

FINANCIAL STATEMENT – INDIVIDUAL

 Individual Credit Joint Credit

DATE OF STATEMENT _____

If Joint Credit, initial here: _____

TO FINANCIAL INSTITUTION NAMED:	NAME OF INDIVIDUAL:

HOME ADDRESS	HOME PHONE	SOCIAL SECURITY NUMBER	DATE OF BIRTH
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ASSETS (Omit Cents)		LIABILITIES (Omit Cents)	
Cash in This Financial Institution (Schedule A)		Notes Payable to Financial Institutions (Schedule J)	
Cash in Other Financial Institutions (Schedule A)		Other Notes Payable (Schedule J)	
Money Market Accounts (Schedule A)		Loans Secured by Real Estate (Schedule F)	
Notes and Loans Receivable (Schedule B)		Life Insurance Policy Loans (Schedule E)	
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 Margin Accounts (Schedule K)	
Partnership and Proprietorship Interests (Schedule D)		Other Accounts and Bills Payable (Schedule K)	
Cash Surrender Value Life Insurance (Schedule E)			
Real Estate Owned (Schedule F)			
Oil and Gas Interests (Schedule G)			
Vested Pension and Retirement Funds (Schedule H)			
IRA and Keough Plans (Schedule H)			
Other Personal Assets (Schedule I)			
		<i>TOTAL LIABILITIES</i>	
		<i>NET WORTH</i>	
		<i>TOTAL LIABILITIES and NET WORTH</i>	
<i>TOTAL ASSETS</i>			

INCOME AND EXPENSE for year ending _____			
Salaries and Wages		Interest Paid	
Commissions and Bonuses		Rent Paid	
Interest Income		Federal and State Income Taxes	
Dividend Income		Other Taxes	
Business Income		Alimony, Child Support and Separate Maintenance Paid	
Pensions, Annuities, Retirement and Social Security			
Rents			
Alimony, Child Support and Separate Maintenance: (Exclude if you do not wish this income to be considered as a basis for repaying any obligation)			
Other Income			
<i>TOTAL ALL INCOME</i>		<i>TOTAL</i>	

Federal Income Tax Return has been Filed Through _____. Any Additional Assessments? No Yes Amount \$ _____

CONTINGENT LIABILITIES		
NATURE OF LIABILITY	DESCRIPTION	AMOUNT
Liabilities as Endorser, Co-Maker or Guarantor		
Liabilities on Leases and Contracts		
Liabilities on Letters of Credit		
Contested Tax Liens		
Involvement in Pending Legal Actions, Claims, Judgments, etc.		

SCHEDULE A: CASH IN FINANCIAL INSTITUTIONS AND MONEY MARKET ACCOUNTS

<i>NAME OF FINANCIAL INSTITUTION</i>	<i>ACCOUNT IN NAME OF:</i>	<i>TYPE OF ACCOUNT</i>	<i>ACCOUNT NUMBER</i>	<i>CURRENT BALANCE</i>

SCHEDULE B: NOTES AND LOANS RECEIVABLE AND OTHER ACCOUNTS DUE ME

<i>ORIGINAL AMOUNT</i>	<i>DUE FROM</i>	<i>BALANCE OWING</i>	<i>PAYMENT SCHEDULE</i>	<i>MATURITY</i>	<i>COLLATERAL</i>

SCHEDULE C: STOCKS AND BONDS

<i>ISSUING COMPANY</i>	<i>REGISTERED IN NAME OF:</i>	<i>NO. OF SHARES OR FACE AMT. OF BONDS*</i>	<i>VALUE</i>		<i>IF PLEDGED, TO WHOM?</i>	<i>WHERE TRADED?</i>
			<i>Per Share</i>	<i>Total</i>		

*Indicate whether Stocks are Common or Preferred.

