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|--|-------------------------|----------------------|------|----------|----------------|----------------------|----------------|
| Personal Financial Statement | | | | | | Date: | |
| Surname | | Given Names | | | SIN | | Date of Birth |
| Spouse's Surname | | Spouse's Given Names | | | No. Dependents | Home Phone | Business phone |
| Home Address | | | City | Province | Postal Code | How long Yrs. Mo. | |
| <input type="checkbox"/> Own <input type="checkbox"/> Rent | Mo. Rent/Mtge/Hyp \$ | Previous Address | | | | How long Yrs. Mo. | |

| | | | | | | |
|---------------------|--|----------------------|--------------------------------|--|----------|--|
| Present Employer | | | Cash Flow Analysis | | | |
| Occupation | | How Long Yrs. Mo. | Present Annual Salary or Wages | | \$ _____ | |
| Previous Employer | | How Long Yrs. Mo. | Other Income | | \$ _____ | |
| Spouse's Employer | | How Long Yrs. Mo. | Spouse's Annual Income | | \$ _____ | |
| Occupation/Position | | | Total Annual Income (Gross) | | \$ _____ | |

Financial Statement as at _____, 20__

| Assets | Amount | Liabilities | | |
|--|--------|--|--------------|--------------|
| Cash, Investments, Other Liquid Assets, Auto, Real Estate, Etc.: | | Loans, Mortgages/Hypotheses, Credit Cards, | Monthly pymt | Amount owing |
| | | All other Debts and to Whom owing: | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| Real Estate | | Mortgages/Hypotheses | Renewal Date | |
| 1. | | 1. | | |
| 2. | | 2. | | |
| | | 3. | | |
| | | Total Debts (B) | | |
| | | Equity (A - B = C) | | |
| Total Assets (A) | | Total Debts + Equity | | |

The Applicant(s) affirm that all information given above is true and complete. The Applicant(s) consent to CAMEX (Dealer) obtaining from any Credit Reporting Agency or Credit Grantor such information as the Dealer may require at any time in the connection with the Credit hereby applied for and consents to the disclosure or exchange at any time of any information concerning the Applicant(s) to any Credit Reporting Agency or Credit Grantor with which the Dealer deals.

Date _____ Print Name _____ Signature of Applicant _____