

PERSONAL FINANCIAL STATEMENT

TO -				<input type="checkbox"/> MARRIED	<input type="checkbox"/> UNMARR.
NAME IN FULL				<input type="checkbox"/> DATE MARR.	<input type="checkbox"/> SEP.
RESIDENCE ADDRESS (NO. & STREET, CITY, STATE, ZIP CODE)		YRS. AT ADDRESS	TELEPHONE & EXT.	YEARS OF EDUCATION (CHECK ONE)	
PREVIOUS ADDRESS IF AT ABOVE ADDRESS LESS THAN 5 YEARS (NO. & STREET, CITY, STATE, ZIP CODE)				<input type="checkbox"/> 12 YEARS	<input type="checkbox"/> UNDER 12 YEARS
				<input type="checkbox"/> 16 YRS AND OVER	<input type="checkbox"/> 13-18 YRS
(1) EMPLOYER		(2) ADDRESS (NO. & STREET)		CITY	TELEPHONE & EXT.

CO-BORROWER INFORMATION SECTION

CO-BORROWER'S NAME		SOCIAL SECURITY NO.	AGE
CO-BORROWER'S EMPLOYER		ADDRESS (NO. & STREET)	CITY
			TELEPHONE & EXT.

FINANCIAL CONDITION AS OF _____, 20____

ASSETS		AMOUNT		LIABILITIES		AMOUNT	
CASH	Office			NOTES PAYABLE TO BANKS	Office		
	Other Banks				Other (Itemize, Schedule 4)		
STOCKS AND BONDS	Listed (Schedule 1)			OTHER NOTES AND ACCOUNTS PAYABLE	Real Estate Loans (Schedule 2)		
	Unlisted (Schedule 1)				Sales Contracts & Sec. Agreements (Sch.4)		
REAL ESTATE	Improved (Schedule 2)				TAXES PAYABLE	Loans on Life Insurance Policies (Sch.4)	
	Unimproved (Schedule 2)			Current Year's Income Taxes Unpaid			
	Trust Deeds and Mortgages (Schedule 3)			Prior Years' Income Taxes Unpaid			
LIFE INSURANCE	Cash Surrender Value			OTHER LIABILITIES	Real Estate Taxes Unpaid		
	Relatives and Friends (Schedule 4)				Unpaid Interest		
ACCOUNTS AND NOTES RECEIVABLE	Collectible (Schedule 4)			OTHER LIABILITIES	Others (Itemize, Schedule 4)		
	Doubtful (Schedule 4)						
	Other (Itemize, Schedule 4)						
OTHER PERSONAL PROPERTY	Automobile			TOTAL LIABILITIES			
	Other (Itemize, Schedule 4)			NET WORTH			
TOTAL				TOTAL			

ANNUAL INCOME		ANNUAL EXPENDITURES	
SALARY OR WAGES		PROPERTY TAXES AND ASSESSMENTS	
DIVIDENDS AND INTEREST		FEDERAL AND STATE INCOME TAXES	
RENTALS (GROSS)		REAL ESTATE LOAN PAYMENTS	
BUSINESS OR PROFESSIONAL INCOME (NET)		PAYMENTS ON CONTRACTS AND OTHER NOTES	
OTHER INCOME DESCRIBE (Spousal and child support and maintenance income need not be listed unless it is to be considered for granting credit)		INSURANCE PREMIUMS	
		ESTIMATED LIVING EXPENSES	
		OTHER (Alimony, Child Support, Maintenance)	
TOTAL INCOME		TOTAL EXPENDITURES	

LIFE INSURANCE	FACE AMOUNT	BENEFICIARY	COMPANY

Give details of any contingent liability as endorser or guarantor, or on suits or judgments pending. (If necessary, use separate sheet.)

Have you ever filed any petition under the Bankruptcy Act? _____

Are any of the assets listed on this statement held under a Trust Agreement? Yes No _____

SCHEDULE 1: LISTED AND UNLISTED STOCKS AND BONDS OWNED

NO. OF SHARES OR PAR VALUE	Description	Issued in Name of	Joint Tenancy	Market Value
			Ten. In Common Comm. Property	
LISTED:				
TOTAL LISTED				
UNLISTED:				
TOTAL UNLISTED				

Are any of the above listed securities pledged to secure a debt? _____

SCHEDULE 2: REAL ESTATE OWNED (DESIGNATE: I - IMPROVED, U - UNIMPROVED.)

Location or Description	Title in Name of	Joint Tenancy Ten. In Common Comm. Property	Cost	Present Value	Trust Deeds, Mortgages or other Liens			
					Unpaid Bal.	Rate %	MONTHLY PAYMENT	Held By
TOTAL								

SCHEDULE 3: TRUST DEEDS AND MORTGAGES OWNED

Name of Payer	Legal Desc., Street Address, & Type of Improvements	Unpaid Bal.	Joint Tenancy	Terms	1st or 2nd Lien	Value of Property
			Ten. In Common Comm. Property			

SCHEDULE 4: DETAILS RELATIVE TO OTHER IMPORTANT ASSETS AND LIABILITIES

I hereby certify that I have carefully read and filled out the above, including the reverse side, and it is a complete, true and correct statement to the best of my knowledge and belief.

Date Signed _____, 20____ (Sign Here) _____

(Sign Here) _____