OMB Approved No. 2900-0047 Respondent Burden 45 Minutes

							Kespo	ndent Burden 45 Minutes			
Dep:	artment of Veterans Affairs	FINAN		STATEME	NT	1. FILE NO. C-		2. LOAN NO.			
	Type or print all entries in ink. If more space is co-applicant who is not the spouse of the borrow										
	SECTION I - GENERAL INFORMATION										
3. NAME AND PRESENT ADDRESS OF BORROWER/APPLICANT (Include ZIP Code)				TELEPHONE NO	5. DATE OF BIRTH						
				AL STATUS OF B	7. SOCIAL SECURITY NO. OF BORROWER/APPLICANT						
8. NAME OF SPOUSE			9. SPOUS OF BIR	E'S DATE TH	11. AGE(S) OF DEPENDENT(S)						
	WER/APPLICANT: If you do not wish to 12B and 12C, please initial here	INITIALS	complete Items 13B a			R/SPOUSE: If you do not 13C please initial here to be collected on a non-	INITIALS				
12B. RACE/NAT	TIONAL ORIGIN	12C. SEX	1	3B. RACE/NATIO	NAL O	RIGIN	13C. SEX				
AMERICAN INDIAN ALASKA NATIVE HISPANIC BLACK (Not Hispanic)				AMERICAN IN ALASKA NAT	IVE	HISPANIC	spanic)				
ASIAN PA ISLANDEF	CIFIC WHITE (Not Hispanic)			ASIAN PACIF	-	WHITE (Not His	TE (Not Hispanic)				
BORROWER	14. PLEASE CHECK THE APPROPRIATE BOX(ES). IF ONE OR MORE ARE CHECKED, THIS CREDIT STATEMENT MUST INCLUDE INFORMATION CONCERNING THE BORROWER/APPLICANT'S SPOUSE (OR FORMER SPOUSE IF BOX "D" IS CHECKED). IF NO BOXES ARE CHECKED, NO INFORMATION CONCERNING THE SPOUSE NEED BE FURNISHED.										
A. THE SPOUSE IS OR WILL BE JOINTLY OBLIGATED WITH THE C. THE BORROWER/APPLICANT IS MARRIED AND THE PROPERTY SECURING THE LOAN IS LOCATED IN A COMMUNITY PROPERTY STATE.											
B. THE BORROWER/APPLICANT IS RELYING ON THE SPOUSE'S       D. THE BORROWER/APPLICANT IS RELYING ON ALIMONY, CHILD SUPPORT, OR         INCOME AS A BASIS FOR REPAYMENT OF THE LOAN.       D. THE BORROWER/APPLICANT IS RELYING ON ALIMONY, CHILD SUPPORT, OR         SEPARATE MAINTENANCE PAYMENTS FROM A SPOUSE OR FORMER SPOUSE       A BASIS FOR REPAYMENT OF THE LOAN.											
	SECTION II -	EMPLO	YMENT	AND FINAN	CIAI	L STATUS					
1	5. COMPLETE RECORD OF EMPLOYMEN	IT FOR YC	DURSELF	AND SPOUSE	(Start	with present position and	work be	ack 2 years)			
	A. NAME AND ADDRESS OF EMPLOYER		B. DATES ( ROM	Month, year)	_	C. KIND OF JOB (Mechanic, stenographer, )	etc.)	D. WORK TELEPHONE NO.			
	(1)										
BORROWER /APPLICANT				PRESENT TIME							
	(2)										
SPOUSE	(1)										
				PRESENT TIME							
	(2)										

