



PERSONAL FINANCIAL STATEMENT

Harbor Financial Services NW, LLC
 Phone (253) 460-1111 – Fax (253) 460-1940

PERSONAL INFORMATION		Date: _____
Name: _____ Social Security No. _____ Date of Birth _____		
Residence Address _____		No. of Years _____
City _____	County _____	State _____ Zip _____
Previous Address _____		City _____ State _____ Zip _____
Telephone: Home _____		Business: _____
Employer/Occupation _____		No of Years _____
Spouse's Name _____		Social Security No. _____
Spouse's Occupation: _____		

ASSETS	LIABILITIES
Cash	Notes Payable (Sched 5)
Securities (Sched 1)	Bank Credit Cards (Sched 6)
Notes and Accounts Receivable (Sched 2)	Other Installment Loans (Sched 7)
Real Estate (Sched 3)	Accounts and Bills Payable (Sched 8)
Autos (Yr & Make)	Mortgages and Liens on Real Estate (Sched 3)
"	Income Taxes Payable
"	Accruals including Real Estate Taxes
Boat/RV	Loans against Life insurance (Sched 4)
Cash Value of Life Insurance (Sched 4)	
Personal Property	TOTAL LIABILITIES
Vested Profit Share or other Employ Benefits	NET WORTH
TOTAL ASSETS	TOTAL LIABILITIES AND NET WORTH

ANNUAL INCOME FOR THE YEAR OF:		Have you ever filed bankruptcy? _____ If yes attach explanation.	
Salary and Wages		Are you a defendant in any suits or legal actions? _____ If yes attach explanation.	
Dividend and Interest		List any contingent liabilities below.	
Rentals			
Business			
Other (list)			
Total			
Personal Bank Account Carried at Bank		Branch _____	Acct. # _____

FOR THE PURPOSE OF OBTAINING AND MAINTAINING CREDIT, I SUBMIT THE FOREGOING AND FOLLOWING INFORMATION CONTAINED ON BOTH SIDES OF THIS SHEET BOTH WRITTEN AND PRINTED, INCLUDING SUPPLEMENTAL STATEMENTS AS BEING A FULL, AND CORRECT STATEMENT OF MY FINANCIAL CONDITION ON THE DATE STATED. I AUTHORIZE HARBOR FINANCIAL SERVICES NW OR ANY CREDIT BUREAU TO INVESTIGATE THE REFERENCES LISTED HEREIN.

Applicants Signature **X** _____ Date _____

SCHEDULE 1-- SECURITIES

Listed Securities				
Name of Company	Exchange	No. of shares or face value	Price per share (How valued)	Total Market Value
Unlisted Securities				

SCHEDULE 2-- NOTES AND ACCOUNTS RECEIVABLE

Due From	Address	Collateral	How Payable	Maturity	Balance Due
			\$ per		
			\$ per		
			\$ per		
			\$ per		

SCHEDULE 3--REAL ESTATE

Address or Location	Description (rental, res., income, etc.)	% owned	Cost	Curr. Mkt	Mo. Income	Mtg Pmts	Mtg. Bal.	Lien Holder

SCHEDULE 4--CASH VALUE OF LIFE INSURANCE

Insured	Beneficiary	Name of Co.	Face Amount	Cash Value	Owed to	Loan Amount

SCHEDULE 5--NOTES PAYABLE

Due To	Branch or Address	Collateral	Maturity	How Payable	Balance Due

SCHEDULE 6--BANK CREDIT CARDS

Issuing Bank	Card Number	Expiration Date	Credit Limit	Current Balance

SCHEDULE 7--OTHER INSTALLMENT LOANS

SCHEDULE 8--ACCOUNTS & BILLS PAYABLE

Payable to	Collateral	Payments	Balance	Payable to	How Payable	Balance
					\$ per	
					\$ per	
					\$ per	
					\$ per	
					\$ per	
					\$ per	
					\$ per	

PLEASE NOTE ANY ASSETS OWNED JOINTLY (J) OTHER THAN WITH SPOUSE OR BUSINESS

Casualty Insurance Agent _____ Attorney _____

Accountant _____

APPLICANT SIGNATURE **X** _____