

**PERSONAL FINANCIAL STATEMENT**
**IMPORTANT: Read these directions before completing this Statement.**

- If you are applying for individual credit in your own name and are relying on your own income or assets of another person as the basis for repayment of the credit requested, complete only Sections 1 and 3
- If you are applying for joint credit with another person, complete the Sections providing information in Section 2 about the joint applicant.
- If you are applying for individual credit, but are relying on income from alimony, child support, or separate maintenance or on the income of assets of another person as a basis for repayment of the credit requested, complete all Sections, providing information in Section 2 about the person whose alimony, support or maintenance payments or income or assets you are relying.
- If this statement relates to your guaranty of the indebtedness of other person(s), firm(s) or corporation(s), complete Sections 1 and 3.
- If this is an application for joint credit, Borrower and Co-Borrower each agree that we intend to apply for joint credit (sign below):**

Borrower \_\_\_\_\_

Co-Borrower \_\_\_\_\_

**TO: Lakeside Bank, 55 West Wacker Drive, Chicago, IL 60601-1699**

| SECTION 1 – INDIVIDUAL INFORMATION (Type or Print)        |                            | SECTION 2 – OTHER PARTY INFORMATION (Type or Print) |                            |
|---|----------------------------|---|----------------------------|
| Name  |                            | Name  |                            |
| Residence Address   |                            | Residence Address                                   |                            |
| City, State & Zip   |                            | City, State & Zip                                   |                            |
| Position or Occupation                                    |                            | Position or Occupation                              |                            |
| Business Name   |                            | Business Name                                       |                            |
| Business Address  |                            | Business Address                                    |                            |
| City, State & Zip   |                            | City, State & Zip                                   |                            |
| Res. Phone - - - Bus. Phone - - -                         |                            | Res. Phone - - - Bus. Phone - - -                   |                            |
| SECTION 3 – STATEMENT OF FINANCIAL CONDITION AS OF:       |                            | (Date) _____ -2015                                  |                            |
| ASSETS<br>(Do not include Assets of doubtful value)       | In Dollars<br>(Omit cents) | LIABILITIES   | In Dollars<br>(Omit cents) |
| Cash on hand and in banks                                 | \$                         | Notes payable to banks – secured                    | \$                         |
| U.S. Gov't & Marketable Securities – see Schedule A       | \$                         | Notes payable to banks – unsecured                  | \$                         |
| Non-Marketable Securities – see Schedule B                | \$                         | Due to Brokers                                      | \$                         |
| Securities held by Broker in margin accounts              | \$                         | Amounts payable to others – secured                 | \$                         |
| Restricted or control stocks                              | \$                         | Amounts payable to others – unsecured               | \$                         |
| Partial Interest in Real Estate Equities – See Schedule C | \$                         | Accounts and bills due                              | \$                         |
| Real Estate Owned – see Schedule D                        | \$                         | Unpaid taxes and interest                           | \$                         |
| Loans Receivable  | \$                         | Real estate mortgages payable – See Schedule D      | \$                         |
| Automobiles and other personal property                   | \$                         | Other debts – itemize:                              | \$                         |
| Cash value-life-insurance – see Schedule E                | \$                         |   | \$                         |
| Other Assets – itemize:                                   | \$                         |   | \$                         |
|   | \$                         |   | \$                         |
|   | \$                         |   | \$                         |
|   | \$                         |   | \$                         |
|   | \$                         |   | \$                         |
|   | \$                         | TOTAL LIABILITIES                                   | \$                         |
|   | \$                         | NET WORTH   | \$                         |
| <b>TOTAL ASSETS</b>                                       | <b>\$</b>                  | <b>TOTAL LIABILITIES AND NET WORTH</b>              | <b>\$</b>                  |

