



**FIDELITY BANK OF TEXAS**  
 1901 W. Lake Shore Dr.  
 410 S. Robinson Dr.  
 P.O. Box 5540  
 Waco, Texas 76708

**PERSONAL FINANCIAL STATEMENT FORM**

STATEMENT DATE \_\_\_\_\_

PERSONAL INFORMATION					
APPLICANT (NAME)			CO-APPLICANT (NAME)		
Employer			Employer		
Address of Employer			Address of Employer		
Business Phone No.	No. of years with Employer	Title/Position	Business Phone No.	No. of years with Employer	Title/Position
Home Address			Home Address		
Home Phone No.	Social Security No.	Date of Birth	Home Phone No.	Social Security No.	Date of Birth
Name, Phone No. of your Accountant			Name, Phone No. of your Accountant		
Name, Phone No. of your Attorney			Name, Phone No. of your Attorney		
Name, Phone No. of your Insurance Agent			Name, Phone No. of your Insurance Agent		

**Cash Flow Statement For Year Ended \_\_\_\_\_ (Omit Cents)**

ANNUAL INCOME	AMOUNT (\$)
Salary (applicant)	
Salary (co-applicant)	
Bonuses & Commissions (applicant)	
Bonuses & Commissions (co-applicant)	
Rental Income	
Interest Income	
Dividend Income	
Capital Gains	
Partnership Income	
Other Investment Income	
Other Income (List)	
<b>TOTAL INCOME</b> ➡	

ANNUAL EXPENDITURES	AMOUNT (\$)
Federal Income Taxes and Other Taxes	
State Income Taxes and Other Taxes	
Rental Payments, Co-op, or Condo Maintenance	
Mortgage Payments	Residential Investment
Property Taxes	Residential Investment
Interest & principal Payments on Loans	
Insurance	
Investments (including tax shelters)	
Alimony/Child Support	
Tuition and Living Expenses for Accommodations, etc.	
Medical Expenses	
Other Living Expenses	
Other Expenses (List)	
<b>TOTAL EXPENDITURES</b> ➡	
<b>NET ANNUAL CASH FLOW</b> ➡ <small>(TOTAL INCOME minus TOTAL EXPENDITURE)</small>	

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





**Please Answer the Following Questions:**

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?  Yes  No  
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 dependants (excluding self) and relationship to applicant: \_\_\_\_\_
5. Do (either of) you have a line of credit or unused credit facility at any other institution(s)?  Yes  No  
If so, please indicate where, how much, and name of banker: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Additional Remarks:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Representation and Warranties**

The information contained in this statement is provided to induce you 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 you are relying on the information provided herein in 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 you 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 you. In the absence of such notice or a new and full written statement, this should be considered as a continuing statement and substantially correct. If the undersigned fail to notify you as required above, or if any of the information herein should prove to be inaccurate or incomplete in any material respect, you may declare the indebtedness of the undersigned or the indebtedness guaranteed by the undersigned, as the case may be, immediately due and payable. You are authorized to make all inquiries you deem 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 you any information it may have on the undersigned. Each of the undersigned authorizes you to answer questions about your credit experience with the undersigned. As long as any obligation or guarantee of the undersigned to you is outstanding, the undersigned shall supply annually an updated financial statement. This personal financial statement and any other financial or other information that the undersigned give you shall be your property.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Your Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Co-Applicant's Signature (if you are requesting financial accommodation jointly)