

Contract #



PERSONAL FINANCIAL STATEMENT

Mr/Mrs/Miss/Title

Life Assured (Last name, First name, Middle name)

Mr/Mrs/Miss/Title

Applicant (Last name, First name, Middle name)

Dependents*	Age	Relationship

Financial Worth
Real Estate

Location/Address	Residence	Estimated Current Worth*
	<input type="checkbox"/> Rented <input type="checkbox"/> Owned	Php
	<input type="checkbox"/> Rented <input type="checkbox"/> Owned	
	<input type="checkbox"/> Rented <input type="checkbox"/> Owned	
Total Worth of Real Estate:		Php

* Write on the space provided: MR - Monthly Rent; MP - Market Price; PP - Purchase Price; MA - Mortgage Amount.
Securities (e.g. bonds, cash items, stocks)

Securities (Type and Description)	Estimated Current Worth
	Php
Total Worth of Securities:	Php

Approximate Income

Income	Estimated Income Current Yr.	Estimated Income Last Yr.
Net Earned Income		
Net Investment Income		
Source Earned income		
Total Income Earned:	Php	Php

Other Assets (e.g. model of cars owned)

Description of Properties	Estimated Current Worth
	Php
Total Worth of Properties:	Php

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

I declare that the answers given above are true and correct to the best of my knowledge and belief, and I agree that this questionnaire shall form a part of my application for assurance.

Signature over Printed Name of WITNESS

Signature over Printed Name of LIFE INSURED

Signature over Printed Name of WITNESS

Signature over Printed Name of APPLICANT