

CONFIDENTIAL INFORMATION
PERSONAL FINANCIAL STATEMENT

Important Information About Procedures for Opening a New Account: To help the government fight the funding of terrorism and money laundering activities, federal law requires all financial institutions to obtain, verify, and record information that identifies each person who opens an account. What this means for you: When you open an account, we will ask for your name, address, date of birth, and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents.

Personal Financial Statement as of: _____
 (Date)

Applicant Name(s): _____

Home Address: _____

Home Phone: _____ Cell Phone: _____

Business Phone: _____

E-Mail: _____

IMPORTANT: DIRECTIONS TO APPLICANT

Read directions before completing Financial Statement. You may apply for credit in your name alone, without your spouse or any other person, regardless of your marital status. Check the appropriate box and provide each applicant's initials if applying for joint credit:

- Individual Credit-** If relying on your own income and assets and not the income and assets of a spouse or another person as a basis or extension or repayment or credit, complete the Financial Statement below only as it applies to you, individually. Do not provide any information about a spouse or other person. Sign the Financial Statement.
- Joint Credit-** If applying for joint credit or for individual credit relying on income or assets of a spouse or another person for extension and repayment of credit request, complete the Financial Statement below. Include information about income, assets and liabilities of the spouse or other person. Both Applicant and Spouse or Co-Applicant must initial and sign this statement.

We intend to apply for joint credit (Initials) _____

Please do not leave any questions unanswered. Use "no" or "none" where necessary.

ASSETS		LIABILITIES AND NET WORTH	
Cash on hand and in Banks (Schedule A)	\$	Notes Payable: This Bank (Schedule A)	\$
Government Securities (Schedule B)		Notes Payable: Other Institutions (Schedule A)	
Listed Securities (Schedule B)		Notes Payable – Relatives	
Unlisted Securities (Schedule B)		Notes Payable – Others	
Other Equity Interests (Schedule B)		Accounts and Bills Due	
Accounts and Notes Receivable		Unpaid Taxes	
Real Estate Owned (Schedule C)		Real Estate Mortgages Payable (Schedule C or D)	
Mortgages and Land Contracts Receivable (Schedule D)		Land Contracts Payable (Schedule C or D)	
Cash Value Life Insurance (Schedule E)		Life Insurance Loans (Schedule E)	
Other Assets:		Other Liabilities:	
Retirement Accounts:			
		TOTAL LIABILITIES:	
		NET WORTH:	
TOTAL ASSETS:		TOTAL LIABILITIES AND NET WORTH:	

SOURCES OF INCOME		GENERAL INFORMATION	
Salary	\$	Employer	
Bonus and Commissions		Position or Profession	# Yrs.:
Dividends		Employer's Address	
Real Estate Income		Phone #:	
*Other Income: Itemize		Partner, officer or owner in any other venture? ()Yes ()No	
		If so, explain:	
TOTAL:			
*Alimony, child support or separate maintenance payments need not be disclosed unless relied upon as a basis for extension of credit. If disclosed, payments received under () court order () written agreement () oral understanding.		Are any assets pledged? ()No ()Yes Detail in Schedule A	
		Income taxes settled through (Date):	

CONTINGENT LIABILITIES		GENERAL INFORMATION (Cont'd.)	
As endorser, co-maker or guarantor	\$	Are you a defendant in any suits or legal action: ()No ()Yes	
On leases		If so, explain:	
Legal claims		Have you ever taken bankruptcy? ()No ()Yes	
Provision for federal income taxes		If so, explain:	
Other special debt, e.g., recourse or repurchase liability		Do you have a will? ()No ()Yes With whom?	
		Do you have a trust? ()No ()Yes With whom?	
TOTAL:		Number of dependents:	Ages:

Schedule A: Banks, Brokers, Savings & Loan Associations, Finance Companies or Credit Unions.

List here the names of all the institutions at which you maintain a deposit account and/or where you have obtained loans.

Name of Institution	Name on Account	Balance on Deposit	High Credit	Amount Owning	Monthly Payment	Secured by What Assets
TOTAL:			TOTAL:			

Schedule B: U.S. Government, Stocks (Listed & Unlisted), Bonds (Gov't. & Comm.), and Partnership Interests (General & Ltd.)

Number Of	Indicate	In Name of	*Market Value	Pledged	
Shares, Face Value (Bonds), or % of Ownership	1. Agency or name of company issuing security or name of partnership 2. Type of investment or equity classification 3. Number of shares, bonds or % of ownership held 4. Basis of valuation*			Yes (Y)	No (N)
TOTAL:					

*If unlisted security or partnership interest, provide current financial statements to support basis for valuation.

Schedule C: Real Estate Owned (and related debt, if applicable)

Description of Property or Address	Title in Name Of	Date Acquired	Cost	Present Market Value	Mortgage or Land Contract Payable			
					Balance Owing	Monthly Payment	Maturity	Holder
TOTAL:								

Schedule D: Real Estate Mortgages & Land Contracts Receivable (and related debt, if applicable)

Description of Property or Address	Title in Name Of	Date Acquired	Balance Receivable	Monthly Payment	Mortgage or Land Contract Payable		
					Balance Owing	Monthly Payment	Holder
TOTAL:							

Schedule E: Life Insurance Carried

Name of Company	Face Amount	Cash Surrender Value	Loans	Beneficiary
TOTAL:				

I/we have carefully read and submitted the foregoing information provided on all three pages of this statement to the Bank named above. The information is presented as a true and accurate statement of my/our financial condition on the date indicated. This statement is provided for the purpose of obtaining and maintaining credit with said Bank. I/we agree that if any material change(s) occur(s) in my/our financial condition that I/we will immediately notify said Bank of said change(s) and unless said Bank is so notified it may continue to rely upon this financial statement and the representations made herein as a true and accurate statement of my/our financial condition.

I/we authorize the Bank to make whatever credit inquiries it deems necessary in connection with this financial statement. I/we authorize and instruct any person or consumer reporting agency to furnish to the Bank any information that it may have or obtain in response to such credit inquiries.

I/we also hereby certify that no payment requirements listed herein are delinquent or in default except as follows, if "NONE" so state.

I/we fully understand that it is a federal crime punishable by fine or imprisonment or both to knowingly make any false statements concerning any of the above facts.

Applicant's Signature

Date Signed

Social Security Number

Co-Applicant's Signature

Date Signed

Social Security Number

***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 (provided 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 the Federal Reserve, Consumer Help Center, P.O. Box 1200, Minneapolis, MN 55480.*

Tel. (888) 851-1920. Fax (877) 888-2520, TDD (877)766-8533

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 First Choice Bank, 17785 Center Court Dr. #750, Cerritos, CA 90703, Attention Compliance Department, 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.