

COMMUNITY FUTURES DEVELOPMENT CORPORATION OF THE SUNSHINE COAST

PERSONAL FINANCIAL STATEMENT

CLIENT INFORMATION		
Name	Date of Birth	Social Insurance Number
Address		
Phone	Residence <input type="checkbox"/> Own <input type="checkbox"/> Rent <input type="checkbox"/> Other	How long at present address? _____ Years _____ Months
Occupation	Employer	How long with current employer? _____ Years _____ Months
Voluntary Disclosure <input type="checkbox"/> Female <input type="checkbox"/> Indigenous <input type="checkbox"/> Youth (under 30) <input type="checkbox"/> Living with a disability <i>We collect this information anonymously and are asked to include totals in these categories to our federal funders.</i>		
Spouse's Name*	Date of Birth	Social Insurance Number
Spouse's Phone	Spouse's Employer	How long with current employer? _____ Years _____ Months
<i>*Under Federal and Provincial law, your spouse may have a legal interest/obligation in your business dealings and may also have an interest in your personal assets.</i>		

GENERAL INFORMATION	
Have you ever had an asset repossessed? <input type="checkbox"/> Yes <input type="checkbox"/> No	Have you ever declared bankruptcy? <input type="checkbox"/> Yes. Date _____ <input type="checkbox"/> No
Are you party to any claims or lawsuits? <input type="checkbox"/> Yes <input type="checkbox"/> No	Do you owe taxes prior to the current year? <input type="checkbox"/> Yes <input type="checkbox"/> No
Please provide details if you answer is YES to any of the above.	

The information collected on this financial statement is used, in conjunction with the full application, to assist Community Futures in making informed program participation and/or lending decision. Your personal information is collected and retained in accordance with the Personal Information Protection Act.

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PERSONAL FINANCIAL STATEMENT

FINANCIAL INFORMATION				
ASSETS		LIABILITIES		
Savings Account	\$		Balance Owing	Monthly Payment
Chequing Account	\$	Bank Loans	\$	
Life Insurance Value	\$	Rent		\$
Auto Make/Model/Year	\$	Mortgage(s)		\$
Auto #2 Make/Model/Year	\$	Credit cards (list):		
RRSPs	\$	1.	\$	\$
Stocks & Bonds Total Value (itemize in Schedule A page 3)	\$	2.	\$	\$
Real Estate Total Value (itemize in Schedule B page 3)	\$	3.	\$	\$
Other Assets Total Value	\$	Other obligations (list):		
TOTAL ASSETS (A)	\$		\$	\$
			\$	\$
			\$	\$
		TOTAL MONTHLY PAYMENTS		
		TOTAL LIABILITIES (B)	\$	
		TOTAL NET WORTH (A) – (B) = \$		

INCOME SOURCES		SUNDRY PERSONAL OBLIGATIONS	
Your Gross Monthly Income	\$	Are you providing your personal support for obligations not listed (i.e. cosigner, endorser, guarantor)?	
Spouse's Gross Monthly Income	\$	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Net Monthly rental Income	\$	If yes, please provide details	
Other Income	\$		
TOTAL MONTHLY INCOME	\$		

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SCHEDULE A – STOCKS AND BONDS					
Quality	Description	Where Quoted	Market Value	Pledged as Collateral	
			\$	Yes	No

SCHEDULE B – REAL ESTATE OWNED							
	Type of Property	Present Market Value	Amount of Mortgage Liens	Monthly Mortgage Payments	Gross Monthly Rent Income	Monthly Tax, Insur, Maint, etc.	Net Monthly Rental Income
Property Address:							
Name of Mortgage Holder(s):	First Mortgage:			Second Mortgage:			
Percentage Ownership:	Month/Year Acquired:			Purchase Price:			
Property Address:							
Name of Mortgage Holder(s):	First Mortgage:	Second Mortgage:					
Percentage Ownership:	Month/Year Acquired:	Purchase Price:					

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I hereby authorize Community Futures Development Corporation of the Sunshine Coast (CFDC-SC) to obtain credit information about myself as required now and throughout the term of my/our dealings with CFDC-SC. I hereby affirm that the information and representations submitted in connection with this application are true and correct to the best of my/our knowledge and that neither myself, the co-applicant nor the officers of the company are involved in any litigation which has not been disclosed herein.

I/we consent(s) to the CFDC-SC making any inquiries it deems necessary to reach a decision on this application, and consent(s) to the disclosure at any time of any credit information about me/us to any credit reporting agency or to anyone with whom I/we have financial dealings.

Date _____

Signature _____

Signature _____