<b>16. MONTHLY INCOME</b> Include income from		A. GROSS SALARY		BORROWER/ APPLICANT		SPOUSE			C. OTHER (Specify)		BORROWER/ APPLICANT			SPOUSE	
business or property after deduction of expenses. Disclosure of		(Before payroll deductions)		\$		\$					\$		\$	\$	
and n	support, alimony naintenance ne is optional)		SION OR NSATION	\$		D. TOTAL MONTHLY \$ INCOME \$				\$					
incon	17. ASSETS														
A. CASH IN BANK (Checking and savings accounts, building and loan accounts, etc.)							F. SAVING BONDS(Current value)					\$			
B. CA	ASH ON HAND				G.			G. STC	G. STOCKS AND OTHER BONDS (Current value)						
C. FURNITURE AND HOUSEHOLD GOODS (Resale value)					H. REAL E			AL ESTATE OWNED(Resale value)							
	D. AUTO	MOBILES ( <i>I</i>	Resale value	?)	_	I. OTHER ASSETS (Itemize)									
	MAKE	YEAR		MODEL											
					_	<u> </u>									
E. TR	AILERS, BOATS, C	AMPERS(	Resale value	2)						J. TOT	AL ASSE	TS	\$		
					-	18.	DEBTS	i							
NOTE: DETAILS FOR INSTALLMENT CONTRACTS AND OTHER DEBTS (Show here ALL debts which you are required to pay in regular monthly installments, such as car, television, washing machine, payments to dealers, banks, finance companies, repayment of money borrowed for any purpose, doctor bills, hospital bills, etc. Include any alimony, child support, or separate maintenance obligations you are required to pay. If additional space is needed, use Section VI, or attach separate sheet. Do not include living expenses. If repayment of a debt is not on a monthly basis, write "0" in Column E and describe arrangements to repay in "Remarks")															
	A. NA		DDRESS OF	=	B. DATE AND PURPOSE OF DEBT		C. ORIGINAL		D. UNPAID		E. AMOUNT		F. AMOUNT		
ITEM CREDITOR CREDITOR (Include ZIP Code) OF DEBT C. ONGIVAL D. UNF MO. (Include ZIP Code) OF DEBT D. UNF								PAST DUE (If any)							
		Include 211	coucy		ij	f available)	)							(If any)	
(1)										\$		\$		\$	
(2)															
(3)															
			-					\$		\$		\$		\$	
	SECTION III - CREDIT REFERENCES AND OTHER FINANCIAL INFORMATION														
		19. N		ADDRESS O	F FIRM	S OR BAI	NKS W	ITH WI	HOM YOU H	HAVE DO	ONE BUS	INESS			
A.							В.								
С.							D.								
20. IF YOU ARE RENTING PREMISES YOU NOW OCCUPY, COMPLETE A, B, AND C															
A. MC	ONTHLY RENTAL		B. UT	FILITIES INCLUD	ED?		C. NAM	ME AND	ADDRESS (	OF PERSO	ON OR FIF	RM RENTAL	PAID T	0	
\$				YES 🗌 NO											
21A. HAVE YOU EVER BEEN ADJUDICATED BANKRUPT?				ATED B/	ANKRUPT	22A. H	22A. HAVE YOU HAD A GI LOAN? 22B. NAME OF VA OFFICE WH LOAN WAS PROCESSED								
$ \qquad \qquad$							_ Y	ES		"Yes", con n 22B)	nplete				

