

# PERSONAL FINANCIAL STATEMENT

|                                                                                                                            |                 |                                            |                                                                                             |                                                           |                                           |
|----------------------------------------------------------------------------------------------------------------------------|-----------------|--------------------------------------------|---------------------------------------------------------------------------------------------|-----------------------------------------------------------|-------------------------------------------|
| Individual Name and Address                                                                                                |                 | Creditor's Name and Address                |                                                                                             | Joint Party Name and Address                              |                                           |
| <b>INDIVIDUAL INFORMATION</b>                                                                                              |                 |                                            | <b>JOINT PARTY INFORMATION</b>                                                              |                                                           |                                           |
| Occupation (or Business) _____                                                                                             |                 |                                            | Occupation (or Business) _____                                                              |                                                           |                                           |
| Primary Employer's Name _____                                                                                              |                 |                                            | Primary Employer's Name _____                                                               |                                                           |                                           |
| Employer Address _____                                                                                                     |                 |                                            | Employer Address _____                                                                      |                                                           |                                           |
| Primary Phone _____ Alt. Phone _____                                                                                       |                 |                                            | Primary Phone _____ Alt. Phone _____                                                        |                                                           |                                           |
| Date of Birth _____ Email: _____                                                                                           |                 |                                            | Date of Birth _____ Email: _____                                                            |                                                           |                                           |
| <b>ASSETS</b>                                                                                                              |                 | <i>Complete SCHEDULES first</i>            |                                                                                             | <b>LIABILITIES</b>                                        |                                           |
| Cash On Hand and in Banks                                                                                                  | Sched. A        | \$                                         | Notes Due to Banks                                                                          | Sched. A                                                  | \$                                        |
| Cash Value of Life Insurance                                                                                               | Sched. B        | \$                                         | Notes Due to Relatives and Friends                                                          | Sched. H                                                  | \$                                        |
| U.S. Gov't. Securities                                                                                                     | Sched. C        | \$                                         | Notes Due to Others                                                                         | Sched. H                                                  | \$                                        |
| Other Marketable Securities                                                                                                | Sched. C        | \$                                         | Accounts and Bills Payable                                                                  | Sched. H                                                  | \$                                        |
|                                                                                                                            |                 | \$                                         | Loans on Life Insurance Policies                                                            | Sched. B                                                  | \$                                        |
|                                                                                                                            |                 | \$                                         | Contract Accounts Payable                                                                   | Sched. H                                                  | \$                                        |
|                                                                                                                            |                 | \$                                         | Cash Rent Payable                                                                           |                                                           | \$                                        |
| TOTAL LIQUID ASSETS                                                                                                        |                 | \$                                         | Other Liabilities Due within 1 Year - Itemize                                               |                                                           | \$                                        |
| Real Estate Owned                                                                                                          | Sched. E        | \$                                         |                                                                                             |                                                           | \$                                        |
| Mortgages and Contracts Owned                                                                                              | Sched. F        | \$                                         |                                                                                             |                                                           | \$                                        |
| Notes and Accounts Receivable - current                                                                                    | Sched. D        | \$                                         |                                                                                             |                                                           | \$                                        |
| Notes and Accounts Receivable - over 90 days                                                                               | Sched. D        | \$                                         | TOTAL SHORT TERM LIABILITIES                                                                |                                                           | \$                                        |
| Notes Due From Relatives and Friends                                                                                       | Sched. D        | \$                                         | Real Estate Mortgages Payable                                                               | Sched. E                                                  | \$                                        |
| Other Securities - Not Readily Marketable                                                                                  | Sched. C        | \$                                         | Liens and Assessments Payable                                                               |                                                           | \$                                        |
| Personal Property                                                                                                          | Sched. G        | \$                                         | Other Debts - Itemize                                                                       |                                                           | \$                                        |
| IRA and Tax Deferred Accounts                                                                                              |                 | \$                                         | TOTAL LONG TERM LIABILITIES                                                                 |                                                           | \$                                        |
| Other Assets - Itemize <input type="checkbox"/> (see attached itemization)                                                 |                 | \$                                         | TOTAL LIABILITIES                                                                           |                                                           | \$                                        |
