone Number of Your Insurar	nce Advisor			

Income and Expenditures for year ended _____ (omit cents)

ANNUAL INCOME	AMOUNT (\$)	ANNUAL EXPENDITURES		AMOUNT (\$)
Salary (applicant)	\$	Federal Income and Other Taxes		\$
Salary (co-applicant)		State Income and Other Taxes		
Bonuses and Commissions (applicant)		Rental Payments, Condo Dues, etc.		
Bonuses and Commissions (co-applicant)		Mortgage Payments	Residence Investment Property	
Rental Income		Property Taxes	Residence Investment Property	
Interest Income		Interest and Principal Payments (all other loans)		
Dividend Income		Insurance		
Income from Partnership, LLC or other entity		Alimony/Child Support		
Capital Gains		Tuition		
Other Income* (attach list if necessary)		Other Expenses (attach list if necessary)		
TOTAL ANNUAL INCOME	\$	TOTAL ANNUAL	EXPENDITURES	\$

Any significant changes expected in the next 12 months? ☐ Yes ☐ No (If yes, attach information)

^{*}Income from alimony, child support, or separate maintenance need not be revealed if applicant or co-applicant does not wish to have it considered as a source of repayment.

CONTINGEN [*]	T LIABILITIES			YES	NO	AMOUN	T(S)
Are you a guarantor,	co-maker, or endorser for any debt of an	individual, corporation, LLC or partnership?					
Do you have any out	standing letters of credit or surety bonds?						
Are there any suits or legal actions pending against you?							
Are you contingently liable on any lease or contract?							
Are any of your tax of	obligations past due?						
What would be your	total estimated tax liability if you were to s	sell major assets?					
If you answered yes	for any of the above, please provide deta	ils, (attach separate sheet if necessary)					
# Shares (Stock)	DESCRIPTION	OWNER(S)	COST	. (CURREN	IT PLEC	GEI
Face Value (Bonds)	DESCRIPTION e Securities (including U. S. Government)	OWNER(S) nent and Municipal securities)	COST	1 7	OURREN MARKE VALUE	т	NO
Face Value (Bonds)		, ,	COST	1 7	MARKE	r	
Face Value (Bonds) Readily Marketabl	e Securities (including U. S. Government of the securities of the securities (including U. S. Government of the securities of the securiti	, ,	COST	1 7	MARKE	r	
Face Value (Bonds) Readily Marketabl more space is needed, tatement and enter totals	e Securities (including U. S. Government) attach a separate schedule or brokerage s only.	nent and Municipal securities)	COST	1 7	MARKE	r	NO
Face Value (Bonds) Readily Marketabl f more space is needed, tatement and enter totals	e Securities (including U. S. Government) attach a separate schedule or brokerage s only.	nent and Municipal securities) TOTAL	COST	1 7	MARKE	YES	NC
Face Value (Bonds) Readily Marketabl f more space is needed, statement and enter totals	e Securities (including U. S. Government) attach a separate schedule or brokerage s only.	nent and Municipal securities) TOTAL	COST	1 7	MARKE	YES	

SCHEDULE B - Insurance, Life Insurance						
Insurance Company	Face of Policy	Type of Policy	Beneficiary	Cash Surrender Value	Amount Borrowed	Owner of Policy
If more space is needed, attac statement and enter totals on		or brokerage	TOTAL			

Personal Residence	Legal Owner	ı	Purchase	Market Value	Present Loan		Interest Rate	Monthly	Lender
Property Address		Year	Price		Balance		Payment		
						%			
						%			
more space is needed, attach a separate statement and enter totals only.	schedule or brokerage		TOTAL						
Investment Property Address	Legal Owner	1	Purchase	Market Value	Present Loan Balance	Interest Rate	Monthly	Lender	
		Year	Price				Payment		
						%			

SCHEDULE D – Business Interests*						
Type of Investment	Date of Initial Investment	Cost	Percent Owned	Current Market Value	Balance Due on Partnership Debt	Lender
If more space is needed, attach a separate schedule statement and enter totals only.	or brokerage	TOTAL				

Lender	Loan Type	Amount of Line	Collateral	Interest Rate	Monthly Payment	Unpaid Balance
				%		
				%		
				%		
				%		
				%		
				%		
				%		
				%		
				%		
				%		
				%		
	1			,	TOTAL	

Balance Sheet as of (date)
-----------------------	-------

ASSETS	AMOUNT (\$)	LIABILITIES	AMOUNT (\$)
Cash on deposit at the Merrimack (including money		Notes Payable (Schedule E)	
market accounts, CDs)		Accounts Payable	
Cash in Other Financial Institutions (List name)		Margin Accounts	
(including money market accounts, CDs)		Notes Due: Partnerships (Schedule D)	
		Income Taxes Payable	
		Real Estate Taxes Payable	
		Mortgage Debt (Schedule C)	
		Life Insurance Loans (Schedule B)	
Readily Marketable Securities (Schedule A)		Other Liabilities (list):	
Non-Readily Marketable Securities (Schedule A)			
Accounts and Notes Receivable			
Net Cash Surrender Value of Life Insurance (Schedule B)			
Residential Real Estate (Schedule C)			
Real Estate Investments (Schedule C)			
Business Interests (Schedule D)			
IRA, Keogh, Profit Sharing, Other Retirement Accounts			
Personal Property (including automobiles)			
Other Assets (list):			
		TOTAL LIABILITIES	
		NET WORTH	
TOTAL ASSETS		TOTAL LIABILITIES AND NET WORTH	

PLEASE ANSWER THE FOLLOWING QUESTIONS: (Check answers below.)
1. Income tax returns filed through (date) Are any returns currently being audited or contested? □ YES □ NO
If yes, what year(s)?
2. Have (either of) you or any firm in which you were a major owner ever declared bankruptcy?
If yes, please provide details:
3. Have you drawn a will? ☐ YES ☐ NO
If yes, please furnish the name of the executor(s) and year will was drawn:
4. Number of dependents (excluding self) and relationship to applicant:
5. Have you ever had a financial plan prepared for you? ☐ YES ☐ NO
6. Did you include three years of Federal Income Tax Returns? ☐ YES ☐ NO
7. Do (either of) you have a line of credit or unused credit facility at any other institution(s)?
If so, please indicate where, how much, and name of financial institution:
REPRESENTATIONS AND WARRANTIES
The information contained in this statement is provided to induce Merrimack County Savings Bank (the Bank) to extend or to continue the extension of credit to the undersigned or to others upon the guarantee of the undersigned. The undersigned acknowledge and understand that the Bank is relying on the information provided herein 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 the Bank 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 the Bank. In absence of such notice or a new full written statement, this should be considered as a continuing statement and substantially correct. If the undersigned fail to notify the Bank as required above, or if any of the information herein should prove to be inaccurate or incomplete in any material respect, the Bank may declare the indebtedness of the undersigned or the indebtedness guaranteed by the undersigned, as the case may be, immediately due and payable. The Bank is authorized to make all inquiries deemed necessary to verify the accuracy of the information contained herein and to determine the credit-worthiness of the undersigned. The undersigned authorize any person or consumer reporting agency to give the Bank any information it may have on the undersigned. Each of the undersigned authorizes the Bank to answer guestions about

updated financial statement annually. This personal financial statement and any other financial or other information that the undersigned gives to the Bank shall be the property of Merrimack County Savings Bank.

Your Signature

Co-Applicant's Signature
(If you are requesting the financial accommodations jointly)

its credit experience with the undersigned. As long as any obligation or guarantee of the undersigned is outstanding, the undersigned shall supply an