

Personal Financial Statement





Find us online at: www.clarencecampeau.com www.smedco.ca

Name of Applicant:					
Contact Information					
Mailing Address:					
City/Town:	Postal Code:				
Business Phone:	How long at Address:				
Cell Phone:	Principal Residence: Rent Own Other				
Email:	Kent Own Other				
Personal Information Date of Birth:	Métis Citizenship Number (if applicable):				
Year / Month / Day	Social Insurance Number: Saskatchewan Driver's License Number:				
Saskatchewan Health Card Number:					
Employment Information Occupation: Current Employer: How long with Employer: Years/Months					
icais/ Months					

Income Taxes Last Year Filed: Do you owe any taxes prior of the current year? Yes No If yes, amount owing:	WCB Number (if applicable):				
Personal Information on Spouse: Under the laws of Canada, or the Province, your spouse may have a legal interest or oblig	gotion origina from your business dealings and				
may also have an interest in your personal assets.	gation arising it only our business dealings and				
Name: Employer & Occ	upation:				
Date of Birth: How long with e	mployer:				
Social Insurance Number: Work Phone: _					
Additional Information					
Have you, or any business that you own or have previously owned, received financial assistance from the Government of Canada (including the Métis Assistance Program). If yes, please describe.					
Are you applying to any other government programs for financial assistance for this project? If yes, please describe.					
Do you, or your business, owe money to the Government of Canada? If yes, please indicate to which department or agency and list amount(s).					
Have you already made any financial commitments for the project? If you note: Any costs for which you have made a legal commitment prior to project approvate Equity Program.					

Personal Financial Information as at ______, 20 _____

ASSETS (List & Describe)		ABILITIES t & Describe)				
Total Chequing			Balance Owing \$	Monthly Payment \$		
Total Savings		ank Loans or nes of Credit				
Vehicles Year		ortgages on Personal eal Estate Owned				
D I D I F. t. t.	M	onthly Rent				
Personal Real Estate						
Investment and Retirement Accounts	Cı	redit Cards				
	Ve	Vehicle Loan/Lease				
Other Assets (Specify)		ther Obligations pecify)				
	To	otal Liabilities (B)				
Total Assets (A)		Net Worth (A - B)				
Personal Financial Institution	n:					
Contact:						
Address:						
Phone:	Email:					
Income Sources (Income from alimony, child support, o have to be stated unless you want it con	r separate maintenance does not nsidered)	Are you providing person above (i.e. co-signer, enc alin				
Your Gross Monthly Salary						
Spouse Gross Monthly Salary		Yes	No			
Net Monthly Rental Income						
Farming/Ranching Income		If yes, please	provide details belo	w:		
Other Income (Specify)		,, p				
Total Monthly Income						

How did you hear ab	oout us?					
General Information (Please provide details if y	n you answer YES to any of the	following questior	ıs)			
Have you ever had an asset repossessed?			Yes	No	If yes, year:	
Have you ever declared bankruptcy or filed a consumer proposal?			Yes	No	If yes, year:	
Are you discharged or	Are you discharged or fully performed?			Yes	No	N/A
Do you have any current collections against you?				Yes	No	If yes, amount:
Do you owe any taxes prior to the current year? (includes personal, property, or business)				Yes	No	If yes, amount:
Is any litigation or proceeding involving you or the applicant now in course of pending before any court, government boar tribunal or agency?				Yes	No	
Are you a Director or	Are you a Director or Shareholder of any Corporation?			Yes	No	
Additional Details: _						
Personal Reference (Name & Addresses of 2 F	s Relatives Not Living with App	licant Plus 1 Non-R	elative)			
Name	Mailing Address	Phone Number		Relationship		Occupation
Declaration						
The undersigned declare of my knowledge true and Development Corporation disclosure at any time of relations. I consent to the Métis Ent	that the statements made h d correct. The applicant cons n making any inquiries it dee any credit information about trepreneur Equity Program (sents to the Claren ims necessary to r i me to any credit r (MEEP) and Métis A	ce Campe each a dec eporting a Assistance	eau Devel cision on t agency or e Progran	opment Fund a this applicatior to anyone with n (MAP) sharin	and SaskMétis Economic n, and consents to the n whom I have financial g my account information
information under the Pe	roviders and/or provincial/id rsonal Information Protection purposes for the Métis Entre	on and Electronic L	Document	s Act (PIF	PEDA) and/or tl	
Consent and Authorizat	ion					
consent and direct that y	oviders and/or all provincial, ou release any and all inform und and/or SaskMétis Econd	nation which you m	ay have in	your files		
I hereby declare that I	am of Métis ancestry:	Yes	No			
Date:						
Signature of Applica	ant		/itness			