| TOTAL PRODUCTIVE ASSETS                                                                                                    |                 | \$                                         | NET WORTH (Total Assets Minus Total Liabilities)                                            |                                                           | \$                                        |
| TOTAL ASSETS                                                                                                               |                 | \$                                         | TOTAL LIABILITIES AND NET WORTH                                                             |                                                           | \$                                        |
| <b>ANNUAL INCOME</b>                                                                                                       |                 |                                            | <b>ESTIMATE OF ANNUAL EXPENSES</b>                                                          |                                                           |                                           |
| Salary, Bonuses and Commissions                                                                                            |                 | \$                                         | Income Taxes                                                                                |                                                           | \$                                        |
| Interest and Dividends                                                                                                     |                 | \$                                         | Other Taxes                                                                                 |                                                           | \$                                        |
| Rental and Lease Income (Net)                                                                                              |                 | \$                                         | Insurance Premiums                                                                          |                                                           | \$                                        |
| Alimony, child support separate maintenance income need not be disclosed unless you want it included in your total income. |                 |                                            | Mortgage Payments                                                                           |                                                           | \$                                        |
| Other Income Desc.                                                                                                         |                 | \$                                         | Rent Payable                                                                                |                                                           | \$                                        |
| Other Income Desc.                                                                                                         |                 | \$                                         | Other Expenses Desc.                                                                        |                                                           | \$                                        |
| Other Income Desc.                                                                                                         |                 | \$                                         | Other Expenses Desc.                                                                        |                                                           | \$                                        |
| TOTAL ANNUAL INCOME                                                                                                        |                 | \$                                         | TOTAL ESTIMATE OF ANNUAL EXPENSES                                                           |                                                           | \$                                        |
| <b>GENERAL INFORMATION</b>                                                                                                 |                 |                                            | <b>CONTINGENT LIABILITIES</b>                                                               |                                                           |                                           |
| Are any Assets Pledged Other Than Described on SCHEDULES <input type="checkbox"/> Yes <input type="checkbox"/> No          |                 |                                            | As Endorser, Co-maker or Guarantor <input type="checkbox"/> Yes <input type="checkbox"/> No |                                                           |                                           |
| Are You a Defendant in Any Suits or Legal Actions? <input type="checkbox"/> Yes <input type="checkbox"/> No                |                 |                                            | On Leases or Contracts <input type="checkbox"/> Yes <input type="checkbox"/> No             |                                                           |                                           |
| Indicate Date of Last Income Tax Return Filed with IRS: _____                                                              |                 |                                            | For Legal Claims <input type="checkbox"/> Yes <input type="checkbox"/> No                   |                                                           |                                           |
| Have you ever been declared Bankrupt in the last 10 years? <input type="checkbox"/> Yes <input type="checkbox"/> No        |                 |                                            | For Federal and State Income Taxes <input type="checkbox"/> Yes <input type="checkbox"/> No |                                                           |                                           |
| Are you a Partner, Member or Officer in any other venture? <input type="checkbox"/> Yes <input type="checkbox"/> No        |                 |                                            | For Other _____                                                                             |                                                           |                                           |
| <b>SCHEDULES</b>                                                                                                           |                 |                                            |                                                                                             |                                                           |                                           |
| <b>A CASH IN BANKS AND NOTES DUE TO BANKS</b>                                                                              |                 | (List all Real Estate Loans in Schedule E) |                                                                                             | <input type="checkbox"/> Additional Information Requested |                                           |
| NAME OF BANK                                                                                                               | Type of Account | Type of Ownership                          | On Deposit                                                                                  | Notes Due Banks                                           | Collateral (if Any) and Type Of Ownership |
|                                                                                                                            |                 |                                            | \$                                                                                          | \$                                                        |                                           |
|                                                                                                                            |                 |                                            | \$                                                                                          | \$                                                        |                                           |
|                                                                                                                            |                 |                                            | \$                                                                                          | \$                                                        |                                           |
|                                                                                                                            |                 |                                            | \$                                                                                          | \$                                                        |                                           |
|                                                                                                                            |                 |                                            | \$                                                                                          | \$                                                        |                                           |
|                                                                                                                            |                 | Cash On Hand                               | \$                                                                                          |                                                           |                                           |
| <input type="checkbox"/> See Attached Itemization                                                                          |                 | TOTAL                                      | \$                                                                                          | \$                                                        |                                           |

