

CONFIDENTIAL PERSONAL FINANCIAL STATEMENT



Please select reporting basis:

Information accurate as of: _____
Date

Individual

Statement does not include assets owned solely by my spouse, any co-borrower, or any other person. Any joint ownership is identified as such on an itemized basis.

Joint

Statement includes information about my spouse, a proposed co-borrower, or other person who will be personally liable for my obligations to the Bank and reflects my/our proportionate interest in assets owned.

Please provide the following information. All applicable schedules must be completed for assets and/or liabilities held.

*If more space is needed to list all assets and liabilities, please use attached schedules.

BORROWER / GUARANTOR INFORMATION		CO-BORROWER / GUARANTOR INFORMATION	
Name:		Name:	
Physical Address:		Physical Address:	
Mailing Address:		Mailing Address:	
Occupation:		Occupation:	
Years at Employer:		Years at Employer:	
Business Name:		Business Name:	
Business Address:		Business Address:	
Home/Mobile Phone:		Home/Mobile Phone:	
Business Phone:		Business Phone:	
Email Address:		Email Address:	
Soc. Sec. No:		Soc. Sec. No:	
Date of Birth:		Date of Birth:	

ASSETS		LIABILITIES	
Cash on Hand and Deposits (A)		Loans against Liquid Asset Accounts (A, B)	
U.S. Government and Marketable Securities (B)		Loans against Life Insurance Policy or Retirement Accounts (C, D)	
Retirement Accounts and other Deferred Compensation (C)		Loans on Primary Residence (including HELOCs) (E)	
Cash Surrender Value of Life Insurance Policies (D)		Loans on Other Real Estate (F)	
Primary Residence (if owned) (E)		Loans on Vehicles, Boats, Machinery and/or Equipment (G)	
Other Real Estate Owned (F)		Credit Cards and other Non-Real Estate Revolving Credit Lines (L)	
Vehicles, Boats, Machinery and/or Equipment (G)		Other Debt not Included Elsewhere (M)	
Receivables Due from Others (H)			
Other Assets (I)		TOTAL LIABILITIES:	
Business Ownership Interest (not including Real Estate) (J)		NET WORTH:	
TOTAL ASSETS:		NET WORTH (Exclusive of Business Interests):	
		BUSINESS & OTHER CONTINGENT LIABILITIES (K):	

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SCHEDULE A CASH, MONEY MARKET ACCOUNTS, and CERTIFICATES OF DEPOSIT					
Held in Name of	Type of Account	Financial Institution	Balance	Pledged Asset?	Amount Pledged (if applicable)
				Yes No	
				Yes No	
				Yes No	
				Yes No	
				Yes No	
				Yes No	
				Yes No	

SCHEDULE B U.S. GOVERNMENT and MARKETABLE SECURITIES					
Held in Name of	Description of Asset	Financial Institution	Balance	Pledged Asset?	Amount Pledged (if applicable)
				Yes No	
				Yes No	
				Yes No	
				Yes No	
				Yes No	
				Yes No	

SCHEDULE C RETIREMENT ACCOUNTS and OTHER DEFERRED COMPENSATION					
Held in Name of	Type of Account	Financial Institution	Balance	Pledged Asset?	Amount Pledged (if applicable)
				Yes No	
				Yes No	
				Yes No	
				Yes No	
				Yes No	
				Yes No	

SCHEDULE D LIFE INSURANCE POLICIES						
Owner of Policy	Beneficiary	Financial Institution	Face Value (death benefit)	Cash Value*	Pledged Asset?	Amount Pledged (if applicable)
					Yes No	
					Yes No	
					Yes No	
					Yes No	
					Yes No	

*Cash Value refers to the liquid surrender value of permanent life policies that contain an investment feature. This is not applicable to all life insurance policies.

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SCHEDULE E PRIMARY RESIDENCE									
Held in Name of	Address	Purch. Year	Market Value	Lien Type	Lien Holder	Balance	Rate	Mo. Pmt.	
				Mortgage					
				Additional Liens (if applicable)	Credit Limit	Lien Holder	Balance	Rate	Mo. Pmt.
		Home Equity Loan	Home Equity Line of Credit						
		Home Equity Loan	Home Equity Line of Credit						

If you do not own your primary residence, please list monthly rent:	/ month	If you do not own your primary residence and do not pay rent, please explain:	
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SCHEDULE F OTHER REAL ESTATE OWNED											Monthly Rental Income (blank if vacant, "N/A" if not a rental)
Held in Name of	Address	Prop. Type	Purchase Year	Market Value	Own. %	Lien Holder	Balance	Rate	Mo. Pmt.		

