



## PERSONAL FINANCIAL STATEMENT

FIRST NAME:	MIDDLE NAME(S):	LAST NAME(S):
<input type="text"/>	<input type="text"/>	<input type="text"/>

ARE YOU KNOWN BY ANY OTHER NAMES:	SIN	BIRTH DATE:	OCCUPATION:
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

ADDRESS:	APT/UNIT #:	CITY:
<input type="text"/>	<input type="text"/>	<input type="text"/>

PROVINCE:	POSTAL CODE:	AT ADDRESS SINCE:
<input type="text"/>	<input type="text"/>	<input type="text"/>

### Previous address if less than one year

ADDRESS:	APT/UNIT #:	CITY:
<input type="text"/>	<input type="text"/>	<input type="text"/>

PROVINCE:	POSTAL CODE:	AT ADDRESS SINCE:
<input type="text"/>	<input type="text"/>	<input type="text"/>

RESIDENCE PHONE NUMBER:	CELL:	EMAIL:
<input type="text"/>	<input type="text"/>	<input type="text"/>

Your home:  Own  Rent  Lease  other if owned, is your home a  House  Condo  
Owned by:  Self  Spouse  with Spouse  Other: \_\_\_\_\_

Please provide a copy of your driver's license or government photo ID.

## PERSONAL NET WORTH

### Assets

Cash – bank accounts	\$
Business interests	\$
Certificates of deposit	\$
Securities – stocks / bonds / mutual funds	\$
Vehicle(s)	\$
Notes & contracts receivable	\$
Life insurance (cash surrender value)	\$
Personal Property (autos, jewellery, etc.)	\$
Retirement Funds	\$
Real estate (describe below)	\$
Other assets (specify)	\$
<b>Total Assets</b>	<b>\$</b>

### Liabilities

Credit Cards	\$
Notes payable (describe below)	\$
Taxes payable	\$
Property mortgages (describe)	\$
Car Lease(s)	\$
Bills payable	\$
Other liabilities (specify)	\$
<b>Total Liabilities</b>	<b>\$</b>
<b>Net Worth</b>	<b>\$</b>

CONTINGENT LIABILITIES:		Have you provided guarantees for other businesses, or other persons (family members, etc.)?	
TYPE		FINANCIAL INSTITUTION	AMOUNT
Guarantees	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Co-signed Notes	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Collateral Mortgages	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Other	<input type="checkbox"/> Yes <input type="checkbox"/> No		

**REAL ESTATE**

DESCRIPTION / LOCATION	AMOUNT OWING (MRTG)	ORIGINAL COST	PURCHASE DATE	MARKET VALUE
	\$	\$		\$
<b>Total</b>	\$			\$

**NOTES PAYABLE**

NAME OF CREDITOR	ORIGINAL AMOUNT	MONTHLY PAYMENT	INTEREST RATE	SECURED BY LIEN	AMOUNT OWING
	\$	\$			\$
					\$
<b>Total</b>		\$			

Are you now or have you been involved in any litigation?  No  Yes Date: \_\_\_\_\_

If yes, explain: \_\_\_\_\_

Have you ever been bankrupt?  No  Yes

Are there any other important facts or information not disclosed in this personal financial statement that might in any way affect your credit which you believe or know to be relevant and should be considered:  No  Yes

If yes, explain: \_\_\_\_\_

**AUTHORIZATION AND CERTIFICATION**

*I hereby authorize Simplex Finance Group Canada ("SFGC") and its affiliates to use the information contained herein and to obtain from time to time credit information about myself as required now and throughout the term of my dealing with SFGC. I certify to SFGC that the information and representations submitted on this statement are true, accurate and complete. By signing below I agree to indemnify and save and hold harmless SFGC and its affiliates from any loss, liability, damage or cost that may occur due to use of information provided in this statement if above information was used and relied upon by them in good faith.*

*I have read and accept SFGC's Privacy Policy posted on their website.*

*I consent to SFGC and its affiliates sending me electronic messages with respect to the services provided by them. I understand that I may withdraw my consent at any time.*

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

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

\_\_\_\_\_  
(Print Name)