

VIRGINIA CREDIT UNION
Instruction for financial statement

If you are applying for unsecured credit that will result in your total unsecured debt with Virginia Credit Union exceeding \$35,000, please be sure to complete this financial statement and return to Virginia Credit Union.

If you have any questions about how to complete this form, please call Member Services at (804) 328-6800 or (800) 285-6609 for assistance.

Please return to:

Virginia Credit Union
P.O. Box 90010
Richmond, VA 23225-9010

Virginia Credit Union Personal Financial Statement

Member/Applicant Name		Co-Applicant Name	
Social Security #	Date of Birth	Social Security #	Date of Birth

Important: Check box "J" or "O" if assets or liabilities are held with another person. Check box "J" if the other person is co-applicant, or box "O" if the other person is someone other than co-applicant. Indicate how the asset is titled and how much you own or owe using the appropriate schedules below. Items jointly owned with person(s) other than co-applicant may not be counted in determining your individual net worth, depending upon how the asset is titled. Personal household items, ownership in closely held businesses, or stock not publicly traded are not considered by VACU in determining you individual net worth. Use an additional sheet if necessary.

Assets	Amount/Value	J	O
Total Deposits at VACU			
Total Deposits Other (list below on Sch. 1)			
Auto (describe)			
Auto (describe)			
Total Stocks & Bonds (list below on Sch. 2)			
Residence (list below on Sch. 3)			
Other Real Estate (list below on Sch. 3)			
IRAs			
401(k) Plan or other Retirement Assets			
Other Financial Assets (describe)			
Total Assets			

Liabilities	Amount	J	O
Name of Creditor ↓			
Unsecured Loan			
Secured Loan			
Secured Loan			
Mortgage			
2nd Mortgage			
Credit Card			
Credit Card			
Retail & Other			
Retail & Other			
Total Liabilities			
NET WORTH (Assets minus Liabilities)			

Schedule I — Cash on Deposit (Checking, Savings, Certificates)

Name of Depository	Type of Account	J	O	Account Number	Balance
					\$
					\$
					\$
Total					\$

Schedule 2 — Publicly Traded Stocks and Bonds

Description	Titled in Name of	# Shares	Price Per Share	Date of Valuation	Total Value
			\$		\$
			\$		\$
			\$		\$
Total					\$

Schedule 3 — Real Estate

Description & Location (include Residence)	Titled in Name of	Purchase Date	Purchase Price	Current Value	Mortgage Bal.	Monthly Pymt.
			\$	\$	\$	\$
			\$	\$	\$	\$
			\$	\$	\$	\$

Applicant: Do you have a will? Yes No If yes, name of executor of your estate _____

Co-Applicant: Do you have a will? Yes No If yes, name of executor of your estate _____

Applicant: Amount of life insurance \$ _____ Name of Beneficiary _____

Co-Applicant: Amount of life insurance \$ _____ Name of Beneficiary _____

Does either applicant have any contingent liabilities? Yes No If yes, amount \$ _____ Explain on a separate piece of paper.

Has either applicant ever obtained credit under any other name? Yes No If yes, in what name(s) _____

You promise that everything you have stated in this personal financial statement is correct and complete.

_____	_____	_____	_____	_____
Member/Applicant Signature	Member #	Date	Co-Applicant Signature	Date