

Personal Financial Statement					
NAME: LAST	FIRST	INITIAL	DATE OF BIRTH	SOCIAL INSURANCE NUMBER	
ADDRESS (# STREET, APT. #)	CITY	PROV.	POSTAL CODE	HOW LONG	TELEPHONE #
PREVIOUS ADDRESS (IF LESS THAN 3 YEARS)					HOW LONG?
EMPLOYER	OCCUPATION	HOW LONG	TELEPHONE #	GROSS MONTHLY INCOME	
PREVIOUS EMPLOYER (IF LESS THAN 3 YEARS)					HOW LONG?
CO-APPLICANT					
NAME: LAST	FIRST	INITIAL	DATE OF BIRTH	SOCIAL INSURANCE NUMBER	
ADDRESS (# STREET, APT. #)	CITY	PROV.	POSTAL CODE	HOW LONG	TELEPHONE #
PREVIOUS ADDRESS (IF LESS THAN 3 YEARS)					HOW LONG?
EMPLOYER	OCCUPATION	HOW LONG	TELEPHONE #	GROSS MONTHLY INCOME	
PREVIOUS EMPLOYER (IF LESS THAN 3 YEARS)					HOW LONG?

Financial Statement as at _____:					
ASSETS:	VALUE (\$)	LIABILITIES:	LIMIT	BA	MO. PYMT.
DEPOSITS		CREDIT CARDS			
INVESTMENTS					
		BANK LOANS			
AUTOS					
		CONTINGENT LIABILITIES			
PROPERTY		MORTGAGES			
TOTALS	\$ -				#

CONSENT TO COLLECTION, USE & DISCLOSURE OF PERSONAL INFORMATION.

The user confirms that the applicant, any principal and /or any guarantor have consented to:
The collection, use and disclosure of personal information for the purpose of credit adjudication by the lessor and its assignees to provide leasing services; and the Lessor and its funders obtaining information from credit reporting agencies and listed references in connection with the application

The undersigned hereby affirms that the information provided is true and correct and that no information has been knowingly or willingly withheld. We authorize Direct Funding Corporation to obtain personal information as permitted by law, to share information and credit history with other credit grantors, credit bureau, suppliers of services and mortgage insurers, to use our social insurance numbers for the sole purpose of obtaining and sharing credit information. In addition, we authorize Direct Funding Corporation or its assigns, where applicable, to obtain written documentation and/or contact our employers, as a means of verifying our employment and income status.

(See attached Schedule 'A', 'B' and 'C' for additional information.)

I/we hereby declare that I/we have no unsatisfied judgements, repossessions, declared or assignments in bankruptcies within the last 10 years. (If so, please provide a complete explanation on a attached schedule.)

Dated the _____ day of _____, 20____, at _____.

APPLICANT

APPLICANT

SCHEDULE "A" - Additional Assets.

DESCRIPTION	VALUE (\$)

SCHEDULE "B" - Additional Liabilities

DESCRIPTION	AMOUNT (\$)

SCHEDULE "C" - Contingent Liabilites

(ie., Personal Guarantees given on loans, lines of credit, etc., given to support another parties borrowings)

DESCRIPTION (TO WHOM / PURPOSE /AMOUNT)

ADDITIONAL COMMENTS / EXPLANATIONS:
