



GLACIER BANK

202 Main Street, Kalispell, MT 59901
(406) 756-4200

PERSONAL FINANCIAL STATEMENT

You may apply for an extension of credit individually or jointly with another applicant. This statement and any applicable supporting schedules may be completed jointly by co-applicants if their assets and liabilities can be meaningfully and fairly presented on a combined basis, otherwise separate statements and schedules must be provided.

For obtaining credit from time to time with the bank, the following statement and information are furnished as complete, true, and accurate statement of the financial condition of the undersigned

on: _____, 20____ Please round all amounts to the nearest \$100.

I/We are applying for credit on an individual basis OR a joint basis. (Please check one)

X	X
Applicant's Signature	Co-Applicant's Signature
Date	Date

APPLICANT	CO-APPLICANT
Name	Name
Address	Address
City State Zip Code	City State Zip Code
Date of Birth	Date of Birth
Social Security Number	Social Security Number
Telephone Number Cellular Number	Telephone Number Cellular Number
Employer How Long	Employer How Long
Position/Title	Position/Title
Dependents/Include Self	Dependents/Include Self
Marital Status * Do not provide this information if your application is for individual, unsecured credit Unmarried <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/>	Marital Status *do not provide this information if your application is for individual unsecured credit Unmarried <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/>

ASSETS		LIABILITIES	
Cash (Schedule 1)		Short Term Notes and Loans Due (Schedule 6)	
Securities (Schedule 2)		Credit Accounts and Bills Due (Schedule 7)	
Life Insurance Cash Value (Schedule 3)		Life Insurance Loans (Schedule 3)	
Mortgages and Contracts Held by You (Schedule 4)		Mortgages of Primary Residence (Schedule 5)	
Primary Residence (Schedule 5)		Mortgages on Other Real Estate (Schedule 5)	
Other Real Estate (Schedule 5)		Taxes	
Profit Sharing (Net of Loans)		Other Liabilities (Describe)	
Pension and Retirement Accounts, Include IRA Accounts		Other Liabilities (Describe)	
Automobiles (Describe)			
Personal Property			
Other Assets (Describe)		Total Liabilities \$	
Total Assets \$		(Total Assets Less Total Liabilities) Net Worth \$	

ANNUAL INCOME	APPLICANT	CO-APPLICANT	PLEASE ANSWER EACH QUESTION (YES or NO)	APPLICANT	CO-APPLICANT
Salary			Are you a Co-maker, Endorser, or Guarantor on any other person's debt?		
Bonuses/Commissions					
Dividends/Interest			Are you a defendant in any suit or legal action?		
Net Real Estate Rent					
Income from alimony, child support or maintenance payments need not be entered unless you want it considered as a basis for repayment.			Have you ever gone through bankruptcy or had a judgment against you?		
Other (list)			Have you made a will?		
Total \$					

SCHEDULE 1 / CASH ON HAND AND IN BANKS

Name of Bank or Financial Institution	Type of Account	Account Balance
Total \$		

SCHEDULE 2 / SECURITIES OWNED

Number of Shares	Description	Registered in Name(s) of	Listed or Unlisted	Current Market Value
Total \$				

SCHEDULE 3 / LIFE INSURANCE

Insurance Company	Insured	Beneficiary	Face Value of Policy	Cash Value of Policy	Loans
			\$	\$	
Totals \$					

SCHEDULE 4 / RECEIVABLES DUE TO ME ON MORTGAGES AND CONTRACTS I OWN

Name of Debtor	Description of Property	First Lien or Second Lien	Date of Maturity	Repayment Terms			Current Market Value
				\$	per		
Total \$							

SCHEDULE 5 / REAL ESTATE OWNED

Description of Property	Year Acquired	Purchase Price	Insured Value	Mortgage Balance	Date of Maturity	Repayment Terms			Current Market Value
		\$	\$	\$		\$	per		
Primary Residence <input type="checkbox"/> Yes <input type="checkbox"/> No		Name of Mortgage Company:							
							per		
Primary Residence <input type="checkbox"/> Yes <input type="checkbox"/> No		Name of Mortgage Company:							
							per		
Primary Residence <input type="checkbox"/> Yes <input type="checkbox"/> No		Name of Mortgage Company:							
							per		
Primary Residence <input type="checkbox"/> Yes <input type="checkbox"/> No		Name of Mortgage Company:							
				Total \$					Total \$

SCHEDULE 6 / SHORT TERM NOTES AND LOANS DUE

Name of Creditor	Collateral	Date of Maturity	Repayment Terms			Balance Due
			\$	per		
				per		
				per		
				per		
				per		
				per		
						Total \$

SCHEDULE 7 / CREDIT ACCOUNTS AND BILLS DUE

Name of Company	Repayment Terms			Balance Due
	\$	per		
		per		
		per		
		per		
		per		
				Total \$

We hereby certify that the information provided in this statement is true and correct. So long as we owe any sums to the bank, we agree to give the bank prompt written notice of any material change in our financial condition. The Bank is authorized to retain this personal financial statement whether or not credit is approved and is further authorized to verify our credit and employment history or any other information in this statement. This application does not obligate the bank to make any loan even if we meet the normal standards the bank considers in determining whether to approve or deny the application.

Applicant's Signature **Date**

Co-Applicant's Signature **Date**