PERSONAL FINANCIAL STATEMEN	Т		CONFIDENTIAL
Full Name			
Address		City	
SSN		State ZIP	
Spouse's Name		(Provide spouse's address if different from above)	_
Spouse's SSN		<u>-</u>	
Statement Date As of (mm/dd/yy)			
The undersigned submits the following as beir	•		
on the date shown above and acknowledges t		· · · · · · · · · · · · · · · · · · ·	
ASSETS	Amount	LIABILITIESCURRENT	Amount
Cash on Hand and in Banks		Notes Payable to BandsSecured	
U.S.Gov't Securitiessee schedule		Notes Payable to BandsUnsecured	
Listed Securitiessee schedule		Notes Payable to Relatives	
Unlisted Securitiessee schedule		Notes Payable to Others	
Accounts ReceivableRelativessee schedule		Accounts Payable	
Notes ReceivableRelativessee schedule		Unpaid Income Tax	
Real Estate OwnedResidence		Other Unpaid Taxes	
Real Estate OwnedOther		Real Estate Mortgages PayableResidence	
Real Estate Mortgages Receivable		Real Estate Mortgages PayableOther	
Automobiles and Other Personal Property		Other DebtsList	
Cash Value Life Insurance			
Other AssetsList			
		LIABILITIESLONG TERM	
		Real Estate Mortgages PayableResidence	
		Real Estate Mortgages PayableOther	
		Other Long Term DebtList	
		TOTAL LIABILITIES	<u> </u>
		TOTAL EMBILITIES	<u></u>
TOTAL 4005T0		(Total Assets - Total Liabilities = NET WORT	
TOTAL ASSETS		TOTAL LIABILITIES + NET WORT	п
SOURCES OF INCOME		PERSONAL INFORMATION	
Salary		Business Occupation	
Bonuses and Commissions			
Dividends			
Real Estate Income		Spouse Occupation	
Other IncomeList		Dependents	
		Partner or Officer in any Other Business-List	
INCOME TOTAL		Do you have a will?	
CONTINUENT LIABILITIES		DENIEDAL INFORMATION	1
CONTINGENT LIABILITIES		GENERAL INFORMATION	
As Endorser Co-Maker, or Guarantor		Are any assets pledged?	
On Leases or Contracts		Are you a defendant in any suits or legal actions	?
Legal Claims		Have you ever declared bankruptcy?	
Provisions for Federal Income Taxes		If so, when?	İ

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SCHEDULE OF U.S. GOVERNMENT SECURITIES, STOCKS, AND BONDS OWNED Number Value: Value: of Shares Description In Name Of Cost Market SCHEDULE OF REAL ESTATE MORTGAGES RECEIVABLE **Date Acquired Description of Property Covered** Location of Property (Street, City, and State) Cost Market Mortgage Monthly Monthly Remaining **Payment** Income Title in Name Of **SCHEDULE OF LIFE INSURANCE CARRIED** Name of Insured Beneficiary Name of Insurance Company **Face Value Amount Borrowed** SCHEDULE OF ACCOUNTS RECEIVABLE From Whom Due (Name) **Amount** When Due Secured? **Description of Security** Yes No Yes No Yes No **SCHEDULE OF NOTES RECEIVABLE** From Whom Due (Name) Amount **Date of Maturity** Secured? **Description of Security** Yes No Yes No Yes No **SCHEDULE OF NOTES PAYABLE** To Whom Due (Name) **Amount Date of Maturity** Secured? **Description of Security** Yes No Yes No Yes No Signature Name (Printed)

Date

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Signature