

# Individual Financial Statement

Please complete all information which pertains to you. Print or Type.  
(If there is insufficient room on this form to provide all information, complete on separate paper and attach.)

**TO:** Michigan State Housing Development Authority  
735 E. Michigan Avenue  
Lansing, MI 48912  
**LENDER**

Name		<b>PERSONAL INFORMATION</b>	
Residence Address	Phone	Are any assets pledged other than as described on schedules? If yes, describe.	
City	State	Zip	Are you a partner or officer in any other venture which could result in individual liabilities? If yes, describe.
Social Security Number		Are you obligated to pay alimony, child support or separate maintenance payments? If yes, describe.	
Position or Occupation		Income tax settled through (Date)	Are you a defendant in any suits or legal actions? If yes, describe on separate sheet and attach.
Business name		Do you have a will? If yes, name executor.	
Business Address	Phone	Personal bank accounts carried at:	
City	State	Zip	Have you ever sought protection under the bankruptcy laws? If yes, describe.
<b>SOURCES OF INCOME FOR YEAR ENDED</b> YOU ARE NOT REQUIRED TO DISCLOSE INCOME FROM ALIMONY, CHILD SUPPORT OR SEPARATE MAINTENANCE PAYMENTS. HOWEVER, IF YOU ARE RELYING ON INCOME FROM ALIMONY, CHILD SUPPORT OR SEPARATE MAINTENANCE AS A BASIS FOR REPAYMENT OF YOUR OBLIGATIONS TO THE LENDER PLEASE INDICATE BELOW.		<b>CONTINGENT LIABILITIES</b>	
		Do you have any contingent liabilities? If yes, describe.	
Salary, Bonuses, Commissions		As Endorser, Co-Maker or Guarantor?	
Dividends		On Leases or Contracts?	
Real Estate Income		Legal Claims?	
Other Income		Other Special Debt?	
<b>TOTAL</b>		Amount of Contesting Income Tax Liens	
<b>\$</b>		<b>TOTAL: \$</b>	
<b>ASSETS (IN DOLLARS, OMIT CENTS)</b>		COLUMN I TOTAL AMOUNT (Including Joint Ownership)	COLUMN II JOINT OWNERSHIP (Excluding Sole Ownership)
		COLUMN III NET AMOUNT (Column 1 Less 2)	
Cash on hand and in Banks (Schedule A)		\$	\$
Marketable Securities (Schedule B)			
Non-Marketable Securities (Schedule B)			
Accounts Receivable (Schedule C)			
Notes Receivable (Schedule C)			
Life Insurance-Cash Surrender Value (Schedule D)			
<b>TOTAL CURRENT ASSETS</b>		\$	\$
Mortgages Receivable			
Real Estate Sold on Contract (Schedule E)			
Real Estate (Schedule F)			
Furniture, Fixtures, Machinery			
Automobiles			
<b>TOTAL ASSETS: \$</b>		\$	\$
<b>LIABILITIES AND NET WORTH (IN DOLLARS, OMIT CENTS)</b>		COLUMN IV TOTAL AMOUNT (Including Joint Liabilities)	
Notes Payable-Banks-Secured (schedule G)		\$	
Notes Payable-Banks-Unsecured (Schedule G)			
Notes Payable-Equipment			
Notes Payable-Other			
Accounts Payable			
Taxes: Income and Property			
Credit Card Accounts Payable			
Loans on Life Insurance			
Other			
<b>TOTAL CURRENT LIABILITIES</b>		\$	
Mortgages on Real Estate Sold on Contract (Schedule E)			
Mortgages or Land Contracts on Real Estate (Schedule F)			
<b>TOTAL LIABILITIES</b>		\$	
Net Worth Including Joint Assets (Column I less Column IV)			
Individual Net Worth (Column III Less Column IV)			
<b>TOTAL LIABILITIES AND NET WORTH: \$</b>		\$	

**COMPLETE SCHEDULES ON SECOND PAGE.  
YOUR SIGNATURE CERTIFIES THE ACCURACY OF THE INFORMATION SET FORTH ABOVE.**

SCHEDULE A - DEPOSITS			
NAME OF FINANCIAL INSTITUTION	ACCOUNT IN NAME(S) OF	TYPE OF ACCOUNT (Checking, Savings, C.D., IRA, etc.)	CURRENT BALANCE
			\$

SCHEDULE B - MARKETABLE / NON-MARKETABLE SECURITIES					
MARKETABLE/ NON-MARKETABLE	NO. OF SHARES OR PAR VALUE OF BONDS, NOTES & BILLS	IN NAME(S) OF	DESCRIPTION	MARKET VALUE	PLEGGED?

SCHEDULE C - ACCOUNTS AND NOTES RECEIVABLE						
DESCRIPTION OR NAME OF BORROWER	PAYABLE TO	% OWNERSHIP	SECURED OR UNSECURED?	AMOUNT OF LOAN (INDICATE MATURITY)	PLEGGED?	

SCHEDULE D - LIFE INSURANCE CARRIED INCLUDING GROUP INSURANCE						
AMOUNT	OWNER OF THE POLICY	NAME(S) OF INDIVIDUAL(S) COVERED	NAME OF ISSUING COMPANY	BENEFICIARY	CASH SURRENDER VALUE	POLICY LOANS FROM ISSUING CO.
\$					\$	

SCHEDULE E - REAL ESTATE SOLD ON CONTRACT					
DESCRIPTION AND LOCATION	OWNER(S) OF RECORD	AMOUNT SOLD FOR	UNPAID BALANCE	MORTGAGES	MONTHLY CONTRACT PAYMENT
		\$	\$	\$	\$

SCHEDULE F - REAL ESTATE						
DESCRIPTION AND LOCATION	OWNER(S) OF RECORD	PURCHASE PRICE	PRESENT VALUE	OWING ON MORT. OR CONTRACT	HOLDER OF MORTGAGE OR CONTRACT	MONTHLY RENT
		\$	\$	\$		\$

SCHEDULE G - NOTES AND LOANS PAYABLE					
NAME OF LENDER	INDIVIDUAL OR JOINT	TYPE OF SECURITY (Mark "N/A" if Unsecured)	MATURITY DATE (If Installment Mark "I/L")	AMOUNT OF INSTALLMENT	BALANCE DUE
				\$	\$

The information contained in this statement is provided to the Lender for the purpose of obtaining, or maintaining credit with the Lender, or to support the applicant's joint or individual guarantee on behalf of other persons, firms, or corporations who are obtaining credit accommodations from the Lender. The applicant understands that the Lender will rely on the information given in making its decision to either grant or maintain such credit. The undersigned represents and warrants that the information provided is true and complete and that you may consider this statement as continuing to be true and correct until a written notice of a change is given to you by the undersigned. You are authorized to make all inquiries you deem necessary to verify the accuracy of the statements made herein, and to determine my credit worthiness. You are authorized to answer questions about your credit experience with me.

DATE SIGNED \_\_\_\_\_

SIGNATURE **X** \_\_\_\_\_  
(Applicant)

WITNESS **X** \_\_\_\_\_