SECTION IV - REAL ESTATE OWNED									
(Show ALL real estate owned. Use this sheet to provide information for one property. If you own more that one property use separate blank sheets to provide the same items of information for each of your other properties.)									
23. ADDRESS OF PROPERTY (Number, street, city, county, State)	24. PURCHASE PRICE		25. CURRENT MARKET VALUE OF PROPERTY						
	\$		\$						
26. NAME AND ADDRESS OF MORTGAGEE (If mortgaged)	27. ORIGINAL AMOUNT OF M	ORTGAGE	28. UNPAID	BALANCE					
	\$		\$						
29. FREQUENCY OF MORTGAGE PAYMENTS (If payment is not by regular amortization plan, explain in Section VI, "Remarks")	30. AMOUNT OF MORTGAGE PAYMENT	31. STATUS OF L	.OAN(Check)	32. AMOUNT OF DELINQUENCY (If any)					
	\$		т \$						
33. OTHER LIENS AGAINST PROPERTY, IF ANY	34. DO YOU OCCUPY THE PROPERTY?								
\$	YES NO								
35. IF PROPERTY IS RENTED, WHAT ARE THE RENTAL TERMS?	36. AMOUNT OF AVERAGE M IN EXCESS OF OPERATIN	ONTHLY INCOME	YOU RECEIVE	FROM THIS PROPERTY					
\$ PER	\$								
	- ADDITIONAL DATA								
37. NAME AND ADDRESS OF NEAREST RELATIVE NOT LIVING WITH YOU	(Including telephone number if a	vailable)							
SECTIO	ON VI - REMARKS								
38. USE THIS SPACE AND ADDITIONAL SHEETS IF NECESSARY TO SUPP		ORMATION AND T		YOUR ANSWER TO					
PREVIOUS ITEMS. INDICATE ITEM NUMBER TO WHICH YOUR COMME	ENTS APPLY.								
SECTION VII - CERTIFICATIONS I (WE) AFFIRM THAT the information contained herein is true, correct, and complete to the best of my (our) knowledge and belief.									
1 (WE) AFFIRM THAT the information contained herein is true, co 39A. SIGNATURE OF BORROWER/APPLICANT 39B. DATE	40A. SIGNATURE OF SF		wiedge and	40B. DATE					
395. ORIVATORE OF BORROWERVAFFEIGAINT 395. DATE	40A. SIGNATURE OF SP	UUUL							
PENALTY: The law provides severe penalties which include fine or imprisonment, or both, for the willful submission of a statement or evidence of a metazial fact knowing it to be folce.									
material fact, knowing it to be false.									

**Privacy Act Notice:** VA will not disclose information collected on this form to any source other than what has been authorized under the Privacy Act of 1974 or Title 38, Code of Federal Regulations 1.576 for routine uses (i.e., to service your loan and to evaluate your application for release of liability and, if applicable, substitution of entitlement) as identified in the VA system of records, 55VA26, Loan Guaranty Home, Condominium and Manufactured Home Loan Applicant Records, Specially Adapted Housing Applicant Records, and Vendee Loan Applicant Records - VA, and published in the Federal Register. Your obligation to respond is required to obtain or retain benefits. Giving us your SSN account information is voluntary. Refusal to provide your SSN by itself will not result in the denial of benefits. VA will not deny an individual benefits for refusing to provide his or her SSN unless the disclosure of the SSN is required by a Federal Statute of law in effect prior to January 1, 1975, and still in effect.

**Respondent Burden:** We need this information to service your loan and to evaluate your application for release of liability and, if applicable, substitution of entitlement. Title 38, United States Code, allows us to ask for this information. We estimate that you will need an average of 45 minutes to review the instructions, find the information, and complete this form. VA cannot conduct or sponsor a collection of information unless a valid OMB control number is displayed. You are not required to respond to a collection of information if this number is not displayed. Valid OMB control numbers can be located on the OMB Internet Page at <a href="http://www.whitehouse.gov/omb/library/OMBINV.VA.EPA.html#VA">http://www.whitehouse.gov/omb/library/OMBINV.VA.EPA.html#VA</a>. If desired, you can call 1-800-827-1000 to get information on where to send comments or suggestions about this form.

## NOTICE TO APPLICANTS

This is notice to you as required by the Right to Financial Privacy Act of 1978 that the Department of Veterans Affairs Loan Guaranty Service or Division has a right of access to financial records held by a financial institution in connection with the consideration or administration of assistance to you. Financial records involving your transaction will be available to the Department of Veterans Affairs Loan Guaranty Service or Division without further notice or authorization but will not be disclosed or released to another Government Agency or Department without your consent except as required or permitted by law.

## VOLUNTARY INFORMATION FOR GOVERNMENT MONITORING PURPOSES

The information in Items 12A, 12B, 12C, and 13A, 13B, and 13C is requested by the Federal Government to monitor compliance by VA as a lender with Equal Credit Opportunity and Fair Housing laws. The law provides that a lender may neither discriminate on the basis of this information nor on whether or not it is furnished.