| SOURCES OF INCOME FOR YEAR ENDED   | PERSONAL INFORMATION   |
|--|--|
| Salary, bonuses & commissions \$   | Do you have a will? <input type="checkbox"/> If so, name of executor:  |
| Dividends \$   | NO   |
| Real estate income \$  | Are you a partner or officer in any other venture? <input type="checkbox"/> If so, describe:                                   |
| Other income (Alimony, child support, or separate maintenance income need not be revealed if you do not wish to have it considered as a basis for repaying this obligation) \$ | NO   |
| \$   | Are you obligated to pay alimony, child support or separate maintenance payments? <input type="checkbox"/> If so, describe: NO |
| TOTAL \$   | Are any assets pledged other than as described on schedules? <input type="checkbox"/> Describe: NO                             |
| CONTINGENT LIABILITIES   |  |
| Do you have any contingent liabilities? <input type="checkbox"/> If so, describe NO  | Income tax settled through (date) 20____   |
|  | Are you a defendant in any suits or legal actions? <input type="checkbox"/>  |
|  | NO   |
| As endorser, co-maker or guarantor? \$ 0   | Personal bank accounts carried at:   |
| On leases or contracts? \$ 0   |  |
| Legal claims \$ 0  |  |
| Other special debt \$ 0  | Have you ever been declared bankrupt? <input type="checkbox"/> If so, describe:  |
| Amount of contested income tax liens \$ 0  | NO   |

**(COMPLETE SCHEDULES AND SIGN ON REVERSE SIDE)**

**SCHEDULE A – U.S. GOVERNMENTS & MARKETABLE SECURITIES**

| Number of Shares or Face Value (Bonds) | Description | In Name of | Are These Pledged? | Market Value |
|--|-------------|------------|--------------------|--------------|
|  |             |            |                    |              |
|  |             |            |                    |              |
|  |             |            |                    |              |
|  |             |            |                    |              |

**SCHEDULE B – NON-MARKETABLE SECURITIES**

| Number of Shares | Description | In Name of | Are These Pledged? | Source of Value | Value |
|------------------|-------------|------------|--------------------|-----------------|-------|
|                  |             |            |                    |                 |       |
|                  |             |            |                    |                 |       |
|                  |             |            |                    |                 |       |
|                  |             |            |                    |                 |       |

**SCHEDULE C – PARTIAL INTEREST IN REAL ESTATE EQUITIES**

| Address & Type of Property | Title in Name Of | % of Ownership | Date Acquired | Cost | Market Value | Mortgage Maturity | Mortgage Amount |
|----------------------------|------------------|----------------|---------------|------|--------------|-------------------|-----------------|
|                            |                  | %              |               |      |              |                   |                 |
|                            |                  | %              |               |      |              |                   |                 |
|                            |                  | %              |               |      |              |                   |                 |
|                            |                  | %              |               |      |              |                   |                 |

**SCHEDULE D – REAL ESTATE OWNED**

| Address & Type of Property | Title in Name Of | % of Ownership | Date Acquired | Cost | Market Value | Mortgage Maturity | Mortgage Amount |
|----------------------------|------------------|----------------|---------------|------|--------------|-------------------|-----------------|
|                            |                  | %              |               |      |              |                   |                 |
|                            |                  | %              |               |      |              |                   |                 |
|                            |                  | %              |               |      |              |                   |                 |
|                            |                  | %              |               |      |              |                   |                 |

**SCHEDULE E – LIFE INSURANCE CARRIED, INCLUDING N.S.L.I. AND GROUP INSURANCE**

| Name of Insurance Company | Owner of Policy | Beneficiary | Face Amount | Policy Loans | Cash Surrender Value |
|---------------------------|-----------------|-------------|-------------|--------------|----------------------|
|                           |                 |             |             |              |                      |
|                           |                 |             |             |              |                      |
|                           |                 |             |             |              |                      |
|                           |                 |             |             |              |                      |

**SCHEDULE F – BANKS OR FINANCE COMPANIES WHERE CREDIT HAS BEEN OBTAINED**

| Name & Address of Lender | Credit in the Name of | Secured or Unsecured? | Original Date | High Credit | Current Balance |
|--------------------------|-----------------------|-----------------------|---------------|-------------|-----------------|
|                          |                       |                       |               |             |                 |
|                          |                       |                       |               |             |                 |
|                          |                       |                       |               |             |                 |
|                          |                       |                       |               |             |                 |

The information contained in this statement is provided for the purpose of obtaining, or maintaining credit with you on behalf of the undersigned, or persons, firms or corporations in whose behalf the undersigned may either severally or jointly with others, execute a guaranty in your favor. Each undersigned understands that you are relying on the information provided herein (including the designation made as to ownership of property) in deciding to grant or continue credit. Each 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/our creditworthiness. You are authorized to answer questions about your credit experience with me/us.