| <b>B LIFE INSURANCE (List only those Policies that you own)</b> |                |                      |                                |                                  |             |
|-----------------------------------------------------------------|----------------|----------------------|--------------------------------|----------------------------------|-------------|
| COMPANY                                                         | Face Of Policy | Cash Surrender Value | Policy Loan From Insurance Co. | Other Loans Policy As Collateral | BENEFICIARY |
|                                                                 | \$             | \$                   | \$                             |                                  |             |
|                                                                 | \$             | \$                   | \$                             |                                  |             |
|                                                                 | \$             | \$                   | \$                             |                                  |             |
| <input type="checkbox"/> See Attached Itemization         TOTAL |                |                      | \$                             | \$                               |             |

| <b>C SECURITIES OWNED (Including U.S. Gov't Bonds and all other Stocks and Bonds)</b> |                                                                          |                   |      |                             |                              |                                                       |                                |
|---------------------------------------------------------------------------------------|--------------------------------------------------------------------------|-------------------|------|-----------------------------|------------------------------|-------------------------------------------------------|--------------------------------|
| Face Value-Bonds No. Of Shares Stock                                                  | DESCRIPTION<br><small>Indicate those Not Registered in Your Name</small> | Type of Ownership | COST | Market Value U.S. Gov. Sec. | Market Value Marketable Sec. | MARKET VALUE<br><small>Not Readily Marketable</small> | Amount Pledged To Secured Loan |
|                                                                                       |                                                                          |                   | \$   | \$                          | \$                           | \$                                                    | \$                             |
|                                                                                       |                                                                          |                   | \$   | \$                          | \$                           | \$                                                    | \$                             |
|                                                                                       |                                                                          |                   | \$   | \$                          | \$                           | \$                                                    | \$                             |
|                                                                                       |                                                                          |                   | \$   | \$                          | \$                           | \$                                                    | \$                             |
|                                                                                       |                                                                          |                   | \$   | \$                          | \$                           | \$                                                    | \$                             |
| <input type="checkbox"/> See Attached Itemization         TOTAL                       |                                                                          |                   | \$   | \$                          | \$                           |                                                       |                                |

| <b>D NOTES AND ACCOUNTS RECEIVABLE (Money Payable or Owed to You Individually-Indicate % of your Ownership Interest)</b> |   |          |                 |                              |                          |                                 |                     |
|--------------------------------------------------------------------------------------------------------------------------|---|----------|-----------------|------------------------------|--------------------------|---------------------------------|---------------------|
| MAKER/DEBTOR                                                                                                             | % | When Due | Original Amount | Balance Due Current Accounts | Balance Due Over 90 Days | Bal. Due Notes Rel. and Friends | Secured by (if any) |
|                                                                                                                          |   |          | \$              | \$                           | \$                       | \$                              |                     |
|                                                                                                                          |   |          | \$              | \$                           | \$                       | \$                              |                     |
|                                                                                                                          |   |          | \$              | \$                           | \$                       | \$                              |                     |
|                                                                                                                          |   |          | \$              | \$                           | \$                       | \$                              |                     |
| <input type="checkbox"/> See Attached Itemization         TOTAL                                                          |   |          | \$              | \$                           | \$                       |                                 |                     |