*** If more space is needed, please use attached Additional Real Estate Schedule (PAGE 6) ***

SCHEDULE G VEHICLES, BOATS, EQUIPMENT and/or MACHINERY								
Year, Make, and Model	Value	Lien Holder	Balance	Maturity Date	Monthly Payment	Leased?		
						Yes	No	
						Yes	No	
						Yes	No	
						Yes	No	
						Yes	No	
						Yes	No	

SCHEDULE H RECEIVABLES DUE FROM OTHERS			
NOTE: Please exclude rental income from investment properties listed on Schedule F.			
Due From	Balance Due	Repayment Terms	Purpose

SCHEDULE I OTHER ASSETS	
Asset Description	Value

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SCHEDULE J BUSINESS OWNERSHIP INTERESTS (not including Real Estate)								
Business Name	Ownership in Name of	Total Valuation	% Ownership	Ownership Value	Outstanding Debt		Personal Guaranty?*	
					Yes	No	Yes	No
					Yes	No	Yes	No
					Yes	No	Yes	No
					Yes	No	Yes	No
					Yes	No	Yes	No

*** If more space is needed, please use attached Additional Business & Other Contingent Debt Schedule (PAGE 7) ***

***For any business with personally-guaranteed debt, please complete SCHEDULE K below.**

SCHEDULE K BUSINESS AND OTHER CONTINGENT DEBT							If you have no contingent debt, certify by checking here:		
*Please list any business or other indirect debt on which the individual(s) is acting as a guarantor or co-signer									
Business or Entity Name	Guarantor Name	% Guaranty	Type of Debt	Lender/Creditor	Credit Limit	Current Balance	Int. Rate	Mo. Payment	

*** If more space is needed, please use attached Additional Business & Other Contingent Debt Schedule (PAGE 7) ***

SCHEDULE L CREDIT CARDS and OTHER NON-REAL ESTATE REVOLVING CREDIT LINES						
Debt in name of	Bank or Creditor	Credit Limit	Current Balance	Interest Rate	Monthly Payment	Notes

SCHEDULE M OTHER DEBT NOT INCLUDED ELSEWHERE							
Debt in name of	Bank or Creditor	Type of Debt	Current Balance	Credit Limit	Interest Rate	Maturity Date	Monthly Payment

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INCOME INFORMATION

Please attach complete copies of most recent Income Tax Return including all Schedules and K-1s.

YEAR ENDED:	BORROWER	CO-BORROWER
Annual Base Salary:		
Bonuses and Commissions:		
Dividends and Interest:		
Net Income from Rental Properties:		
Net Income from Business Interests:		
Income from Pensions or Annuities:		
Income from Trusts:		
Income from Other Sources:		
TOTAL INCOME:		

ADDITIONAL REQUIRED INFORMATION

Are you obligated to pay alimony, child support, or separate maintenance payments?	Yes No	If "Yes", please list terms and payment details:
Are you personally liable on any leases or contracts not listed elsewhere on this form?	Yes No	If "Yes", please list terms and payment details:
Are you involved in any pending legal actions, claims, or judgments?	Yes No	If "Yes", please describe:
Have you ever declared bankruptcy?	Yes No	If "Yes", please list date:

----- CERTIFICATION -----

***** PLEASE USE INK OR DOCUSIGN ONLY *****

The information in this statement is provided for the purpose of obtaining or maintaining credit with Virginia National Bank on behalf of the undersigned, or on behalf of others for which the undersigned may be severally or jointly obligated to the Bank, or who execute a guaranty or provide collateral to the Bank. Each undersigned understands the Bank is relying on the information provided herein (including attached schedules) in deciding to grant or continue credit to me/us, and certifies, represents and warrants that the information provided is true and complete and that the Bank may consider this statement as continuing to be true and correct until a written notice of change is given to it by me/us. The Bank is authorized to obtain credit reports and make all inquiries it deems necessary to verify the accuracy of the statements made herein, and to determine my/our creditworthiness. The Bank is authorized to answer questions about its credit experience with me/us. I/we understand that providing false information to the Bank may constitute a serious criminal offense.

Signature of Borrower

Date

Signature of Co-Borrower

Date

FOR BANK USE ONLY

Received by:

Loan Officer Name

Date of Receipt

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ADDITIONAL REAL ESTATE SCHEDULE

Please use this schedule to report details of all real estate owned that has not been reported elsewhere on this form.

**Monthly Rental
Income (blank if
vacant, "N/A" if
not a rental)**

[illegible]

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ADDITIONAL BUSINESS OWNERSHIP SCHEDULE

Please use this schedule to report additional business ownership interest.

Business Name	Ownership in Name of	Total Valuation	% Ownership	Ownership Value	Outstanding Debt		Personal Guaranty?*	
					Yes	No	Yes	No
					Yes	No	Yes	No
					Yes	No	Yes	No
					Yes	No	Yes	No
					Yes	No	Yes	No
					Yes	No	Yes	No
					Yes	No	Yes	No
					Yes	No	Yes	No
					Yes	No	Yes	No

*For any business with personally-guaranteed debt, please complete details in schedule below.

ADDITIONAL BUSINESS & OTHER CONTINGENT DEBT SCHEDULE

Please use this schedule to report details of all contingent debt, including all business debt for which the individual is a guarantor.

[illegible]