SCHEDULE D: PARTNERSHIP AND PROPRIETORSHIP INTERESTS

<i>NAME OF PARTNERSHIP OR PROPRIETORSHIP</i>	<i>PERCENT OWNERSHIP</i>	<i>ORIGINAL COST</i>	<i>PRESENT VALUE</i>	<i>IF PLEDGED, TO WHOM?</i>

SCHEDULE E: LIFE INSURANCE							
INSURANCE COMPANY	POLICY NUMBER	POLICY OWNER	BENEFICIARY	TYPE OF POLICY	FACE AMOUNT	CASH VALUE	LOANS AGAINST POLICY

SCHEDULE F: REAL ESTATE OWNED (✓ Indicates Homestead)								
PARCEL NUMBER	LOCATION and DESCRIPTION OF IMPROVEMENTS	✓	YEAR ACQUIRED	COST	APPRAISAL			NAME OF TITLE HOLDER
					By Whom	Date	Amount	
1.								
2.								
3.								
4.								
5.								

PARCEL NUMBER	MORTGAGE OR OTHER LIEN	PAYABLE TO:	ORIGINAL AMOUNT	PRESENT BALANCE	INTEREST RATE	AMOUNT PAYABLE PER MONTH	AMOUNT OF INSURANCE
1.	1st						
	2nd						
2.	1st						
	2nd						
3.	1st						
	2nd						
4.	1st						
	2nd						
5.	1st						
	2nd						

SCHEDULE G: OIL and GAS INTERESTS							
LEGAL DESCRIPTION	WI OR RI	NET REVENUE INTEREST	MONTHLY INCOME	MONTHLY EXPENSE	PRESENT VALUE	PURCHASER OF PRODUCT	

SCHEDULE H: VESTED PENSIONS, RETIREMENT FUNDS, IRA, KEOUGH		SCHEDULE I: OTHER PERSONAL ASSETS	
DESCRIPTION	AMOUNT	DESCRIPTION	AMOUNT

SCHEDULE J: NOTES PAYABLE TO FINANCIAL INSTITUTIONS AND OTHERS

<i>DUE TO WHOM</i>	<i>AMOUNT</i>	<i>HOW PAYABLE</i>	<i>MATURITY</i>	<i>COLLATERAL PLEDGED</i>

SCHEDULE K: OTHER ACCOUNTS and BILLS PAYABLE INCLUDING AMOUNTS DUE BROKER

<i>DESCRIPTION</i>	<i>AMOUNTS</i>	<i>DESCRIPTION</i>	<i>AMOUNTS</i>
TOTAL			

SCHEDULE L: BUSINESSES IN WHICH UNDERSIGNED IS A PRINCIPAL OR PARTNER

<i>NAME AND ADDRESS OF BUSINESS</i>	<i>TYPE OF BUSINESS</i>	<i>% OWNERSHIP</i>	<i>POSITION/TITLE</i>	<i>FINANCIAL INSTITUTION OF ACCOUNT</i>

Has Undersigned executed a will disposing of estate in event of death? Yes No If yes, name of Executor _____

Has Undersigned made an assignment for benefit of creditors or been involved in bankruptcy proceedings during the past ten years? Yes No

If yes, please state details: _____

Marital Status (Do not complete if applying for individual unsecured credit):

Married Separated Unmarried (Including single, divorced or widowed) Number of Dependents _____

<i>EMPLOYER NAME AND ADDRESS</i>	<i>POSITION/TITLE</i>	<i>YEARS EMPLOYED</i>

SIGNATURES

This Financial Statement, supporting schedules and information are submitted by the Undersigned to the herein named Financial Institution for the purpose of establishing, obtaining, or maintaining credit. It is a true, complete, and correct representation of the Undersigned's financial condition as of the date shown above. The Financial Institution is authorized by the Undersigned to check credit and employment history, to verify the accuracy of the information contained herein, and to answer questions about its credit experience with the Undersigned.

SIGNATURE *DATE SIGNED* *WITNESS*

SIGNATURE *DATE SIGNED* *WITNESS*