

PERSONAL FINANCIAL STATEMENT

DATE

NAME: _____

ADDRESS: _____

CITY, STATE & ZIP: _____

SOCIAL SECURITY NUMBER: _____

PHONE NUMBER: _____

ASSETS

CASH ON HAND AND IN DEPOSITORY ACCOUNTS	\$ _____
STOCKS (SEE REVERSE)	_____
BONDS (SEE REVERSE)	_____
REAL ESTATE (SEE REVERSE)	_____
AUTOMOBILES	_____
CASH SURRENDER VALUE OF LIFE INSURANCE	_____
FURNITURE & APPLIANCES	_____
OTHER ASSETS: (DESCRIBE) _____	_____
OTHER ASSETS: (DESCRIBE) _____	_____
OTHER ASSETS: (DESCRIBE) _____	_____
TOTAL ASSETS	\$ _____

LIABILITIES

REAL ESTATE LOANS	\$ _____
NOTES PAYABLE TO BANKS	_____
REVOLVING DEBT (CREDIT CARDS, ETC.)	_____
AMOUNTS PAYABLE TO OTHERS	_____
OTHER LIABILITIES: (DESCRIBE) _____	_____
TOTAL LIABILITIES	\$ _____

NET WORTH: (TOTAL ASSETS LESS TOTAL LIABILITIES) \$ _____

DO YOU HAVE ANY CONTINGENT LIABILITIES? _____ YES, _____ NO
(IF YES, PLEASE DESCRIBE ON REVERSE SIDE)

SCHEDULE OF STOCKS OWNED

NUMBER OF SHARES OWNED	DESCRIPTION	PLEGDED?	VALUE

SCHEDULE OF BONDS OWNED

NUMBER OF SHARES OWNED	DESCRIPTION	PLEGDED?	VALUE

SCHEDULE OF REAL ESTATE OWNED

DESCRIPTION	OWNER OF RECORD	BALANCE OF MORTGAGE	VALUE
HOME			
RENTAL			
RENTAL			
BUSINESS			
BUSINESS			
OTHER			
OTHER			

DESCRIPTION OF CONTINGENT LIABILITIES: _____

The information contained in this statement is provided to induce you to extend or continue the extension of credit to the undersigned or to others upon the guaranty of the undersigned. The undersigned acknowledge and understand that you are relying on the information contained herein in deciding to grant or continue an extension of credit. Each of the undersigned represents, warrants and certifies that the information provided herein is true, correct and complete. You are authorized to make all inquiries you deem necessary to verify the accuracy of the information contained herein, and to determine the credit-worthiness of the undersigned and to answer any questions about your credit experience with the undersigned.

 SIGNATURE

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