



## SSB Wanamingo

CONTACT YOUR REPRESENTATIVE AT THE BANK  
IF YOU HAVE ANY QUESTIONS REGARDING THE  
COMPLETION OF THIS FORM

YOU MAY APPLY FOR A CREDIT EXTENSION OR FINANCIAL ACCOMMODATION INDIVIDUALLY OR JOINTLY WITH A CO-APPLICANT. THIS STATEMENT AND ANY APPLICABLE SUPPORTING SCHEDULES MAY BE COMPLETED JOINTLY BY BOTH MARRIED AND UNMARRIED CO-APPLICANTS IF THEIR ASSETS AND LIABILITIES ARE SUFFICIENTLY JOINED SO THAT THE STATEMENT CAN BE MEANINGFULLY AND FAIRLY PRESENTED ON A COMBINED BASIS; OTHERWISE SEPARATE STATEMENTS AND SCHEDULES ARE REQUIRED.

### **APPLICANT**

NAME \_\_\_\_\_ Social Security # \_\_\_\_\_

ADDRESS \_\_\_\_\_

TELEPHONE NUMBER \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_

CELL PHONE #: \_\_\_\_\_ EMAIL ADDRESS: \_\_\_\_\_

**PRESENT EMPLOYER** \_\_\_\_\_ Length of employment \_\_\_\_\_

POSITION \_\_\_\_\_ ADDRESS \_\_\_\_\_

### **CO-APPLICANT**

NAME \_\_\_\_\_ Social Security # \_\_\_\_\_

ADDRESS \_\_\_\_\_

TELEPHONE NUMBER \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_

CELL PHONE #: \_\_\_\_\_ EMAIL ADDRESS: \_\_\_\_\_

**PRESENT EMPLOYER** \_\_\_\_\_ Length of employment \_\_\_\_\_

POSITION \_\_\_\_\_ ADDRESS \_\_\_\_\_

Revised 4.10.23 RA

232 Main St, PO Box 188  
Wanamingo, MN 55983  
(507) 824-2265  
ssbwanamingo.com



DATE OF VALUATION \_\_\_\_\_

- Round all amounts to the nearest \$100
- Attach separate sheet if you need more space to complete detail schedule

ASSETS	AMOUNT	LIABILITIES	AMOUNT
Cash in this Bank		Notes Payable Banks (Schedule 7)	
Cash in Other Banks (Detail)		Notes Payable Others (Schedule 7)	
		Installment Contracts Payable (Schedule 7)	
		Due Dept. Stores, Credit Cards & Others	
Due from Friends, Relatives & Others (Sched. 1)		Income Taxes Payable	
Mortgage & Contracts for Deed Owned (Sched.2)		Other Taxes Payable	
Securities Owned (Schedule 3)			
Cash Surrender Value of Life Insur. (Sched.4)		Loans on Life Insurance (Schedule 4)	
Homestead (Schedule 5)			
Other Real Estate Owned (Schedule 5)		Mortgage on Homestead (Schedule 6)	
Automobiles		Mortgage or Liens on Other Real Estate Owned (Schedule 6)	
		Other Liabilities (Detail)	
Personal Property			
Other Assets (Detail)			
Shop Equipment/inventory		TOTAL LIABILITIES	
		Net Worth (Total Assets Less Total Liabilities)	
TOTAL			

ANNUAL INCOME	APPLICANT	CO-APPLICANT	CONTINGENT LIABILITIES	
Salary			As Endorser	
Commissions/Rentals			As Guarantor	
Dividends/Interest			Lawsuits	
			For Taxes	
			Other (Detail)	
*** See Below				
Other			[ ] Check here if "None"	
TOTAL INCOME			TOTAL CONTINGENT LIABILITIES	

**SCHEDULE 1 DUE FROM FRIENDS, RELATIVES & OTHERS**

Name of Debtor	Owed To	Collateral	How Payable	Maturity Date	Unpaid Balance
			\$ per		
			\$ per		
			\$ per		
TOTAL					

