



community first
credit union

COLLECTIONS DEPARTMENT
REPLY PAID 98
LIDCOMBE NSW 1825
Ph: 1300 13 22 77 Fax: 02 9735 1631

STATEMENT OF FINANCIAL POSITION

| MEMBER NUMBER + ACCOUNT TYPE (e.g. L81) | Member 1 | Member 2 | Member 3 | |
|--|-----------------------|-----------------------|-----------------------|----|
| NAMES | | | | |
| RESIDENTIAL ADDRESS | | | | |
| RESIDENTIAL STATUS (Buying/ Renting/ Boarding) | | | | |
| POSTAL ADDRESS (If different to above) | | | | |
| TELEPHONE | H () | H () | H () | |
| | W () | W () | W () | |
| | M | M | M | |
| No of Dependants (specify their ages) | | | | |
| Occupation | | | | |
| Employer | | | | |
| Address of Employer | | | | |
| Length of Service | | | | |
| Weekly income from employer | Gross \$ _____ | Gross \$ _____ | Gross \$ _____ | |
| | Nett \$ _____ | Nett \$ _____ | Nett \$ _____ | |
| Other weekly income (show details – Jobstart, Family allowance, rent etc) | Source _____ | Source _____ | Source _____ | |
| | \$ _____ | \$ _____ | \$ _____ | |
| Weekly expenses | Rent/Board | \$ | Child Support | \$ |
| | Council / Water rates | \$ | Child Care | \$ |
| | Gas / Electricity | \$ | Health Care | \$ |
| | Home Telephone | \$ | Travel/Petrol | \$ |
| | Mobile Telephone | \$ | Education | \$ |
| | Food | \$ | Other | \$ |
| | Clothing | \$ | Other | \$ |
| | Clothing | \$ | Other | \$ |
| | Insurance | \$ | TOTAL | \$ |

| ASSETS | VALUE | LIABILITIES | AMOUNT OWING | MONTHLY REPAYMENT |
|---|----------------------------|---|----------------------|----------------------|
| Real Estate (House/land/unit & address of property) | \$ | Mortgage (Name of lender) | \$ | \$ |
| Bank/Credit Union Account(s) Bank /Credit Union details | \$ \$ \$ | Personal Unsecured Loan/Consumer Credit Lender/type of loan – personal loan, hire purchase etc | \$ \$ \$ | \$ \$ \$ |
| Investments Type of investment(s) – shares, debentures etc | \$ \$ \$ | Credit / Store Card(s) Show issuer eg American Express, Myer | \$ \$ \$ | \$ \$ \$ |
| Motor vehicle(s) Year Make and model | \$ \$ | Finance owing on motor vehicle(s) Show name of lender and type of loan eg Esanda hire purchase | \$ \$ | \$ \$ |
| Other Assets Boat Caravan Motorbike Furniture & Personal Other..... | \$ \$ \$ \$ \$ | Other Liabilities Taxation Privacy/family loans Legal (eg guarantee) Other (please give details) | \$ \$ \$ \$ | \$ \$ \$ \$ |
| Total Assets | \$ | Total Liabilities | \$ | \$ |

OFFICE USE ONLY

Current status of our account(s): Up to date/ overdue: _____
 (state for each account) Date Loan Funded: _____
 Days Overdue & Arrears: _____
 Balance outstanding: _____
 Currently monthly repayment: _____
 Contract number : _____
 Next due date: _____

| | | | |
|------------------------|-----------|--------------------------|-----------|
| Total Income | \$ | Total Assets | \$ |
| Total Expenses | \$ | Total Liabilities | \$ |
| Surplus/Deficit | \$ | Surplus/Deficit | \$ |

| Referred by (officer) | Recommendation | Signature |
|-----------------------|--|-----------|
| | Term _____ months Interest rate _____ % Monthly repayment \$ _____ | |

| Assessed by | Decision | Date | Signature |
|---|-------------------|------|-----------|
| Jemma Georgitsis Collections Manager | Approve / Decline | / / | |

Terms of Variation

| Current | | New | |
|---------------|--------|---------------|--------|
| Term | months | Term | months |
| Interest rate | % | Interest rate | % |
| Repayment | \$ | Repayment | \$ |
| | | Commencing | / / |