

# OAK VIEW National Bank

## PERSONAL FINANCIAL STATEMENT

If you are applying for an individual account in your own name or offering only your own personal guaranty, please only include your income and assets and not those of other individuals. If you are applying for joint credit or offering a joint and several guaranty, include all information on both yourself and the joint applicant below and certify to this fact by signing on page 2. If you rely on income from alimony, child support or separate maintenance or on the income or assets of another person as the basis for repayment of the credit request or to support your guaranty, please provide information regarding this person to the extent of which you will be relying on their income or assets.

### Individual Information

Name \_\_\_\_\_  
Years There: \_\_\_\_\_

Address \_\_\_\_\_  
 \_\_\_\_\_

Home Phone \_\_\_\_\_  
Cell Phone \_\_\_\_\_

Email \_\_\_\_\_  
 Business Name \_\_\_\_\_  
 Address \_\_\_\_\_  
 \_\_\_\_\_  
 Business Phone \_\_\_\_\_

### Joint Maker Information

Name \_\_\_\_\_  
Years There: \_\_\_\_\_

Address \_\_\_\_\_  
 \_\_\_\_\_

Home Phone \_\_\_\_\_  
Cell Phone \_\_\_\_\_

Email \_\_\_\_\_  
 Business Name \_\_\_\_\_  
 Address \_\_\_\_\_  
 \_\_\_\_\_  
 Business Phone \_\_\_\_\_

### ASSETS

**EVEN  
DOLLARS**

### LIABILITIES & NET WORTH

**EVEN  
DOLLARS**

|   |           |  |
|---|-----------|--|
| Cash on Hand in Banks (Schedule A)            | \$        |  |
| US Government Securities (Schedule B)         |           |  |
| Listed Securities (Schedule B)                |           |  |
| Unlisted Securities (Schedule B)              |           |  |
| Other Equity Interests (Schedule B)           |           |  |
| Accounts and Notes Receivable                 |           |  |
| Real Estate Owned (Schedule C)                |           |  |
| Mortgage and Land Contracts Rec. (Schedule D) |           |  |
| Cash Value of Life Insurance (Schedule E)     |           |  |
| Retirement Accounts                           |           |  |
| Vehicles                                      |           |  |
| Other Assets (please itemize below)           |           |  |
|   |           |  |
|   |           |  |
| <b>Total Assets</b>                           | <b>\$</b> |  |

|  |           |  |
|--|-----------|--|
| Notes Payable to OVNB (Schedule A)               | \$        |  |
| Notes Payable to Other Institutions (Schedule A) |           |  |
| Notes Payable to Others                          |           |  |
| Accounts and Bills Due                           |           |  |
| Unpaid Taxes                                     |           |  |
| Real Estate Mortgage Payable (Schedule C or D)   |           |  |
| Land Contracts Payable (Schedule C or D)         |           |  |
| Life Insurance Loans (Schedule E)                |           |  |
| Other Liabilities (Please Itemize)               |           |  |
|  |           |  |
|  |           |  |
| <b>Total Liabilities</b>                         | <b>\$</b> |  |
| <b>Net Worth</b>                                 | <b>\$</b> |  |
| <b>Total Liabilities &amp; Net Worth</b>         | <b>\$</b> |  |

128 Broadview Avenue  
 Warrenton, Virginia 20186  
 540-359-7100 (Main)  
 540-359-7150 (Fax)

4174-D Old Stockyard Road  
 Marshall, Virginia 20115  
 540-364-1187 (Local)  
 540-359-7125 (Fax)

**SOURCES OF INCOME**

**EVEN  
DOLLARS**

|                         |           |              |
|-------------------------|-----------|--------------|
| Salary                  | \$        | _____        |
| Bonus/Commissions       |           | _____        |
| Dividends               |           | _____        |
| Real Estate Income      |           | _____        |
| Other* (please itemize) |           | _____        |
| _____                   |           | _____        |
| _____                   |           | _____        |
| <b>Total</b>            | <b>\$</b> | <b>_____</b> |

*\*Alimony, child support or separate maintenance payments need not be disclosed unless relied upon as a basis for extension of credit.*

**Contingent Liabilities**

|                                    |           |              |
|------------------------------------|-----------|--------------|
| As endorser, co-maker or guarantor | \$        | _____        |
| On leases                          |           | _____        |
| Legal Claims                       |           | _____        |
| Provision for Federal Income Taxes |           | _____        |
| Other                              |           | _____        |
| <b>Total</b>                       | <b>\$</b> | <b>_____</b> |

**GENERAL INFORMATION**

Partner, Owner or Officer in any other venture, please explain:  
\_\_\_\_\_  
\_\_\_\_\_

Income taxes settled through: \_\_\_\_\_  
Have you every filed Bankruptcy? \_\_\_\_\_

Are you a defendant in a legal suit? If yes, please explain:  
\_\_\_\_\_  
\_\_\_\_\_