**SCHEDULE 2 MORTGAGE AND CONTRACTS FOR DEED OWNED**

Name of Debtor	Type of Property	1 <sup>st</sup> or 2 <sup>nd</sup> Lien	Owed To	How Payable	Unpaid Balance
				\$ per	
				\$ per	
				\$ per	
				\$ per	
TOTAL					

\*\*\* Alimony, child support or maintenance (you need not show this unless you wish us to consider it)

**SCHEDULE 3 SECURITIES OWNED**

No. Shares or Bond Amount	Description	In Whose Name(s) Registered	Cost	Present Market Value	L-listed U-Unlisted
<b>TOTAL</b>					

**SCHEDULE 4 LIFE INSURANCE**

Insured	Insurance Company	Beneficiary	Face Value of Policy	Cash Value	Loans
<b>TOTAL</b>					

**SCHEDULE 5 REAL ESTATE**

Address & Type of Property	Title in Name(s) of	Monthly Income	Cost Year Acquired	Present Market Value	Amount of Insurance
			\$ Year		

**SCHEDULE 6 MORTGAGES OR LIENS ON REAL ESTATE**

To Whom Payable	Property Type	How Payable	Escrow? Y/N	Interest Rate	Maturity Date	Unpaid Balance
		\$ per				
		\$ per				
		\$ per				
		\$ per				
		\$ per				

**SCHEDULE 7 NOTES PAYABLE BANKS & OTHERS AND INSTALLMENT CONTRACTS PAYABLE**

To Whom Payable	City, State	Interest Rate	Collateral or Unsecured	How Payable	Unpaid Balance
				\$ per	
				\$ per	
				\$ per	
				\$ per	
				\$ per	
				\$ per	

**COMMENTS** (Future Plans, significant events, etc...):

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	<u>APPLICANT</u>	<u>CO-APPLICANT</u>
Have you ever gone through bankruptcy or had a judgment against you?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you currently involved in a lawsuit or legal action?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you have any outstanding/unpaid collections or judgments?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are any assets pledged or debts secured except as shown?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you made a will?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you a U.S. Citizen?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Number of Dependents (If "None" check None)	_____ <input type="checkbox"/> None	_____ <input type="checkbox"/> None
Are you obligated to pay alimony, child support, or spousal support?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Does any of your income come from a cannabis or hemp related source?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Marital Status (answer only if this financial statement is provided in connection with a request for secured credit or applicant is seeking a joint account with spouse.)	<input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried	<input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried

(Unmarried includes single, divorced, widowed)

The foregoing statement, submitted for the purpose of obtaining credit, is true and correct in every detail and fairly shows my/our financial condition at the time indicated. I/we will give you prompt written notice of any subsequent substantial change in such financial condition occurring before discharge of my/our obligations to you. I/we understand that you will retain this personal financial statement whether or not you approve the credit in connection with which it is submitted. You are authorized to check my/our credit and employment history or any other information contained herein.

I am applying for **individual credit** in my own name and am relying on my income and assets, and not the income or assets from another person.

I am applying for **individual credit** in my own name and am relying on my income and assets, as well as the income or assets from other sources.

We are applying for **joint credit**.

**Authorization to release and obtain credit information:** For the purpose of procuring credit and maintaining credit files, opening a checking account, applying for a cash card, and / or applying for a debit card; I hereby authorize Security State Bank of Wanamingo to verify in any manner it deems necessary, my credit and employment history. I also authorize any past, present, or future creditors or employers to release any information they have about me to Security State Bank of Wanamingo. Security State Bank of Wanamingo is also authorized by me to release information to other creditors and credit reporting agencies about my credit history.

THE UNDERSIGNED CERTIFY THAT THE INFORMATION CONTAINED ON THIS FORM  
HAS BEEN CAREFULLY REVIEWED AND THAT IT IS TRUE AND CORRECT IN ALL RESPECTS.

\_\_\_\_\_  
Date

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

\_\_\_\_\_  
Date

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