

PERSONAL FINANCIAL STATEMENT

| | | | As of , | | | | |
|--|------------------|------------------|-----------------------------------|----------------------|----------------|--------------------------|--|
| Complete this form for: (1) each proprietor, (3) each stockholder owing 10% or more of v | • • | | | | | | |
| Name: | Uting stor | | Business Pho | | anty on the lo | | |
| Residence Address: | | Residence Phone: | | | | | |
| | | | Residence Pr | ione: | | | |
| City, State & Zip Code: | | | | | | | |
| Business Name of Applicant/Borrower: | | | | | | | |
| ASSETS | - | | | | LITIES | | |
| Cash on Hand & in Banks | \$ | | | le | | \$ | |
| Savings Accounts | \$ | | Notes Payable to Banks and Others | | | \$ | |
| IRA or Other Retirement Account | \$ | | (Describe in Section 2) | | | | |
| Accounts & Notes Receivable | \$ | | Installment Account (Auto) | | | \$ | |
| Life Insurance – Cash Surrender Value Only | \$ | | Monthly Payments \$ | | | | |
| (Describe in Section 8) | | | Installment Account (Other) | | | \$ | |
| Stocks and Bonds | \$ | | Monthly Payments \$ | | | | |
| (Describe in Section 3) | | | Loan on Life Insurance | | | \$ | |
| Real Estate | \$ | | Mortgages on I | Real Estate | | \$ | |
| (Describe in Section 4) | | | (Describe i | in Section 4) | | | |
| Automobile – Present Value | \$ | | Unpaid Taxes . | | | \$ | |
| Other Personal Property | \$ | | (Describe i | in Section 6) | | | |
| (Describe in Section 5) | | | Other Liabilitie | s | | \$ | |
| Other Assets | \$ | | (Describe i | in Section 7) | | | |
| (Describe in Section 5) | | | Total Liabilities | | | \$ | |
| | | | Net Worth | | | \$ | |
| Total | \$ | | Total | | \$ | | |
| SECTION 1. SOURCE OF INCOME | 1 · | | CONTINGENT | LIABILTIES | | | |
| Salary | \$ | | As Endorser o | r Co-Maker | | \$ | |
| Net Investment Income | \$ | | Legal Claims & Judgments | | | \$ | |
| Real Estate Income | \$ | | Provision for Federal Income Tax | | | \$ | |
| Other Income (Describe Below)* | \$ | | Other Special Debt | | | \$ | |
| Description of Other Income in Section 1. | • | | | | | · | |
| | | | | | | | |
| *Alimony or child support payments need no | ot be discl | osed in "Othe | r Income" unle | ess it is desired to | have such pay | ments counted | |
| toward total income | | | | | | | |
| SECTION 2. NOTES PAYBLE TO BANKS AND O | | | - | | | is statement and signed) | |
| | Driginal Current | | - | | | red or Endorsed | |
| | Balance | Balance | Amount | (monthly, etc.) | Type | of Collateral | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

| SECTION 3. STOCK AND BONDS. (Use attachments if necessary. Each attachment must be identified as a part of this statement and signed) | | | | | | | | | |
|---|-----------------------------|-------------------------|--|-------------------------------------|------------------------|--|--|--|--|
| Number of Shares | | | Market Value | Date of | | | | | |
| | | | Quotation/Exchange | Quotation/Exchange | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| SECTION 4. REAL ES | | (List each narcel senar | ately. Use attachment if neces | sary. Each attachment must he i | identified as part of | | | | |
| SECTION 4. REAL ES | TATE OWNED. | | (List each parcel separately. Use attachment if necessary. Each attachment must be identified as part of this statement and signed.) | | | | | | |
| | Proper | ty A | A Property B | | Property C | | | | |
| Type of Property | | | | | | | | | |
| | | | | | | | | | |
| Address | | | | | | | | | |
| | | | | | | | | | |
| Date Purchased | | | | | | | | | |
| Original Cost | | | | | | | | | |
| Present Market Val | ue | | | | | | | | |
| Name & Address of | of | | | | | | | | |
| Mortgage Holder | | | | | | | | | |
| Mortgage Accoun | t | | | | | | | | |
| Number | | | | | | | | | |
| Mortgage Balance | 2 | | | | | | | | |
| Amount of Paymer | nt | | | | | | | | |
| per Month/Year | | | | | | | | | |
| Status of Mortgag | e | | | | | | | | |
| SECTION 5. OTHER F | PEROSNAL PROPERTY AN | ID OTHER ASSETS. | | as security, state name and address | of lien holder, amount | | | | |
| of lien, terms of payment and if delinquent, describe delinquency) | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| SECTION 6. UNPAID TAXES. (Describe in detail, as to type, to whom payable, when due, amount, and to what property, if any, a tax lien attaches.) | | | | | | | | | |
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| SECTION 7. OTHER LIABILITIES (Describe in Detail) | | | | | | | | | |
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| | | | | | | | | | |
| SECTION 8. LIFE INSURANCE HELD (Give face amount and cash surrender value of policies – name of insurance company and beneficiaries) | | | | | | | | | |
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| | | | | | | | | | |
| I authorize the Surety/Lender to make inquires as necessary to verify the accuracy of the statements made and to determine my creditworthiness. I | | | | | | | | | |
| certify the above and the statements contained in the attachments are true and accurate as of the stated date(s). These statements are made for | | | | | | | | | |
| the purpose of their o | btaining a loan or guarante | eing a loan. | | | | | | | |
| | | | | | | | | | |
| Signature | | Date: | Social Security Num | ber: | | | | | |
| | | | | | | | | | |
| Signature | | Date: | Social Security Num | Social Security Number: | | | | | |