



Personal Financial Statement

*** Please note these must be dated the same and current within 90 days of filing the application. All information must be dated and signed.**

Child Care Organization:	Date:
Address	
City	
Federal Tax ID number:	Phone # () -
e-mail address	

This is a(n) Individual Financial Statement Joint Financial Statement

Purpose: This form helps us understand your personal financial situation. Because you will be asked to personally guarantee the loan from the New Mexico Child Care Facility Loan Fund.

Who should complete the form?

1. The proprietor of a sole proprietorship
2. Each partner in a partnership
3. Each officer and stockholder with 20% or more ownership in a corporation
4. Any other person or entity providing a guaranty on a loan

- Instructions:**
1. Do not include any business assets or debts on this form. Business information should be included in the business financial's provided separately as a part of the business plan or summary.
 2. Be sure to include complete detailed information on all open accounts, as this statement will be cross-referenced with your credit report. Incomplete information typically holds up the loan application review process.

ASSETS	LIABILITIES		Outstanding Balance
Checking accounts			
\$			
Savings accounts	Credit Cards (total all debt-describe in section 2)		\$
\$			
Vehicles #1-market value	Student Loans (describe in Section 2)		\$
\$			
Vehicles #2-market value	Auto Loan or Lease #1 (describe in section 2)		\$
\$			
Vehicles #3-market value	Auto Loan or Lese #2 (describe in section 2)		\$
\$			
Individual Retirement Accounts (IRA's)	1st Mortgage (describe in section 3)		\$
\$			
Life Insurance (cash surrender value, not face value)	Second/Third Mortgage (s) (describe in section 2)		\$
\$			
Real Estate- Market Value (describe in Section 3)	Personal Loans (describe in section 2)		\$
\$			
Stocks and Bonds (describe in Section 4)	Unpaid taxes (describe in section 7)		\$
\$			
Other Personal Property (describe in Section 5)	Other Liabilities (describe in section 8)		\$
\$			
Other Assets including annuities	Total Liabilities		\$
\$			
Accounts, Notes Receivable (describe in section 6)			
\$			
Total Assets		\$	

NET WORTH

Total Assets minus Total Liabilities = \$

SECTION 1: Income and Liabilities

	<u>Sources of Income</u>		<u>Contingent Liabilities</u>	
	Self	Spouse		
Annual Salary/Wages	\$	\$		
Business Income	\$	\$	As guarantor or co-maker	\$
Real Estate Income	\$	\$	Legal claims and judgements	\$
Net Investment Income	\$	\$	Income or sales taxes	\$
Other Income*	\$	\$	Other special debt	\$
Total			Total	\$

Description of items listed in the section :

*Alimony, child support, or separate maintenance income need not be disclosed if you do not wish to have it considered as a basis for repaying the obligation.

SECTION 2: Credit Cards, Student Loans, Auto Loans and Leases, Second/Third Mortgages, and Other Loans

(Use supplemental sheets as necessary. Each Statement must be identified as a supplement to this statement and signed.)

Name and Address of Note Holder	Original Balance	Current Balance	Payment Amount	Terms (Monthly, etc.)	How Secured or Endorsed and Type of Collateral

Section 3: Real Estate Owned (Use supplemental sheets as necessary. Each sheet must be identified as a supplement to this statement and sign. List each parcel separately.)

Address & Type of Property	Title is in Name of	Date Purchased	Original Cost	Market (assessed) Value	1st Mortgage Balance	Amount of Payment	Status of Mortgage

SECTION 4: Stocks and Bonds (use attachments if necessary. Each attachment must be identified as a supplement to this statement and signed.)

Number of Shares	Name of Securities	Cost	Market Value Quotation/Exchange	Date of Quotation/Exchange	Total Value

SECTION 5: Other Personal Property (List and describe items)

SECTION 6: Other Assets, Notes and Accounts Receivable (Describe and include retirement accounts here)

SECTION 7: Unpaid Taxes (Describe in detail, use attachment sheet if necessary)

Type	To whom Payable	Due Date	amount	What, if any the tax lien attaches to.

SECTION 8: Other Liabilities (Describe in detail)

SECTION 9: Life Insurance Held

Face amount of Policies	Name of Company	Beneficiaries

Are you involved in any litigation? Yes No If yes, please explain:

Are you a guarantor on any loan? Yes No If yes, please list:

Have you ever taken bankruptcy? Yes No If yes, please explain:

The undersigned certifies that the above facts are true and accurate statements of Financial Condition as of (date) _____ and further agrees to advise NMFA immediately if there is any material change in my financial condition. I agree that this application shall remain your property whether or not the loan is granted. I further authorize you to make any verification of the above information you deem necessary in order to obtain this loan.

If any of the above listed assets are held jointly with a spouse, he or she must sign below authorizing us to obtain credit information.

Signature _____ Social Security # _____ Date _____

Signature _____ Social Security # _____ Date _____