| <b>E REAL ESTATE OWNED (Indicate % of your Ownership Interest)</b> |   |                          |               |               |                              |                        |                              |         |          |
|--------------------------------------------------------------------|---|--------------------------|---------------|---------------|------------------------------|------------------------|------------------------------|---------|----------|
| TITLE IN NAME OF                                                   | % | Description and Location | Date Acquired | Original Cost | Present Value of Real Estate | Amount of Ins. Carried | MORTGAGE OR CONTRACT PAYABLE |         |          |
|                                                                    |   |                          |               |               |                              |                        | Bal. Due                     | Payment | Maturity |
|                                                                    |   |                          |               | \$            | \$                           | \$                     | \$                           | \$      |          |
|                                                                    |   |                          |               | \$            | \$                           | \$                     | \$                           | \$      |          |
|                                                                    |   |                          |               | \$            | \$                           | \$                     | \$                           | \$      |          |
|                                                                    |   |                          |               | \$            | \$                           | \$                     | \$                           | \$      |          |
| <input type="checkbox"/> See Attached Itemization         TOTAL    |   |                          |               |               |                              | \$                     | TOTAL                        |         | \$       |

| <b>F MORTGAGES AND CONTRACTS OWNED (Indicate % of your Ownership Interest)</b> |      |   |       |         |                  |               |         |          |             |
|--------------------------------------------------------------------------------|------|---|-------|---------|------------------|---------------|---------|----------|-------------|
| Cont.                                                                          | Mtg. | % | MAKER |         | PROPERTY COVERED | Starting Date | Payment | Maturity | Balance Due |
|                                                                                |      |   | Name  | Address |                  |               |         |          |             |
|                                                                                |      |   |       |         |                  |               | \$      |          | \$          |
|                                                                                |      |   |       |         |                  |               | \$      |          | \$          |
|                                                                                |      |   |       |         |                  |               | \$      |          | \$          |
| <input type="checkbox"/> See Attached Itemization         TOTAL                |      |   |       |         |                  |               |         |          | \$          |

| <b>G PERSONAL PROPERTY (Indicate % of your Ownership Interest)</b> |   |               |               |             |                   |                 |  |
|--------------------------------------------------------------------|---|---------------|---------------|-------------|-------------------|-----------------|--|
| DESCRIPTION                                                        | % | Date When New | Cost When New | Value Today | LOANS ON PROPERTY |                 |  |
|                                                                    |   |               |               |             | Balance Due       | To Whom Payable |  |
|                                                                    |   |               | \$            | \$          | \$                |                 |  |
|                                                                    |   |               | \$            | \$          | \$                |                 |  |
|                                                                    |   |               | \$            | \$          | \$                |                 |  |
| <input type="checkbox"/> See Attached Itemization         TOTAL    |   |               |               |             | \$                | \$              |  |

| <b>H NOTES AND ACCOUNTS PAYABLE</b>                              |                         |          |                               |                                |                    |                   |                     |
|------------------------------------------------------------------|-------------------------|----------|-------------------------------|--------------------------------|--------------------|-------------------|---------------------|
| PAYABLE TO                                                       | Other Obligors (If Any) | When Due | Notes Due To Rel. and Friends | Notes Due "Others" (Not Banks) | Accounts and Bills | Contracts Payable | Secured by (if any) |
|                                                                  |                         |          | \$                            | \$                             | \$                 | \$                |                     |
|                                                                  |                         |          | \$                            | \$                             | \$                 | \$                |                     |
|                                                                  |                         |          | \$                            | \$                             | \$                 | \$                |                     |
| <input type="checkbox"/> See Attached Itemization         TOTALS |                         |          | \$                            | \$                             | \$                 | \$                |                     |

The information contained in this Financial Statement (and its accompanying schedules, if any,) is supporting documentation to an application for new or existing credit, renewal or refinancing for me or for others. I acknowledge that my representations made in this Financial Statement will be relied on by you, as Creditor, in your consideration of the application for credit and your decision process. I warrant that this Financial Statement is true and correct in every detail and accurately represents my financial condition on the date signed below. I authorize you to make all inquiries you deem necessary to verify the accuracy of the information contained in this Financial Statement and to determine my creditworthiness. I will promptly notify you of any subsequent changes which would affect the accuracy of this Financial Statement. I am aware that any knowing or willful false statements or information on this Financial Statement can be a violation of federal law 18 U.S.C. sec. 1014 and may result in criminal prosecution leading to imprisonment, a fine, or both.

I declare that I have read and understand the statements above.

Date Signed \_\_\_\_\_ Signature \_\_\_\_\_ Signature \_\_\_\_\_  
(If applicable for Joint Party)