This Form has "Fill-in" Blanks. Please Complete on your Computer, go to FILE and save as (yourname.pdf.) Electronically sign ONLY. DO NOT HAND WRITE

PERSONAL FINANCIAL STATEMENT

CLIENT: _____ **FINANCIAL CONDITION AS OF:** _____

THIS IS A STATEMENT OF ☐ MY INDIVIDUAL FINANCIAL CONDITION ☐ OUR JOINT FINANCIAL CONDITION ☐ TRUST FINANCIAL CONDITION ONLY

THIS STATEMENT ☐ DOES ☐ DOES NOT INCLUDE ASSETS HELD IN A TRUST, IRA OR OTHER RETIREMENT ACCOUNT.

If this statement does include such assets, please indicate the name of the trust, as applicable, as well as the type and value of assets, and where they are held: _____

ASSETS		**LIABILITIES**	
CASH	$	NOTES PAYABLE BANKS (ITEMIZED)	$
SAVINGS & CERTIFICATES OF DEPOSIT		BANK	
ACCOUNTS & NOTES RECEIVABLE		SECURED BY	
U.S. SECURITIES (ITEMIZED)		BANK	
STOCKS & BONDS (ITEMIZED)		SECURED BY	
CASH VALUE LIFE INSURANCE		BANK	
OTHER ASSETS		SECURED BY	
		NOTES PAYABLE FRIENDS & RELATIVES	
		NOTES PAYABLE OTHERS	
		ACCOUNTS PAYABLE	
		INTEREST & TAX DUES	
TOTAL CURRENT ASSETS	$	**TOTAL CURRENT LIABILITIES**	$
REAL ESTATE & BUILDINGS (ITEMIZED)		REAL ESTATE MORTGAGE (ITEMIZED)	
FURNITURE, FIXTURES & EQUIPMENT		OTHER TERM DEBT	
AUTOMOBILES & TRUCKS			
OTHER ASSETS			
		TOTAL LIABILITIES	$
		NET WORTH	$
TOTAL ASSETS	$		$

DETAILED LIST OF STOCKS & BONDS (ATTACH EXTRA SHEET IF NECESSARY)

DESCRIPTION	EXCHANGE LISTED	QUANTITY	PRICE PER SHARE	APPROX. VALUE
				$
			TOTAL $	$

NOTES, CONTRACTS, AND ACCOUNTS PAYABLE (DO NOT INCLUDE MORTGAGES)

LIST BELOW ALL LOANS, DEBTS AND ACCOUNTS OWING BY YOU, CLISSIFIED AS "NOTES PAYABLE," "CONTRACTS PAYABLE," AND "ACCOUNTS PAYABLE". (ATTACH EXTRA SHEET IF NECESSARY)

FIRM NAME	FIRM ADDRESS	PURPOSE	ACCOUNT NUMBER	MONTHLY PAYMENT	ORIGINAL AMT.	ESTIMATED PRESENT AMT.
						$
					TOTAL	$

REAL ESTATE

PARCEL NO.	DETAILED REAL ESTATE	TITLE IN NAME OF	MONTHLY INCOME	MONTHLY EXPENSES	COST	DATE ACQUIRED	IMPROV-EMENTS	ESTIMATED VALUE

								$
							TOTAL	$

ABOVE PARCELS	TO WHOM PAYABLE	HOW PAYABLE	ANNUAL TAXES	ACCT. #	MATURITY DATE	ORIGINAL AMT.	PRESENT BALANCE
		$ /					$
		$ /					
		$ /					
						TOTAL	$

ANNUAL CASH INCOME	**AMOUNT(S)** IN WHOLE $	**ANNUAL CASH EXPENDITURES**	**AMOUNT(S)** IN WHOLE $
CLIENT SALARY BONUSES & COMMISSIONS	$	INTEREST AND PRINCIPAL PAYMENTS ON REAL ESTATE LOANS	$
INTEREST INCOME		RESIDENTIAL RENT PAYMENTS	
DIVIDEND INCOME		INTEREST AND PRINCIPAL PAYMENTS LOANS OTHER THAN REAL ESTATE	
ALIMONY/CHILD SUPPORT*		INCOME TAXES	
BUSINESS INCOME		INSURANCE	
CAPITAL GAINS		ALIMONY/CHILD SUPPORT	
NET RENTAL INCOME**		PARTNERSHIP, S CORP, LLC & LLP DISTRIBUTIONS	
PARTNERSHIP, S CORP, LLC & LLP DISTRIBUTIONS		PERSONAL LIVING EXPENSES	
GIFT INCOME		EDUCATIONAL LOANS	
RECEIVABLE INCOME		OTHER EXPENSES (LIST)	
OTHER INCOME (LIST)*			
TOTAL CASH INCOME	**$**	**TOTAL CASH EXPENDITURES**	**$**

* ALIMONY, CHILD SUPPORT OR SEPARATE MAINTENANCE INCOME NEED NOT BE REVEALED UNLESS YOU WISH TO HAVE IT CONSIDERED IN DETERMINING YOUR CREDIT WORTHINESS.
** NET RENTAL INCOME BEFORE INTEREST AND DEPRECIATION EXPENSES

PLEASE ANSWER THE FOLLOWING QUESTIONS (PLEASE ATTACH DETAILS FOR EACH ITEM MARKED YES):	**YES**	**NO**
1. HAVE YOU OR ANY FIRM IN WHICH YOU ARE A MAJOR OWNER OR GUARANTOR EVER DECLARED BANKRUPTCY OR HAD A JUDGMENT AGAINST YOU?	☐	☐
2. HAVE YOU EVER VOLUNTARILY SURRENDERED OR HAD A VEHICLE, APPLIANCE OR ANY OTHER ITEM REPOSSESSED?	☐	☐
3. ARE ANY OF YOUR TAX RETURNS CURRENTLY BEING AUDITED OR CONTESTED?	☐	☐
4. ARE YOU A GUARANTOR, CO-MAKER OR ENDORSER ON DEBT OF ANY PERSON OR ENTITY?	☐	☐
5. ARE ANY ASSETS PLEDGED OR DEBTS SECURED EXCEPT AS INDICATED?	☐	☐
6. ARE ANY SIGNIFICANT CHANGES IN INCOME OR EXPENSES EXPECTED IN THE NEXT 12 MONTHS?	☐	☐

This signed Personal Financial Statement does not represent in and of itself an application for credit.

I hereby affirm that each of the answers in the foregoing Confidential Personal Financial Statement is true and correct. I authorize you to obtain information from my accountant and any source(s) to which you may apply relative to this Statement, each such source being hereby authorized to provide you with such information. This Statement in any event shall be and remain your property. Should any situation arise which changes any representation made by me in the Statement, I will notify you thereof promptly. I also authorize you to provide to other qualified credit grantors such information as they may request.

X	DATE:	**X**	DATE:
PRINTED NAME AND TITLE:		**PRINTED NAME AND TITLE**:	

Social Security #:_____ Social Security #:_____

Address:_____ Address:_____

_____ _____

City:_____ST_____ZIP_____ City:_____ST_____ZIP_____