Section 1014 of Title 18 of the United States Code was amended to make it a federal crime for any person to knowingly make any false statement or report, or willfully overvalue any land, property or security for the purpose of influencing in any way the action of any bank the deposits of which are insured by the Federal Deposit Insurance Corporation.

Date Signed: \_\_\_\_\_

Signature (Individual) \_\_\_\_\_

Social Security Number \_\_\_\_\_ - - \_\_\_\_\_ Date of Birth \_\_\_\_\_

Signature (Other Party) \_\_\_\_\_

Social Security Number \_\_\_\_\_ - - \_\_\_\_\_ Date of Birth \_\_\_\_\_



**SCHEDULE D - SCHEDULE OF REAL ESTATE OWNED** (Investments and Partial Interest)

| Address of Property | Type of Property | Date Purchased | Title in the Name of | % of Ownership | Cost of Property | Cost of improvements in excess of purchase | Present Mkt Value | Amount of Mortgage | Mortgage Maturity Date | Gross Rental Income | Mortgage Payment | Net Income | Name of Lender |
|---------------------|------------------|----------------|----------------------|----------------|------------------|--|-------------------|--------------------|------------------------|---------------------|------------------|------------|----------------|
|                     |                  |                |                      |                |                  |  |                   |                    |                        |                     |                  |            |                |
|                     |                  |                |                      |                |                  |  |                   |                    |                        |                     |                  |            |                |
|                     |                  |                |                      |                |                  |  |                   |                    |                        |                     |                  |            |                |
|                     |                  |                |                      |                |                  |  |                   |                    |                        |                     |                  |            |                |
|                     |                  |                |                      |                |                  |  |                   |                    |                        |                     |                  |            |                |
|                     |                  |                |                      |                |                  |  |                   |                    |                        |                     |                  |            |                |
|                     |                  |                |                      |                |                  |  |                   |                    |                        |                     |                  |            |                |
|                     |                  |                |                      |                |                  |  |                   |                    |                        |                     |                  |            |                |
|                     |                  |                |                      |                |                  |  |                   |                    |                        |                     |                  |            |                |
|                     |                  |                |                      |                |                  |  |                   |                    |                        |                     |                  |            |                |
|                     |                  |                |                      |                |                  |  |                   |                    |                        |                     |                  |            |                |
|                     |                  |                |                      |                |                  |  |                   |                    |                        |                     |                  |            |                |
|                     |                  |                |                      |                |                  |  |                   |                    |                        |                     |                  |            |                |
|                     |                  |                |                      |                |                  |  |                   |                    |                        |                     |                  |            |                |
|                     |                  |                |                      |                |                  |  |                   |                    |                        |                     |                  |            |                |
|                     |                  |                |                      |                |                  |  |                   |                    |                        |                     |                  |            |                |
|                     |                  |                |                      |                |                  |  |                   |                    |                        |                     |                  |            |                |
|                     |                  |                |                      |                |                  |  |                   |                    |                        |                     |                  |            |                |
| <b>TOTAL</b>        |                  |                |                      |                |                  |  | \$ -              | \$ -               |                        |                     |                  |            |                |

The information contained in this statement is provided for the purpose of obtaining or maintaining credit with you on behalf of the undersigned, or persons, firms or corporations in whose behalf the undersigned may either severally or jointly with others, execute a guaranty in favor. Each undersigned understands that you are relying on the information provided herein (including the designation made as to ownership of property) in deciding to grant or continue credit. Each 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/our creditworthiness. You are authorized to answer questions about your credit experience with me/us.

Signature: \_\_\_\_\_

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



**Lakeside Bank**

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**APPRAISER INDEPENDENCE REQUIREMENTS  
BORROWER APPRAISAL DISCLOSURE**

Under the Appraiser Independence Requirements, the appraisal of your property subject to this mortgage loan request must be ordered by your lender. You will be required to pay for the appraisal of your property. The appraisal fee is non-refundable. The collection of this appraisal fee does not guarantee a loan approval and is not a commitment to lend.

You are entitled to receive a copy of your property appraisal report no later than three business days prior to the closing of your mortgage loan transaction. If you do not receive a copy of your appraisal report at least three business days prior to the loan closing date, you will be required to postpone your closing for three business days from the date you received the appraisal.

We may order an appraisal to determine the property's value and charge you for this appraisal. We will promptly give you a copy of any appraisal, even if your loan does not close. You can pay for an additional appraisal for your own use at your own cost.

