## FINANCIAL STATEMENT INDIVIDUAL

INDIVIDUAL CREDIT JOINT CREDIT DATE OF STATEMENT If Joint Credit, initial here:

TO FINANCIAL INSTIT	<b>FUTION NAMED:</b>		NAME AND ADDRESS OF INDIVIDUAL:								
E-MAIL ADDRESS	HOME PHONE			SOCIAL SECURITY NUM	OF BIRTH						
EMPLOYER NAME AND ADDRESS			OFFICE I	FFICE PHONE POSITION/TITLE: YEA							
ASSETS (Om	it Cents)		Ll	IABILITIES (Omit C	ents)						
Cash in This Financial Institution (Schedu	ule A)		Note	Notes Payable to Financial Institutions (Schedule F)							
Cash in Other Financial Institutions (Sche		Othe	Other Notes and Accounts Payable (Schedule F)								
Money Market Accounts (Schedule A)			Loar	Loans Secured by Real Estate (Schedule E)							
Notes and Loans Receivable (Schedule B	)		Life	Life Insurance Policy Loans (Schedule D)							
Other Accounts Due Me (Schedule B)				Taxes (Federal, State, Local) Due and Unpaid							
Stocks and Bonds Marketable (Schedule	C)			Credit Card Indebtedness							
Other Stocks and Bonds (Schedule C)			Due	to Brokers in Margi							
Partnership and Proprietorship Interests											
Cash Surrender Value Life Insurance (Sch	nedule D)										
Real Estate Owned (Schedule E)			_								
Other Assets					TOTI	LIADILIT	IEG				
						LIABILIT					
	TOTAL ASSETS			TOT		NET WOR					
			TOTAL LIABILITIES and NET WORTH								
	INCOME AN	<b>ID EXPENS</b>	E for y	ear ending							
Salaries, Wages, Commissions and Bonus				est Paid							
Interest and Dividends			Rent	Paid							
Business and Partnership Income			Fede	eral and State Incom	e Taxes						
Rentals			Othe	Other Taxes							
Income from Estates and Trust			Alin	Alimony, Child Support and Separate Maintenance Paid							
Other (Describe) Alimony, Child Support or Sepa											
need not be revealed if you do not wish to have it consid	ered as a basis										
for repaying any obligation											
	TAL ALL INCOME		_								
			1.4		TOTA						
Federal Income Tax Return has been File	d Through	Any	Additic	nal Assessments?	No Yes	Amount \$	<u> </u>				
	С	ONTINGE	NT LIA	BILITIES							
NATURE OF LIABIL	ITIES			DESCR	RIPTION		AMOUNT				
Liabilities as Endorser, Co Maker or Guar	rantor										
Liabilities on Leases and Contracts											
Liabilities on Letters of Credit											
Contested Tax Liens											
Involvement in Pending Legal Actions, C	laims, Judgments, et	c.									
SCHEDULE A: CASH	IN FINANCIAL IN	STITUTIO	NS ANT	MONEV MADE	T ACCOUNTS						
NAME OF EINANCIAL INSTITUTION							NIDDENT DALANCE				

NAME OF FINANCIAL INSTITUTION	ACCOUNT IN NAME OF:	TYPE OF ACCOUNT	ACCOUNT NUMBER	CURRENT BALANCE		

SCHEDULE B: NOTES AND LOANS RECEIVABLE AND OTHER ACCOUNTS DUE ME																
ORIGINAL AMOUNT DUE FROM			М	BALANCE OF			WING PAYMENT SCHEDULE			2	MATURITY		COLLATERAL			
										_						
SCHEDULE C:						STO	CKS	SAND BO	NDS				-			
ISSUING COMPANY REG			REGISTERED IN NAME OF: 0			OR FACE AMT.			ILUE			IF PLEDGED,	TO WHOM?	WH	ERE TRADED?	
						OF BONDS* Pe			re	+	Total					
										+						
										_	ļ					
*Indicated whether Stocks a	re Common or	Preferred														
SCHEDULE D:						LI	FE I	NSURAN	CE I							
INSURANCE COM	<i>IPANY</i>	POLICY NUMBER		PO	POLICY OWNER		BENEFICIARY			TYPE OF POLICY			ACE AMOUNT	CASH VALUE		LOANS AGAINST POLICY
SCHEDULE E:					REA	L ESTAT	E (In	dicate by	/ Ho	omes	stead)					
			ORIGIN	RIGINAL COST MARKE						,		PAYABLE TO:	MORTGA	MORTGAGE AMT. PE		
			-													
SCHEDULE F:		NOTES A	ANI	) ACCO	UNTS	PAYABL	E TC	<b>FINANC</b>	IAL I	NST	TTUTIO	NS A	ND OTHERS	5		
D	UE TO WHON	М			AMO	UNT	НОИ	PAYABLE	Λ	IATU	RITY		COLL	ATERAL PLE	EDGEL	)
			~~~~													
					ICH UNDERSIGNED IS A PR F BUSINESS % OWNERSHIP					CIPAL O sition/ti		1	CIAL INSTITUTION OF ACCOUNT			
NAME AND ADDRESS OF BUSINESS				TYPE OF BUSINESS							LL				FACCOUNT	
Has Undersigned ex		~	-					Yes	]		-		of Executor			
Has Undersigned ma	-	-	or be	nefit of o	creditor	s or been i	nvol	ved in bank	ruptcy	y pro	oceedings	durin	g the past ten	years?		Yes No
If yes, please st Marital Status (Do n			ing	for indiv	idual u	secured c	redit	).								
Married								orced or wid	owed	)		N	umber of Dep	endents		
			_					NATURES		,						
This Financial Statemen	nt, supporting	g schedules	s and	informati	ion are su	ibmitted by	the U	ndersigned to	the h	erein	named Fir	ancial	Institution for th	ne purpose of	f establ	lishing, obtaining
or maintaining credit. It																
Undersigned to check ch	eun and emp	noyment ni	story	, to verify	me accu	acy of the fi	norm	ation contain	zu nere	ni, ar	iu io answe	i ques	HOUS ADOUT ITS CTO	eun experien	ce with	i me Undersigned.
	SIGNAT	URE					DATE	SIGNED		WITNESS						
SIGNATURE				DATE SIGNED				WITNESS								