Do you have a will? If yes, with whom: \_\_\_\_\_  
\_\_\_\_\_

Do you have a trust? If yes, with whom: \_\_\_\_\_  
\_\_\_\_\_

Number of Dependents: \_\_\_\_\_  
Ages: \_\_\_\_\_

*You may apply for credit individually or jointly with another party.  
The intention is to apply: \_\_\_ individually \_\_\_ jointly (all parties please initial)*

I/We have carefully read and submitted the foregoing information provided on this statement to Oak View National Bank. The information is presented as a true and accurate statement of my/our financial condition on the date indicated. This statement is provided for the purpose of obtaining and maintaining credit with Oak View National Bank. I/We agree that if any material change(s) occur in my/our financial condition that I/We will immediately notify Oak View National Bank of said change(s). Unless Oak View National Bank is so notified, it may continue to rely upon this financial statement and the representations made herein as a true and accurate statement of my/our financial condition. I/We authorize Oak View National Bank to make whatever credit inquiries it deems necessary in connection with this financial statement. I/We authorize and instruct any person or consumer reporting agency to furnish Oak View National Bank with any information that it may have or obtain in response to such credit requests. I/We fully understand that it is a federal crime punishable by fine or imprisonment or both to knowingly make any false statements concerning any of the above facts, pursuant to 18 U.S.C. Section 1014.

**Applicant's  
Signature:** \_\_\_\_\_

**Social  
Security #:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Co-applicant's  
Signature:** \_\_\_\_\_

**Social  
Security #:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**SCHEDULE A**

**BANKS, BROKERS, SAVINGS & LOAN ASSOCIATIONS, FINANCE COMPANIES OR CREDIT UNIONS**

List the names of all institutions at which you maintain a deposit account and/or where you have obtained loans.

| Name of Institution | Deposit Balance | High Credit | Amount Owed | Interest Rate | Monthly Payment | Assets Securing The Debt |
|---------------------|-----------------|-------------|-------------|---------------|-----------------|--------------------------|
|                     |                 |             |             |               |                 |                          |
|                     |                 |             |             |               |                 |                          |
|                     |                 |             |             |               |                 |                          |
|                     |                 |             |             |               |                 |                          |
|                     |                 |             |             |               |                 |                          |
|                     |                 |             |             |               |                 |                          |
|                     |                 |             |             |               |                 |                          |
|                     |                 |             |             |               |                 |                          |

**SCHEDULE B**

**US GOVERNMENT STOCK<sup>1</sup>, BONDS<sup>2</sup> AND PARTNERSHIP INTERESTS<sup>3</sup>**

| Number of Shares or % of Ownership | Indicate:  | Market Value | Pledged Yes/No |
|------------------------------------|--|--------------|----------------|
|                                    | 1. Agency or Name of Company Issuing Security or Name of Partnership<br>2. Type of Investment or Equity Classification<br>3. If Unlisted Security or Partnership, list basis for valuation |              |                |
|                                    |  |              |                |
|                                    |  |              |                |
|                                    |  |              |                |
|                                    |  |              |                |
|                                    |  |              |                |
|                                    |  |              |                |
|                                    |  |              |                |

<sup>1</sup>. Unlisted or Listed      <sup>2</sup>. Government or Commercial      <sup>3</sup>. General or Limited

**SCHEDULE C**

**REAL ESTATE OWNED AND RELATED DEBT**

| Address or Property Description | Titled in the Name of: | Date Acquired | Cost + Improvements | Present Market Value | MORTGAGE OR LAND CONTRACT PAYABLE |                 |        |
|---------------------------------|------------------------|---------------|---------------------|----------------------|-----------------------------------|-----------------|--------|
|                                 |                        |               |                     |                      | Balance Owing                     | Monthly Payment | Holder |
|                                 |                        |               |                     |                      |                                   |                 |        |
|                                 |                        |               |                     |                      |                                   |                 |        |
|                                 |                        |               |                     |                      |                                   |                 |        |
|                                 |                        |               |                     |                      |                                   |                 |        |
|                                 |                        |               |                     |                      |                                   |                 |        |
|                                 |                        |               |                     |                      |                                   |                 |        |

**SCHEDULE D**

**REAL ESTATE MORTGAGES AND LAND CONTRACTS RECEIVABLE**

| Address or Property Description | Titled in the Name of: | Date Acquired | Balance Receivable | Monthly Payment | MORTGAGE OR LAND CONTRACT PAYABLE |                 |        |
|---------------------------------|------------------------|---------------|--------------------|-----------------|-----------------------------------|-----------------|--------|
|                                 |                        |               |                    |                 | Balance Owing                     | Monthly Payment | Holder |
|                                 |                        |               |                    |                 |                                   |                 |        |
|                                 |                        |               |                    |                 |                                   |                 |        |
|                                 |                        |               |                    |                 |                                   |                 |        |

**SCHEDULE E**

**LIFE INSURANCE CARRIED**

| Name of Company | Face Amount | Cash Surrender Value | Loans Outstanding | Beneficiary |
|-----------------|-------------|----------------------|-------------------|-------------|
|                 |             |                      |                   |             |
|                 |             |                      |                   |             |
|                 |             |                      |                   |             |