At your discretion, the following two options are available to you at this time. Please select from the following options:

\_\_\_\_\_ I request that my appraisal be made available to me, regardless of when the closing may be scheduled to take place. I understand I am required to have a minimum of three business days after receipt to review my appraisal report. I do not wish to waive the right to those three business days.

\_\_\_\_\_ I request that my appraisal be made available to me, regardless of when the closing may be scheduled to take place. I hereby waive my rights to have a minimum of three business days after receipt to review my appraisal report.

\_\_\_\_\_  
Signature

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

\_\_\_\_\_  
Signature

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



# Lakeside Bank

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## SUPPORTING DOCUMENTATION CHECKLIST

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Please attach copies of the following documents:

### INCOME

- Last two (2) years federal and state tax returns, including all schedules and statements
- Most recent W2
- Most recent pay stub

### LIQUID ASSETS

#### Most recent account statements, not older than 90 days

- Checking
- Savings
- Brokerage/Trust/Custody
- Mutual Funds
- IRA/401(k)/Pension
- Other: \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

### NOTES, LOANS & LINES OF CREDIT

#### Most recent account statements, not older than 90 days

- Mortgage on Primary Residence
- Home Equity Line of Credit on Primary Residence
- Mortgages on Other Real Estate
- Notes and Lines from Banks
- Automobile Loans & Leases
- Consumer Loans and Credit Cards
- Other: \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

### OTHER INCOME & OBLIGATIONS

- If you wish us to consider other income, please submit copies of documentation to support such income.
- If you are required to make alimony or child support payments, please include a copy of the appropriate section of the divorce decree or separation agreement

### OTHER DOCUMENTS REQUESTED BY YOUR BANKER

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

## Demographic Information Addendum.

This section asks about your ethnicity, sex, and race.

### Demographic Information of Borrower

**The purpose of collecting this information** is to help ensure that all applicants are treated fairly and that the housing needs of communities and neighborhoods are being fulfilled. For residential mortgage lending, federal law requires that we ask applicants for their demographic information (ethnicity, sex, and race) in order to monitor our compliance with equal credit opportunity, fair housing, and home mortgage disclosure laws. You are not required to provide this information, but are encouraged to do so. **The law provides that we may not discriminate** on the basis of this information, or on whether you choose to provide it. However, if you choose not to provide the information and you have made this application in person, federal regulations require us to note your ethnicity, sex, and race on the basis of visual observation or surname. The law also provides that we may not discriminate on the basis of age or marital status information you provide in this application.

**Instructions:** You may select one or more "Hispanic or Latino" origins and one or more designations for "Race." If you do not wish to provide some or all of this information, select the applicable check box.

#### Ethnicity

- Hispanic or Latino
- Mexican     Puerto Rican     Cuban
- Other Hispanic or Latino – *Enter origin:* \_\_\_\_\_

*Examples: Argentinean, Colombian, Dominican, Nicaraguan, Salvadoran, Spaniard, etc.*

- Not Hispanic or Latino
- I do not wish to provide this information

#### Sex

- Female
- Male
- I do not wish to provide this information

#### Race

- American Indian or Alaska Native – *Enter name of enrolled or principal tribe:* \_\_\_\_\_
- Asian
- Asian Indian     Chinese     Filipino
- Japanese     Korean     Vietnamese
- Other Asian – *Enter race:* \_\_\_\_\_
- Examples: Hmong, Laotian, Thai, Pakistani, Cambodian, etc.*

- Black or African American
- Native Hawaiian or Other Pacific Islander
- Native Hawaiian     Guamanian or Chamorro     Samoan
- Other Pacific Islander – *Enter race:* \_\_\_\_\_

*Examples: Fijian, Tongan, etc.*

- White
- I do not wish to provide this information

#### To Be Completed by Financial Institution (for application taken in person):

- Was the ethnicity of the Borrower collected on the basis of visual observation or surname?     NO     YES
- Was the sex of the Borrower collected on the basis of visual observation or surname?     NO     YES
- Was the race of the Borrower collected on the basis of visual observation or surname?     NO     YES

#### The Demographic Information was provided through:

- Face-to-Face Interview (includes Electronic Media w/ Video Component)     Telephone Interview     Fax or Mail     Email or Internet

#### Borrower Name: \_\_\_\_\_